WHEREAS, COVID-19 is a respiratory disease that can result in serious illness or death by the SARS-CoV-2 virus, which is a new strain of coronavirus previously unidentified in humans and which can spread from person-to-person; and

WHEREAS, the World Health Organization declared COVID-19 a Public Health Emergency of International Concern on January 30, 2020; and

WHEREAS, on January 31, 2020, the United States Department of Health and Human Services Secretary declared a public health emergency in the United States for COVID-19 under Section 319 of the Public Health Service Act; and

WHEREAS, by Executive Order No. 116 on March 10, 2020, North Carolina Governor Roy Cooper declared a State of Emergency for the entire State of North Carolina based on the public health emergency posed by COVID-19; and

WHEREAS, the ongoing COVID-19 pandemic continues to significantly impact the health of North Carolinians and place strains on our healthcare institutions; and

WHEREAS, the North Carolina Medical Board (“NCMB”) is an agency of the State of North Carolina organized under Chapter 90 of the North Carolina General Statutes and is charged with the responsibility for licensing physicians, physician assistants, anesthesiologist assistants and perfusionists to practice in North Carolina and regulating such practice in the interest of the public health, safety and welfare; and

WHEREAS, in order to provide as much flexibility for health care institutions to meet the needs of COVID-19 patients, the Board finds it necessary to relax certain regulatory requirements so that physician assistants may quickly accept emergency assignments to care for COVID-19 patients; and

WHEREAS, in March 2020, the Board adopted emergency rule 21 NCAC 32B .1707, which allowed physician assistants with inactive licenses to reactivate their licenses in an expediated manner to help respond to the pandemic; physician assistants who reactivated their licenses pursuant to this emergency rule were not required to maintain documentation describing supervisory arrangements and instructions for prescriptive authority as required by Board rule NCAC 32S .0213; and

WHEREAS, it is in the public interest for the NCMB to take this action; and
WHEREAS, the NCMB discussed this subject at length at its July 2020 meeting; and

WHEREAS, by taking this action, the Board will be assisting hospitals and other healthcare facilities and practices in combating COVID-19; and

WHEREAS, the NCMB has authority under N.C. Gen. Stat. § 90-12.5 to take this action in order to permit the provision of emergency health services to the public; and

WHEREAS, the NCMB voted to take this action at its July 2020 meeting for the benefit and protection of the people of North Carolina and the United States of America.

NOW, THEREFORE, it is ORDERED that:

1. Physician assistants who accept emergency assignments to provide care for COVID-19 patients are not required to maintain written documentation describing supervisory arrangements and instructions for prescriptive authority per Board rule 21 NCAC 32S .0213.

2. During the temporary emergency reassignment, the physician assistant is expected to comply with all other applicable rules, including the filing of an intent to practice form pursuant to Board rule 21 NCAC 32S .0203. Quality improvement meetings shall be governed by SL 2020-3, information about which can be found on the Board’s web site at: https://www.ncmedboard.org/resources-information/faqs/covid-19-faqs-related-to-sl-2020-3.

3. This Order is effective only during the length of the declared state of emergency in North Carolina.

This the 24th day of August, 2020.

NORTH CAROLINA MEDICAL BOARD

By:

Bryant A. Murphy, M.D.
President