

21 NCAC 32B .1403 is proposed for adoption as follows:

SECTION .1300 – GENERAL

21 NCAC 32B .1403 CONVERSION APPLICATION FOR PHYSICIAN LICENSE

- (a) A resident training licensee who meets the qualifications listed in this Rule may apply to convert their resident training license to a full, unrestricted physician license.
- (b) An applicant seeking to convert shall:
- (1) complete the Board's online application for conversion and attest under oath or affirmation that the information on the application is true and complete, and authorizing the release to the Board of all information pertaining to the application;
 - (2) submit documentation of a legal name change, if applicable;
 - (3) supply a certified copy of the applicant's birth certificate if the applicant was born in the United States (U.S.) or a certified copy of a valid and unexpired U.S. passport. If the applicant does not possess proof of their U.S. citizenship, the applicant must provide information about the applicant's immigration status. Applicants who are not present in the U.S. and who do not plan to practice physically in the U.S. shall submit a statement to that effect;
 - (4) submit proof that the applicant has completed graduate medical education as required by G.S. 90-9.1 or 90-9.2, as follows:
 - (A) A graduate of a medical school approved by LCME, CACMS, or COCA shall have completed at least one year of graduate medical education approved by ACGME, CFPC, RCPSC, or AOA;
 - (B) A graduate of a medical school not approved by LCME shall have completed two years of graduate medical education approved by ACGME, CFPC, RCPSC, or AOA; or
 - (C) An applicant may satisfy the graduate medical education requirements of Parts (A) or (B) of this subparagraph by showing proof of current certification by a specialty board recognized by the ABMS, CCFP, FRCP, FRCS, or AOA;
 - (5) if the applicant applied for a resident training license on the basis of COMLEX or USMLE examination, he or she shall provide proof that that the applicant has taken and passed within three attempts:
 - (A) the COMLEX Level 3; or
 - (B) the USMLE Step 3.
 - (6) create an AMA Physician Profile and, if the applicant is an osteopathic physician, also create an AOA Physician Profile;
 - (7) submit a letter from the graduate medical education program director recommending the applicant for full licensure. The letter should indicate the applicant's status in the graduate medical education program and attest that the applicant is currently in good standing with the program or was in good standing at the time of application. The letter should also include information about the applicant's dates of participation in the program; any information pertaining to leaves of absence taken by the applicant; any investigations involving the applicant; any adverse actions taken against the applicant including probations, limitations or special requirements, or disciplinary actions; and any negative reports of the applicant due to behavior.
 - (8) pay a non-refundable fee pursuant to G.S. 90-13.1(a).
 - (9) upon request, supply any additional information the Board deems necessary to evaluate the applicant's qualifications.
- (c) A resident training licensee applying to convert to a full license must satisfy all of the following from the time of submitting an application for a resident's training license:
- (1) no professional liability insurance claim(s) or payment(s);
 - (2) no regulatory board complaints, investigations, or actions, including the applicant's withdrawal of a license application;
 - (3) no adverse actions by a health care institution as described in G.S. 90-14.13(a);
 - (4) no adverse actions taken by a federal agency, the U.S. military, or medical societies;

If the applicant fails to satisfy all of the above, they may submit an application for a physician license under 21 NCAC 32B .1303.

- (d) The Board must receive all of the following directly from the primary originating source before it begins processing an application:

- (1) Proof of graduation medical education from the graduate medical education program director;
- (2) Transcripts of examinations scores from the examining authority;
- (3) Proof of board certification from the certifying body, if applicable;
- (4) Physician profile from the AMA, and if applicable, the AOA;
- (5) National Practitioner Data Bank report from the U.S. Department of Health and Human Services;
and
- (6) Practitioner profile from the Federation of State Medical Boards.

History Note: Authority G.S. 90-5.1(a)(3); 90-8.1; 90-9.1; 90-9.2; 90-13.1.
Eff. _____