

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 - MEDICAL BOARD

Notice is hereby given in accordance with GS. 150B-21.1 that the Medical Board intends to adopt the rules cited as 21 NCAC 32B .1706; 32W .0116 and amend the rule cited as 21 NCAC 32S .0219.

Codifier of Rules approved this rule as an emergency rule effective October 2, 2018 and received for publication the following notice and proposed temporary rules on September 21, 2018.

Public Hearing:

Date: October 4, 2018

Time: 10:00 a.m.

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

Reason for Proposed Temporary Action: A serious unforeseen threat to the public health, safety or welfare. Beginning on September 13, 2018, Hurricane Florence impacted North Carolina. Thousands of residents have been displaced and relocated to shelters, have lost power, and have had homes damaged or destroyed. North Carolina needs additional healthcare providers to cover the need created by Florence. The Board finds that Hurricane Florence poses a serious and unforeseen threat to the public health and safety. To counter this threat, the Board adopted an emergency suspending and modifying certain licensing requirements. The rules will allow for an expeditious influx of needed physicians, physician assistants and Anesthesiologist Assistants to the state, providers undergo the typical licensing process, which can take several weeks or months.

Comment Procedures: Comments from the public shall be directed to: Wanda Long, Rule-making Coordinator, 1203 Front Street, Raleigh, NC 27609, phone (919) 326-1109 ext. 212, email wanda.long@ncmedboard.org. The comment period begins September 26, 2018 and ends October 19, 2018.

SUBCHAPTER 32B – LICENSE TO PRACTICE MEDICINE

SECTION .1700 – OTHER LICENSES

21 NCAC 32B .1706 PHYSICIAN PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES

(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set forth below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for physicians to practice under this Rule:

- (1) Hospital to Hospital Credentialing: A physician who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may come to North Carolina and practice medicine at a hospital that is licensed by the North Carolina Department of Health and Human Services upon the following terms and conditions:
 - (A) the licensed North Carolina hospital shall verify all physician credentials and privileges;
 - (B) the licensed North Carolina hospital shall keep a list of all physicians coming to practice and shall provide this list to the Board within 10 days of each physician practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each physician has stopped practicing medicine in North Carolina under this Section within 10 days after each physician has stopped practicing medicine under this Section;
 - (C) all physicians practicing under this Section shall be authorized to practice medicine in North Carolina and shall be deemed to be licensed to practice medicine in the State of North Carolina and the Board shall have jurisdiction over all physicians practicing under this Section 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 any and all physicians have stopped practicing medicine under this Section;
 - (D) a physician may practice under this Section for the shorter of (a) 30 days from the date the physician has started practicing under this Section or (b) 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 deemed to be issued shall become inactive; and
 - (E) physicians practicing under this Section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: A physician who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
 - (A) the applicant must complete a limited emergency license application;

- (B) the Board shall verify that the physician holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district;
- (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician's scope of practice;
- (D) the Board shall have jurisdiction over all physicians practicing under this Section 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 has stopped practicing medicine under this Section or the Limited Emergency License has expired;
- (E) this license shall be in effect for the shorter of (a) 30 days from the date it is issued or (b) 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; and
- (F) physicians holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.

Authority G.S. 90-12.5; 90-13.2(e); 90-14(a); 166A-45.

SUBCHAPTER 32S - PHYSICIAN ASSISTANTS

SECTION .0200 – PHYSICIAN ASSISTANT REGISTRATION

21 NCAC 32S .0219 **PHYSICIAN ASSISTANT PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES**

~~(a) The Board shall, pursuant to G.S. 90-12.5, issue a limited physician assistant license under the following conditions:~~

- ~~(1) the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has enacted an ordinance to deal with states of emergency under G.S. 14-288.12, 14-288.13, or 14-288.14, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes, G.S. 160A-174(a) or G.S. 153A-121(a);~~
- ~~(2) the applicant provides government issued photo identification;~~
- ~~(3) the applicant provides proof of licensure, certification or authorization to practice as a physician assistant in another state, the District of Columbia, US Territory or Canadian province;~~
- ~~(4) applicant affirms under oath that such license is in good standing; and~~
- ~~(5) no grounds exist pursuant to G.S. 90-14(a) for the Board to deny a license.~~

~~(b) In response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician assistant's scope of practice including, but not limited to, the following: geography; term; type of practice; prescribing, administering and dispensing therapeutic measures, tests, procedures and drugs; supervision; and practice setting.~~

~~(c) The physician assistant must practice under the direct supervision of an on-site physician. The supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5 and 21 NCAC 32B .1705. The physician assistant may perform only those medical acts, tasks, and functions delegated by the supervising physician and not limited by the physician assistant's scope of practice as set out in Paragraph (b) of this Rule.~~

~~(d) A team of physician(s) and physician assistant(s) practicing pursuant to this Rule is not required to maintain on-site documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required by 21 NCAC 32S .0213.~~

~~(e) A physician assistant holding a Limited Physician Assistant License for Disasters and Emergencies shall not receive any other or additional compensation outside his or her usual compensation, either direct or indirect, monetary, in kind, or otherwise for the provision of medical services during a disaster or emergency.~~

~~(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set forth below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for physician assistant assistants to practice under this Rule:~~

- (1) Hospital to Hospital Credentialing: A physician assistant who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may come to North Carolina and practice medicine at a North Carolina hospital that is licensed by the North Carolina Department of Health and Human Services upon the following terms and conditions:
 - (A) the licensed North Carolina hospital shall verify all physician assistant credentials and privileges;
 - (B) the licensed North Carolina hospital shall keep a list of all physician assistants coming to practice and their respective supervising physicians and shall provide this list to the Board within 10 days of each physician assistant practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each physician assistant has stopped practicing medicine in North Carolina under this Section within 10 days after each physician assistant has stopped practicing medicine under this Section;
 - (C) all physician assistants practicing under this section shall be authorized to practice medicine in North Carolina and deemed to be licensed to practice medicine in the State of North Carolina and the Board shall have jurisdiction over all physician assistants practicing under this Section 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 any and all physician assistants have stopped practicing medicine under this Section;

- (D) the physician assistant must practice under the direct supervision of an on-site physician and the supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5;
 - (E) a physician assistant may practice under this Section for the shorter of (a) 30 days from the date the physician assistant has started practicing under this Section or (b) 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 deemed to be issued shall become inactive; and
 - (F) physician assistants practicing under this section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: A physician assistant who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
- (A) the applicant must complete a limited emergency license application;
 - (B) the Board shall verify that the physician assistant holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district;
 - (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician assistant assistant's scope of practice;
 - (D) the physician assistant must practice under the direct supervision of an on-site physician and the supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5;
 - (E) physician assistants and physicians practicing pursuant to this Rule are not required to maintain onsite documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required by 21 NCAC 32S .0213;
 - (F) the Board shall have jurisdiction over all physician assistants practicing under this section 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 assistant has stopped practicing medicine under this section or the Limited Emergency License has expired;
 - (G) this license shall be in effect for the shorter of (a) 30 days from the date it is issued or (b) 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; and
 - (H) physician assistants holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (3) National Guard supervision waiver. The rules of this Subchapter are waived during a declared state of emergency by the Governor of the State of North Carolina or by a resolution of the North Carolina General Assembly for members of the North Carolina National Guard who are actively licensed as physician assistants in the State of North Carolina and are serving in a State Active Duty status.

Authority G.S. 90-12.5; 90-18(c)(13); 90-13.2(e); 90-14(a); 166A-45

SUBCHAPTER 32W - ANESTHESIOLOGIST ASSISTANT REGULATIONS

21 NCAC 32W .0116 ANESTHESIOLOGIST ASSISTANT PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES

(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set for below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for anesthesiologist assistants to practice under this Rule:

- (1) Hospital to Hospital Credentialing: A anesthesiologist assistant who holds an unrestricted license in good standing to practice as an anesthesiologist assistant in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may practice at a licensed North Carolina hospital upon the following terms and conditions:
 - (A) the licensed North Carolina hospital shall verify all anesthesiologist assistant credentials and privileges;
 - (B) the licensed North Carolina hospital shall keep a list of all anesthesiologist assistants coming to practice and shall provide this list to the Board within 10 days of each anesthesiologist assistant practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each anesthesiologist assistant has stopped practicing at the hospital under this Section within 10 days after each anesthesiologist assistant has ceased practicing under this Section;
 - (C) all anesthesiologist assistants practicing under this section shall be authorized to practice in North Carolina and deemed to be licensed in North Carolina and the Board shall have jurisdiction over all anesthesiologist assistants practicing under this section for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General Statutes, and the Board shall retain jurisdiction over any and all anesthesiologist assistants after they have stopped practicing under this section;
 - (D) anesthesiologist assistants may practice under this Section for the shorter of (a) 30 days from the date the anesthesiologist assistant has started practicing under this Section or (b) a statement is made by the Governor

- or the Governor's designee that the emergency or disaster declaration has been withdrawn or ended and, at such time, the license deemed to be issued shall become inactive; and
- (E) anesthesiologist assistants practicing under this section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: An anesthesiologist assistant who holds an unrestricted license in good standing to practice as an anesthesiologist assistant in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
- (A) the applicant must complete an application;
- (B) the Board shall verify that the anesthesiologist assistant holds an unrestricted license in good standing to practice in another U.S. state, territory or district;
- (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the anesthesiologist assistant's scope of practice;
- (D) the Board shall have jurisdiction over all anesthesiologist assistants practicing under this section for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General Statutes, and the Board shall retain jurisdiction over any and all anesthesiologist assistants after they have stopped practicing under this Section;
- (E) this license shall be in effect for the shorter of (a) 30 days from the date the anesthesiologist assistant has started practicing under this Section or (b) a statement is made by the Governor or the Governor's designee that the emergency or disaster declaration has been withdrawn or ended and, at such time the license issued shall become inactive; and
- (F) anesthesiologist assistants holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.

Authority G.S. 90-12.5; 90-13.2(e); 90-14(a); 166A-45.

TITLE 21 – OCCUPATIONAL LICENSING BOARDS AND COMMISSIONS

CHAPTER 32 - MEDICAL BOARD

Rule-making Agency: *North Carolina Medical Board*

Rule Citation: *21 NCAC 32B .1706, .0219; 32W .0116*

Effective Date: *October 2, 2018*

Findings Reviewed and Approved by the Codifier: *September 24, 2018*

Reason for Action: *On September 13, 2018, Hurricane Florence impacted the coast of North Carolina causing massive storm surge on the outer banks. The next day, Florence made landfall on the southeast coast near Wilmington. Heavy rains persisted for several days before Florence finally exited the state. All of North Carolina was impacted by the storm with the brunt being felt heaviest in the southeast. Thousands of residents have been displaced and relocated to shelters, have lost power, and have had homes damaged or destroyed. To date, 31 fatalities in North Carolina have been attributed to Florence. Given the massive damage and displacement of individuals from their homes, North Carolina needs additional healthcare providers to cover the need created by Florence. The Board finds that Hurricane Florence poses a serious and unforeseen threat to the public health and safety. To counter this threat, the Board adopted an emergency rule suspending and modifying certain licensing requirements. The emergency rule will allow for an expeditious influx of needed physicians, physician assistants (PA) and Anesthesiologist Assistants (AA) to the state, without having the out of state providers undergo the typical licensing process, which can take several weeks or months. The Board's present rules for emergencies and disasters do not allow for a quicker method of allowing other physicians, PAs and AAs into the state. In addition, the Board needs to suspend requirements for PAs who are called into active duty for the National Guard so that those PAs may practice without need to follow certain regulatory requirements.*

SUBCHAPTER 32B – LICENSE TO PRACTICE MEDICINE

SECTION .1700 – OTHER LICENSES

21 NCAC 32B .1706 PHYSICIAN PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES

(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set forth below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for physicians to practice under this Rule:

- (1) Hospital to Hospital Credentialing: A physician who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may come to North Carolina and practice medicine at a hospital that is licensed by the North Carolina Department of Health and Human Services upon the following terms and conditions:
 - (A) the licensed North Carolina hospital shall verify all physician credentials and privileges;
 - (B) the licensed North Carolina hospital shall keep a list of all physicians coming to practice and shall provide this list to the Board within 10 days of each physician practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each physician has stopped practicing medicine in North Carolina under this Section within 10 days after each physician has stopped practicing medicine under this Section;
 - (C) all physicians practicing under this Section shall be authorized to practice medicine in North Carolina and shall be deemed to be licensed to practice medicine in the State of North Carolina and the Board shall have jurisdiction over all physicians practicing under this Section 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 any and all physicians have stopped practicing medicine under this Section;
 - (D) a physician may practice under this Section for the shorter of (a) 30 days from the date the physician has started practicing under this Section or (b) 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 deemed to be issued shall become inactive; and
 - (E) physicians practicing under this Section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: A physician who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
 - (A) the applicant must complete a limited emergency license application;
 - (B) the Board shall verify that the physician holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district;
 - (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician's scope of practice;
 - (D) the Board shall have jurisdiction over all physicians practicing under this Section 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 has stopped practicing medicine under this Section or the Limited Emergency License has expired;
- (E) this license shall be in effect for the shorter of (a) 30 days from the date it is issued or (b) 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; and
 - (F) physicians holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.

History Note: Authority G.S. 90-12.5; 90-13.2(e); 90-14(a); 166A-45;
Emergency Adoption Eff. October 2, 2018.

SUBCHAPTER 32S - PHYSICIAN ASSISTANTS

SECTION .0200 – PHYSICIAN ASSISTANT REGISTRATION

21 NCAC 32S .0219 PHYSICIAN ASSISTANT PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES

- (a) ~~The Board shall, pursuant to G.S. 90-12.5, issue a limited physician assistant license under the following conditions:~~
- ~~(1) the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has enacted an ordinance to deal with states of emergency under G.S. 14-288.12, 14-288.13, or 14-288.14, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes, G.S. 160A-174(a) or G.S. 153A-121(a);~~
 - ~~(2) the applicant provides government-issued photo identification;~~
 - ~~(3) the applicant provides proof of licensure, certification or authorization to practice as a physician assistant in another state, the District of Columbia, US Territory or Canadian province;~~
 - ~~(4) applicant affirms under oath that such license is in good standing; and~~
 - ~~(5) no grounds exist pursuant to G.S. 90-14(a) for the Board to deny a license.~~
- ~~(b) In response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician assistant's scope of practice including, but not limited to, the following: geography; term; type of practice; prescribing, administering and dispensing therapeutic measures, tests, procedures and drugs; supervision; and practice setting.~~
- ~~(c) The physician assistant must practice under the direct supervision of an on-site physician. The supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5 and 21 NCAC 32B .1705. The physician assistant may perform only those medical acts, tasks, and functions delegated by the supervising physician and not limited by the physician assistant's scope of practice as set out in Paragraph (b) of this Rule.~~
- ~~(d) A team of physician(s) and physician assistant(s) practicing pursuant to this Rule is not required to maintain on-site documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required by 21 NCAC 32S .0213.~~
- ~~(e) A physician assistant holding a Limited Physician Assistant License for Disasters and Emergencies shall not receive any other or additional compensation outside his or her usual compensation, either direct or indirect, monetary, in kind, or otherwise for the provision of medical services during a disaster or emergency.~~

(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set forth below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for physician assistant assistants to practice under this Rule:

- (1) Hospital to Hospital Credentialing: A physician assistant who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may come to North Carolina and practice medicine at a North Carolina hospital that is licensed by the North Carolina Department of Health and Human Services upon the following terms and conditions:
 - (A) the licensed North Carolina hospital shall verify all physician assistant credentials and privileges;
 - (B) the licensed North Carolina hospital shall keep a list of all physician assistants coming to practice and their respective supervising physicians and shall provide this list to the Board within 10 days of each physician assistant practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each physician assistant has stopped practicing medicine in North Carolina under this section within 10 days after each physician assistant has stopped practicing medicine under this Section;
- (C) all physician assistants practicing under this section shall be authorized to practice medicine in North Carolina and deemed to be licensed to practice medicine in the State of North Carolina and the Board shall have jurisdiction over all physician assistants practicing under this Section 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 any and all physician assistants have stopped practicing medicine under this Section;
- (D) the physician assistant must practice under the direct supervision of an on-site physician and the supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5;
- (E) a physician assistant may practice under this Section for the shorter of (a) 30 days from the date the physician assistant has started practicing under this Section or (b) 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 deemed to be issued shall become inactive; and
- (F) physician assistants practicing under this section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: A physician assistant who holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
- (A) the applicant must complete a limited emergency license application;
- (B) the Board shall verify that the physician assistant holds a full, unlimited and unrestricted license to practice medicine in another U.S. state, territory or district;
- (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician assistant's scope of practice;
- (D) the physician assistant must practice under the direct supervision of an on-site physician and the supervising physician must be licensed in this State or approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5;
- (E) physician assistants and physicians practicing pursuant to this Rule are not required to maintain onsite documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required by 21 NCAC 32S .0213;
- (F) the Board shall have jurisdiction over all physician assistants practicing under this section 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 assistant has stopped practicing medicine under this section or the Limited Emergency License has expired;
- (G) this license shall be in effect for the shorter of (a) 30 days from the date it is issued or (b) 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; and
- (H) physician assistants holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (3) National Guard supervision waiver. The rules of this Subchapter are waived during a declared state of emergency by the Governor of the State of North Carolina or by a resolution of the North Carolina General Assembly for members of the North Carolina National Guard who are actively licensed as physician assistants in the State of North Carolina and are serving in a State Active Duty status.

History Note: Authority G.S. 90-12.5; 90-18(c)(13); 90-13.2(e); 90-14(a); 166A-45;
 Eff. September 1, 2009;
 Amended Eff. November 1, 2010;
 Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1, 2016;
 Emergency Amendment Eff. October 2, 2018.

SUBCHAPTER 32W - ANESTHESIOLOGIST ASSISTANT REGULATIONS

21 NCAC 32W .0116 ANESTHESIOLOGIST ASSISTANT PRACTICE AND LIMITED LICENSE FOR DISASTERS AND EMERGENCIES

(a) The Board shall, pursuant to G.S. 90-12.5, waive requirements for licensure except to the extent set for below and after the Governor of the State of North Carolina has declared a disaster or state of emergency, or in the event of an occurrence for which a county or municipality has declared a state of emergency, or to protect the public health, safety or welfare of its citizens under Article 22 of Chapter 130A of the General Statutes. There are two ways for anesthesiologist assistants to practice under this Rule:

- (1) Hospital to Hospital Credentialing: A anesthesiologist assistant who holds an unrestricted license in good standing to practice as an anesthesiologist assistant in another U.S. state, territory or district and has unrestricted hospital credentials and privileges in any U.S. state, territory or district may practice at a licensed North Carolina hospital upon the following terms and conditions:
- (A) the licensed North Carolina hospital shall verify all anesthesiologist assistant credentials and privileges;
- (B) the licensed North Carolina hospital shall keep a list of all anesthesiologist assistants coming to practice and shall provide this list to the Board within 10 days of each anesthesiologist assistant practicing at the licensed North Carolina hospital. The licensed North Carolina hospital shall also provide the Board a list of when each anesthesiologist assistant has stopped practicing at the hospital under this Section within 10 days after each anesthesiologist assistant has ceased practicing under this Section;
- (C) all anesthesiologist assistants practicing under this section shall be authorized to practice in North Carolina and deemed to be licensed in North Carolina and the Board shall have jurisdiction over all anesthesiologist assistants practicing under this section for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General Statutes, and the Board shall retain jurisdiction over any and all anesthesiologist assistants after they have stopped practicing under this Section;
- (D) anesthesiologist assistants may practice under this Section for the shorter of (a) 30 days from the date the anesthesiologist assistant has started practicing under this Section or (b) a statement is made by the Governor or the Governor's designee that the emergency or disaster declaration has been withdrawn or ended and, at such time, the license deemed to be issued shall become inactive; and

- (E) anesthesiologist assistants practicing under this section shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.
- (2) Limited Emergency License: An anesthesiologist assistant who holds an unrestricted license in good standing to practice as an anesthesiologist assistant in another U.S. state, territory or district may apply for a limited emergency license on the following conditions:
 - (A) the applicant must complete an application;
 - (B) the Board shall verify that the anesthesiologist assistant holds an unrestricted license in good standing to practice in another U.S. state, territory or district;
 - (C) in response to the specific circumstances presented by a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the anesthesiologist assistant's scope of practice;
 - (D) the Board shall have jurisdiction over all anesthesiologist assistants practicing under this Section for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General Statutes, and the Board shall retain jurisdiction over any and all anesthesiologist assistants after they have stopped practicing under this Section;
 - (E) this license shall be in effect for the shorter of (a) 30 days from the date the anesthesiologist assistant has started practicing under this Section or (b) a statement is made by the Governor or the Governor's designee that the emergency or disaster declaration has been withdrawn or ended and, at such time the license issued shall become inactive; and
 - (F) anesthesiologist assistants holding limited emergency licenses shall not receive any compensation outside of their usual compensation for the provision of medical services during a disaster or emergency.

History Note: Authority G.S. 90-12.5; 90-13.2(e); 90-14(a); 166A-45;
Emergency Adoption Eff. October 2, 2018.