

GEORGIA COMPOSITE MEDICAL BOARD

EXECUTIVE DIRECTOR
LaSharn Hughes, MBA



BOARD CHAIRPERSON
Charles L. White, DO

2 Peachtree Street, N.W., 36th Floor • Atlanta, Georgia 30303 • Tel: 404.656.3923 • <http://www.medicalboard.georgia.gov>
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GEORGIA COMPOSITE MEDICAL BOARD **NOTICE OF INTENT TO AMEND AND ADOPT RULES**

TO ALL INTERESTED PARTIES:

Notice is hereby given by the Georgia Composite Medical Board that it intends to amend **Rule Chapter 360-2 “Licensing Requirements.”** Exact copies of the proposed amendments are attached to this Notice.

This notice, together with an exact copy of the proposed rules and a synopsis of the proposed rules, are being emailed to all persons who have requested, in writing, that they be placed on the mailing list. A copy of this notice, an exact copy of the proposed rules, and a synopsis of the proposed rules may be reviewed during normal business hours of 8:00a.m. to 5:00 p.m., Monday through Friday, except official State holidays, at the office of the Georgia Composite Medical Board, 2 Peachtree Street, N.W., 36th Floor, Atlanta, Georgia 30303.

Any interested person who will be affected by these rules may present his or her comments to the Board no later than **April 30, 2012** or make comments at the public hearing. Comments may be directed to Carol Dorsey, Georgia Composite Medical Board, 2 Peachtree Street, N.W., 36th Floor, Atlanta, Georgia 30303-3465, or may be received by the Board by e-mail at cdorsey@dch.ga.gov.

A public hearing is scheduled to begin at **8:00 a.m.** on **May 4, 2012** at the 36th Floor Board Room, 2 Peachtree Street, N.W., Atlanta, Georgia 30303, to provide the public an opportunity to comment upon and provide input into the proposed rules.

The Board voted to adopt this Notice of Intent on **March 29, 2012**. The Board will consider at its meeting on **May 4, 2012** at **8:00 a.m.** the comments from the public hearing whether the formulation and adoption of these proposed rule amendments imposes excessive regulatory costs on any license or entity and whether any cost to comply with the proposed rule amendments could be reduced by a less expensive alternative that accomplishes the objectives of the statutes which are the basis of the proposed rule. Additionally, at its meeting on **May 4, 2012**, the Board will consider whether it is legal or feasible in meeting the objectives of the applicable laws to adopt or implement differing actions for businesses as listed in O.C.G.A. § 50-13-4(3)(A)(B)(C)(D).

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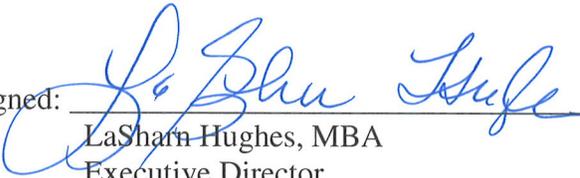
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The authority for promulgation of these rules is O.C.G.A. Section 38-3-51, 43-1-31, 43-34-5, 43-34-6, 43-34-8, 43-34-9, 43-34-28, 43-34-31, 43-34-32, 43-34-41, 43-34-43 and the specific statutes cited in the proposed rules.

This Notice is adopted and posted in compliance with O.C.G.A. § 50-13-4 of the Georgia Administrative Procedures Act. A synopsis of the proposed rules and an economic impact statement are attached to this Notice.

Date: Apr. 14, 2012

Signed: 
LaSharn Hughes, MBA
Executive Director
Georgia Composite Medical Board

ECONOMIC IMPACT AND SYNOPSIS FOR AMENDMENTS TO RULE CHAPTER 360-2

Licensing Requirements

ECONOMIC IMPACT:

The attached rules are promulgated under the authority of the Medical Practice Act, Title 43, Chapter 34. The Georgia Composite Medical Board licenses and regulates nine professions. The formulation and adoption of this rule does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. Additionally, it is not legal or feasible to meet the objectives of the Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated to adopt or implement differing actions for businesses listed at O.C.G.A. § 50-13-4(a)(3)(A), (B), (C) and (D).

RULE SYNOPSIS:

The following Rule Chapter 360-2 governing the licensing requirements for physicians is being updated to reflect changes from House Bill 509, which includes changing the name of the Board and other requirements as attached hereto.

- ~~360-2-.01 Requirements to Take the USMLE III.~~
- ~~360-2-.02 Licensure~~
- 360-2-.01 Requirements for Licensure
- 360-2-.02 Requirements for Step 3 of the United States Medical Licensing Examination (USMLE)
- 360-2-.03 Temporary Licenses
- 360-2-.04 Duplicate Licenses
- 360-2-.05 Renewal
- 360-2-.06 Inactive Licensure Status
- 360-2-.07 Reinstatement
- 360-2-.08 Volunteers in Medicine
- 360-2-.09 Temporary Postgraduate Training Permits
- 360-2-.10 Renewal of Temporary Postgraduate Training Permits
- 360-2-.11 Termination of Temporary Postgraduate Training Permits
- 360-2-.12 Reporting Requirements for Program Directors Responsible for Training Temporary Postgraduate Permit Holders
- 360-2-.13 Emergency Practice Permit

Authority O.C.G.A. Section 38-3-51, 43-1-31, 43-34-5, 43-34-6, 43-34-8, 43-34-9, 43-34-28, 43-34-31, 43-34-32, 43-34-41, and 43-34-43.

RULES
OF
COMPOSITE STATE BOARD OF MEDICAL EXAMINERS
GEORGIA COMPOSITE MEDICAL BOARD
CHAPTER 360-2
LICENSING REQUIREMENTS

~~360-2-.01 Requirements to Take the USMLE III.~~

~~360-2-.02 Licensure~~

360-2-.01 Requirements for Licensure

360-2-.02 Requirements for Step 3 of the United States Medical Licensing Examination (USMLE)

360-2-.03 Temporary Licenses

360-2-.04 Duplicate Licenses

360-2-.05 Renewal

360-2-.06 Inactive Licensure Status

360-2-.07 Reinstatement

360-2-.08 Volunteers in Medicine

360-2-.09 Temporary Postgraduate Training Permits

360-2-.10 Renewal of Temporary Postgraduate Training Permits

360-2-.11 Termination of Temporary Postgraduate Training Permits

360-2-.12 Reporting Requirements for Program Directors Responsible for
Training Temporary Postgraduate Permit Holders

360-2-.13 Emergency Practice Permit

~~360-2-.01 Requirements to Take the USMLE III.~~

360-2-.01 Requirements for Licensure

(1) An applicant for a medical license must provide:

(a) An affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE (Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency.

(b) An application that is complete, including all required documentation, signatures, seals, and fees. An application shall expire one year from the date of receipt. Any subsequent application must be accompanied by submission of appropriate documentation and application fee.

(c) Evidence of good moral character. Reference Forms shall be valid for six months from the date of signature. If the application is not approved during the six-month period, the Board may require a new and more current reference.

(d) Verification of licensure from every state in which the applicant has ever held any type of medical license.

~~(d)~~ (e) Verification of a passing score on one of the following examinations approved by the Board:

~~(1) Applications for a medical license must be complete, including all required documentation, signatures and seals.~~

~~(a) The applicant must furnish the Board with evidence of good moral character on a form prescribed by the Board.~~

~~(b) Reference forms shall be valid for six (6) months from the date of signature. If the application is not approved during the six month period, the Board may require a new and more current reference.~~

~~(2) Applicants must furnish the following evidence to be considered for licensure:~~

~~(a) Proof of one year of residence in the United States except for graduates of Canadian medical schools who are certified by the Liaison Committee on Medical Education (LCME).~~

~~(b) A passing score on one of the following examinations approved by the Board:~~

i. ~~Parts I, II, and III~~ Steps 1, 2 and 3 of the United States Medical Licensing Examination (USMLE)

ii. Federation Licensing Examination (FLEX taken on or before June 1, 1985) (combined scores from different FLEX administrations between January 1, 1978 and January 1, 1985 are not accepted)

iii. FLEX Components I and II (FLEX taken after June 1, 1985)

iv. National Board of Medical Examiners (NBME)

v. State Medical Board of Examinations taken before June 30, 1973

vi. ~~Licentiate~~ Medical Council of Canada Qualifying (LMCC) Examination (MCCQE) for graduates of Canadian medical schools who completed post-graduate training in Canada

vii. National Board of Osteopathic Medical Examiners (NBOME)

viii. Comprehensive Osteopathic Medical Licensing Examination (COMLEX)

ix. The certifying examination of the Puerto Rico Medical Board, for graduates of Puerto Rican medical schools who completed post-graduate training in Puerto Rico.

~~(c) Proof of graduation from a Board-approved medical school as follows:~~

(f) Verification of medical education by submitting an official transcript of all medical education directly to the Board from the school where such education was taken. If the transcript is in a foreign language, a certified English translation must be furnished. The transcript shall include the dates the

applicant attended the school and the grades received in all courses taken to fulfill the requirements of the degree granted. At the Board's discretion, the medical school transcript requirement may be waived and the results of the Federation of State Medical Boards (FSMB) verification service may be accepted if the applicant adequately demonstrates that all diligent efforts have been made to secure transcripts from the school. In such a case, the Board may require the applicant to appear for a personal interview before the Physician Licensure Committee of the Board.

i. Medical schools in the United States, Puerto Rico and Canada must require a minimum of two years of pre-medical education training and be approved by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association (AOA), or the American Osteopathic Association Commission on Osteopathic College accreditation (AOA COCA), or the Committee on Accreditation of Canadian Medical Schools (CACMS).

ii. All other foreign medical schools A medical school located outside the United States, Puerto Rico and Canada and Fifth Pathway programs must have a program of education in the art and science of medicine leading to a medical doctor degree or the medical doctor equivalent that requires a minimum of two (2) years of pre-medical education training, and includes at least 130 weeks of instruction, and is recognized by the World Health Organization. Applicants must have official transcripts that include at least 130 weeks of instruction. and is recognized by the World Health Organization.

iii. Applicants must have official transcripts of all medical and premedical education mailed directly to the Board from the school where such education was taken. If the transcripts are in a foreign language, applicants must furnish a certified English translation. Transcripts must include the dates the applicant attended the school and the grades received in all courses taken to fulfill the requirements of the degree granted. In the Board's discretion, the transcript requirement may be waived and the results of the Federation of State Medical Boards (FSMB) verification service may be accepted if the applicant adequately demonstrates that all diligent efforts have been made to secure transcripts from the school. In such a case, the Board may require the applicant to appear for a personal interview before the Board or the committee.

(g) Verification of Proof of post-graduate/residency training as follows:

i. Graduates of approved medical schools must show completion of one year of postgraduate training in a program approved by the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA) or the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC). The Board may consider current certification of any applicant by a member board of the American Board of Medical Specialties (ABMS) as evidence that such applicant's postgraduate medical training has satisfied the requirements of this paragraph. Approved Medical Schools are those located in the United States, Puerto Rico, and Canada, those listed on the *Medical Schools Recognized by the Medical Board of California* (effective February 4, 2010, adopted by reference), and those approved by the Board.

ii. Graduates of medical schools not approved by the Board must show completion of three years of postgraduate training in a program approved by the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA), the Royal College of

Physicians and Surgeons of Canada (RCPSC), or the College of Family Physicians of Canada (CFPC). The Board may consider current certification of any applicant by a member board of the American Board of Medical Specialties (ABMS) as evidence that such applicant's postgraduate medical training has satisfied the requirements of this paragraph.

iii. Applicants who were licensed in another State on or before July 1, 1967 are not required to supply proof of any postgraduate/residency training.

(h) Verification of residence in the United States for one year, except for graduates of Canadian medical schools, if the applicant is an alien.

(i) Documentation that will determine qualified alien status, if the applicant is not a citizen of the United States.

~~1. This requirement does not apply to applicants who were licensed in another state on or before July 1, 1967.~~

~~2. Graduates of United States medical schools must complete post-graduate year one in a program approved by the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA) or the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada (CFPC).~~

~~3. Graduates of Canadian medical schools must complete post-graduate year one in a program approved by the Accreditation Council of Graduate Medical Education (ACGME), the American Osteopathic Association (AOA), or the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada (CFPC).~~

~~4. For graduates of all other foreign medical schools and Fifth Pathway applicants:~~

~~(i) Applicants who graduated from medical school on or before July 1, 1985 must complete one year of post-graduate training in the United States in a program approved by the Accreditation Council of Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA) or one year of post-graduate training in Canada in a program approved by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada (CFPC).~~

~~(ii) Applicants who graduated from medical school after July 1, 1985 must complete three years of post-graduate training in the United States in a program approved by the Accreditation Council of Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA) or three years of post-graduate training in Canada in a program approved by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada (CFPC). The Board may consider current certification of any applicant by a member board of the American Board of Medical~~

~~Specialties as evidence that such applicant's post-graduate medical training has satisfied the requirements of this paragraph.~~

(i) Graduates of foreign medical schools outside of Canada must provide proof of certification by the Educational Commission for Foreign Medical Graduates (ECFMG) unless they were licensed by another state before March 1, 1958. This requirement does not apply to foreign-trained students who furnish proof of the following:

(i) successful completion of AMA approved Fifth Pathway program, and

(ii) passing the ECFMG qualifying medical component examination with a score of 75 or above. ~~;~~ and

~~(f) Verification of licensure from every state in which the applicant has held a medical license. This requirement includes verification of inactive licenses.~~

~~(3) All applications are not considered complete unless accompanied by the required application fee or other required fees. All such fees received by the Board are nonrefundable.~~

~~(4) No action will take place on applications that have been incomplete for more than a year until a new application is received in accordance with the provisions of this chapter with the appropriate application fee.~~

(2) The Board in its discretion may require an applicant for licensure to take and pass the Special Purposes Examination (SPEX) prepared by the Federation of State Medical Boards of the United States, or other Board-approved competency assessment. The circumstances under which the Board may require a competency examination include, but are not limited to applicants for licensure who have been the subject of disciplinary action in another state; or who would be subject to disciplinary action or corrective action in this state based upon their conduct or condition; or who have previously engaged in the practice of medicine and who have not practiced for a period greater than ~~twenty-four (24)~~ thirty (30) consecutive months.

(3) Nothing in this rule shall be construed to prevent the Board from denying or conditionally granting an application for licensure.

Authority O.C.G.A. Secs. 43-34-5, 43-34-6, and 43-34-26.

~~360-2-.01 Licensure.~~

360-2-.02 Requirements for Step 3 of the United States Medical Licensing Examination (USMLE)

~~(1) This rule applies to all applicants taking the United States Medical Licensing Examination (USMLE III) through Georgia. Applications Applicants applying to take USMLE Step 3 through Georgia are required to submit an application directly to the Federation of State Medical Boards (FSMB) on forms approved by the Board. must be submitted directly to the Federation of State Medical Boards (FSMB) on forms approved by the Board.~~

(2) Applicants must furnish the following evidence to the FSMB:

~~(a) Graduates of medical schools in the United States, Puerto Rico and Canada must furnish the following:~~

~~(a) Evidence of graduation from a medical school that requires a minimum of two (2) years of pre-medical education training and is accredited by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association Commission on Osteopathic College Accreditation (AOA COCA) or the Committee on Accreditation of Canadian Medical Schools (CACMS)~~

~~(b) Evidence of passing USMLE Steps 1 and 2 Parts I and II of the USMLE; and~~

~~(c) For applicants who graduated from medical school after January 1, 1967, evidence of completion of post-graduate year one (PGY-1) or a statement from the program director that the applicant is expected to complete (PGY-1) post-graduate year one within three 3 months. Such postgraduate training must be in a program fully or provisionally accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA) or the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physician of Canada (CFPC), or the or the Committee on Accreditation of Canadian Medical Schools (CACMS). Approved Medical Schools are those located in the United States, Puerto Rico, and Canada, those listed on the Medical Schools Recognized by the Medical Board of California (effective February 4, 2010, adopted by reference), and any other school approved by the Board. during the entire period of training.~~

~~(b) Graduates of Canadian medical schools must furnish the following:~~

~~1. Graduates of Canadian medical schools who completed postgraduate year one in Canada and successfully completed the Licentiate Medical Council of Canada (LMCC) examination are not required to take the USMLE III. These applicants should apply to the Board for licensure. See Rule 360-2-.02.~~

~~2. All other graduates of Canadian medical schools must furnish the following:~~

~~(i) Evidence of graduation from a medical school that requires a minimum of two (2) years of pre-medical training and is accredited by the Liaison Committee of Medical Education (LCME);~~

~~(ii) Evidence of passing Parts I and II of the USMLE; and~~

~~(iii) Evidence of one year of post-graduate training completed in Canada, provided such training program was approved by both the licensing authority in which it is located and the Royal College of Physicians and Surgeons of Canada at the time such training was taken, or evidence of one year of post-graduate training completed in the United States provided such training program was approved by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA);~~

~~(e) Graduates of all other foreign medical schools must furnish the following:~~

~~1. Evidence of graduation from a program of education in the art and science of medicine leading to a medical doctor degree or the medical doctor equivalent that requires a minimum of two (2) years of pre-medical training, at least 130 weeks of instruction, and was approved by the World Health Organization on the date of graduation;~~

~~2. Proof of certification by the Educational Commission for Foreign Medical Graduates (ECFMG). This requirement does not apply to foreign trained students who furnish proof of the following:~~

~~(i) Successful completion of an AMA approved Fifth Pathway program, and~~

~~(ii) Passing the ECFMG qualifying medical component examination.~~

~~3. Evidence of passing Parts I and II of the USMLE; and~~

~~4. Evidence of completion of post-graduate training in a program in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA) or post-graduate training in a program in Canada accredited by the Royal College of Physicians and Surgeons of Canada as follows:~~

~~(i) For applicants who graduated from medical school before July 1, 1985, one year of post-graduate training.~~

~~(ii) For applicants who graduated from medical school after July 1, 1985, three years of post-graduate training.~~

~~(d) Applicants must have official transcripts of all medical and pre-medical education mailed to the FSMB from the school where such education was taken. If the transcripts are in foreign language, applicants must furnish certified English translations. Transcripts must include the dates the applicant attended the school and the grades received in all courses taken to fulfill the requirements of the degree granted. In the Board's discretion, the transcript may be waived and the results of the Federation of State Medical Boards (FSMB) verification service accepted if the applicant adequately demonstrates that all diligent efforts have been made to secure transcripts from the school.~~

(d) Certification by the Educational Commission for Foreign Medical Graduates (ECFMG), if the applicant graduated from a school that is not in the United States, Puerto Rico, or Canada. This requirement does not apply to foreign-trained applicants who furnish proof of the following:

(i) Successful completion of an AMA-approved Fifth Pathway program; and
Passing the ECFMG qualifying medical component examination

(ii) Verification of passing USMLE Steps 1 and 2; and

(iii) Official transcripts of all medical education submitted directly to the FSMB from the school where such education was taken. If the transcripts are in a foreign language, applicants must furnish certified English translations. Transcripts must include the dates the applicant attended the school and the grades received in all courses taken to fulfill the requirements of the degree granted. In the Board's discretion, the transcript may be waived and the results of the Federation of State Medical Boards (FSMB) verification service accepted if the applicant adequately demonstrates that all diligent efforts have been made to secure transcripts from the school.

(3) Preceptorships and fellowships are not approved in lieu of post-graduate training.

(4) ~~USMLE III~~ USMLE Step 3 applicants may be required to appear for a personal interview at the discretion of the Board.

(5) Unless enrolled in an M.D./PhD or D.O./PhD program, applicants must successfully complete USMLE Steps 1, 2, and 3 ~~Parts I, II and III of the USMLE~~ within a seven (7) year period. Applicants enrolled in an M.D./PhD or D.O./PhD program must successfully complete USMLE Steps 1, 2, and 3 ~~Parts I, II and III~~ within a nine (9) year period.

(6) Applicants who have never been licensed, and who have failed the ~~USMLE III~~ Step 3 a total of three (3) times since January 1, 1994 must have one year of additional Board-approved clinical training (academic, clinical). ~~The Board must approve the~~ The training must be completed prior to its occurrence-taking USMLE Step 3 again, and it must not be taken prior to the last failure.

(7) Nothing in this rule shall be construed to prevent the Board from denying or conditionally granting an application for licensure by examination.

Authority O.C.G.A. Secs. 43-34-5, 43-34-8, 43-34-9, and 43-34-26

360-2-.03 Temporary Licenses. Amended.

Temporary licenses may be issued to an applicant at the discretion of the Executive Director, with the approval of the ~~President~~ Chairperson of the Board. Such licenses shall have the effect of a permanent license until the next regular Board meeting, when the temporary license shall become void. The temporary license fee shall be designated in the fee schedule.

Authority O.C.G.A. Secs.43-34-5 and 43-34-32

360-2-.04 Duplicate Licenses.

(1) Duplicate licenses may be issued upon approval by the Board if the original license is lost, stolen, or destroyed, or if the licensee has had a legal change of name. Duplicate licenses are not issued for satellite offices.

(2) To request a duplicate license, the licensee must submit ~~a notarized~~ a duplicate request form application stating the reason the duplicate license is requested. If the form application is based on a name change, the licensee must submit a copy of the official document (marriage certificate, divorce decree or court order) indicating the name change, as well as the date and place of the change. If the

name change occurred during naturalization, the application must also include the naturalization number, the name and address of the court, the date of naturalization, and the name change.

(3) All applications requests must include the duplicate license fee. The duplicate license fee shall be designated in the fee schedule.

Authority O.C.G.A. Secs. 43-34-5

360-2-.05 Renewal Applications.

(1) Each licensee shall notify the Board within thirty (30) days, in writing, of all changes of address. Any mailing or notice from the Board shall be considered to be served on the licensee when sent to the licensee's last address on file with the Board.

(2) All active licenses must be renewed every two years. This may be done via the internet or through mail. A medical licensee may not practice medicine after the expiration date of the license. License A license must be renewed biennially by the last day of the month in which the applicant's birthday falls, and the licensee must establish satisfaction of Board-approved continuing education requirements to be eligible for renewal.

(3) Licensees have the right to obtain a late renewal of their licenses during the three (3) month period immediately following the expiration date. During this period, the penalty for late renewal applies. A physician may not practice medicine after the expiration date of his or her license.

(4) The Board shall administratively revoke any license not renewed prior to the expiration of the late renewal period. Such revocation removes all rights and privileges to practice medicine and surgery in this State. A practitioner who is so revoked must apply for licensure to be considered for reinstatement. Revocation for failure to renew may be reported to the public and to other state licensing boards, and will be reported as a revocation for failure to renew. Revocation for failure to renew is not considered a disciplinary revocation. However, the license may only be reinstated through application.

(5) Notwithstanding the provisions of paragraph (4) of this rule, any service member as defined in O.C.G.A. § 15-12-1 whose license to practice medicine expired while on active duty outside the state shall be permitted to practice in accordance with the expired license and shall not be charged with a violation relating to such practice on an expired license for a period of six (6) months from the date of his or her discharge from active duty or reassignment to a location within the state. Such service member shall be entitled to renew such expired license without penalty within six (6) months after the date of his or her discharge from active duty or reassignment to a location within this state. The service member must present to the Board a copy of the official military orders or a written verification signed by the service member's commanding officer to waive any charges.

(6) The fee for renewals and late renewals shall be designated in the fee schedule.

Authority O.C.G.A. Secs. 43-34-5, 43-34-6, 43-34-8 and 43-1-31.

360-2-.06 Inactive Licensure Status. Amended.

- (1) A ~~Lieensee~~ licensee who wishes to maintain his or her medical license but who does not wish to practice medicine and surgery in this State may apply to the Board for inactive status by submitting an application and the fee. A licensee with an inactive license may not practice medicine in this State.
- (2) In order to reinstate a license to practice medicine, an applicant must complete an application and pay a reinstatement fee. The applicant must be able to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of medicine and that he or she is mentally and physically able to practice medicine with reasonable skill and safety.
- (3) Reinstatement of the license is within the discretion of the Board.
- (4) The Board may require the passage of an examination, such as SPEX or PLAS or other competency assessments. The Board, in its discretion, may impose any remedial requirements deemed necessary.
- (5) The Board may deny reinstatement for failure to demonstrate current knowledge, skill and proficiency in the practice of medicine or being mentally or physically unable to practice medicine with reasonable skill and safety or for any ground set forth in O.C.G.A. §43-34-8 ~~43-34-37~~.
- (6) The denial of reinstatement is not a contested case, but the applicant shall be entitled to an appearance before the Board.
- (7) The fee for reinstatement of a license shall be designated in the fee schedule.
Authority O.C.G.A. Secs. 43-34-5, 43-34-8, 43-34-26

360-2-.07 Reinstatement.

- (1) A minimum of two (2) years shall pass from the date of any revocation of a license before the Board will consider an application for reinstatement. If the Board denies any application for reinstatement, the Board may require that a minimum of two (2) years pass from the date of the denial before the Board will consider subsequent applications for reinstatement. This rule shall only apply in those instances in which the license in question was revoked for reasons other than failure to renew.
- (2) In order to reinstate a license to practice medicine, an applicant must complete an application and pay a reinstatement fee. The applicant must be able to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of medicine and that he or she is mentally and physically able to practice medicine with reasonable skill and safety.
- (3) Reinstatement of the license is within the discretion of the Board.
- (4) The Board, in its discretion, may impose any remedial requirements for applicants who have previously engaged in the practice of medicine and who have not practiced for a period greater than thirty (30) consecutive months as approved by the Board. The Board may require the passage of an

examination, such as SPEX, PLAS, or other competency assessments as approved by the Board. ~~The Board, in its discretion, may impose any remedial requirements deemed necessary.~~

(5) The Board may deny reinstatement for failure to demonstrate current knowledge, skill and proficiency in the practice of medicine or being mentally or physically unable to practice medicine with reasonable skill and safety or for any ground set forth in O.C.G.A. § ~~43-34-8~~ 43-34-37.

(6) The denial of reinstatement is not a contested case, but the applicant shall be entitled to an appearance before the Board.

(7) The fee for reinstatement of a license shall be designated in the fee schedule.

(8) Prior to reinstatement of a license, the Board must have received an affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE (Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency.

Authority O.C.G.A. Secs. 43-34-5, 43-34-8 and 43-34-9

360-2-.08 Volunteers in Medicine.

(1) Definitions.

(a) For the purposes of this rule a not for profit or non-profit agency, institution, corporation or association is one that exempt from federal taxation and provides medical services for indigent patients in this State.

(b) Medically underserved areas/medically underserved populations mean those areas and populations that are designated as such by the U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Primary Health Care.

(c) Non-compensated employ means employment in which the physician has no expectation of payment or compensation for any medical services rendered, or any compensation or payment to the physician, either direct or indirect, monetary or in-kind, for the provision of medical services.

(2) The Board may issue in its discretion and without examination, a special medical license to qualifying physicians for the sole purpose of practicing medicine in the noncompensated employ of public, not for profit, or nonprofit agencies, institutions, corporations, or associations that provide medical services solely to indigent patients in medically underserved or critical need population areas of the State.

(3) Volunteer licenses may be issued to persons who:

- (a) Possess a current license to practice medicine in good standing in any medical licensing jurisdiction in the United States; or,
- (b) Have retired from the full or part-time practice of medicine and, prior to retirement, maintained a license to practice medicine in good standing in any medical-licensing jurisdiction in the United States.
- (c) For purpose of this rule "good standing" shall mean that the applicant has had no disciplinary action taken against his/her license by any state, and has not let his/her license in any state expire or become inactive during an investigation by a state medical board into allegations relating to his/her practice of medicine or during a pending disciplinary action.
- (4) Applicants for a volunteer license must complete an application form approved by the Board. Applications must be complete, including all required documents, signatures and seals.
- (5) Applicants must furnish the following evidence:
- (a) A copy of his or her medical degree, if not previously licensed in this State;
- (b) Proof of licensure in good standing in the applicant's current and/or all prior licensing jurisdictions on a form approved by the Board;
- (c) A notarized verification of employment form completed by the applicant's employer documenting the applicant's agreement not to receive compensation for any medical services he or she may render while practicing under this Chapter;
- (d) If the employer is other than a public employer, documentation that the employer is a not for profit or non-profit agency, institution, corporation or association that provides medical services only to indigent patients in this State;
- (e) Evidence of compliance with the Board's continuing medical education requirements.
- (f) An affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE (Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency.
- (6) Before the Board considers an application, an inquiry shall be made by the staff to the National Practitioner Data Bank (NPDB).

(7) Applicants who are not in compliance with the Board's continuing medical education requirements, but are otherwise qualified to obtain a volunteer license, shall receive a nonrenewable temporary license to practice under this rule for a period of six (6) months.

(8) The volunteer license will limit practice to the non-compensated employ of the public agency or institution, or not for profit agency, not for profit institution or not for profit association who provided notarized verification of employment pursuant to paragraph 5 (c) of this rule.

(9) Volunteer licensees are not permitted to perform any surgical procedure.

(10) Volunteer licenses are not subject to application, licensure or renewal fees.

(11) Volunteer licensees shall at all times meet the minimum standards of acceptable and prevailing medical practice. Volunteer licenses shall be subject to disciplinary provisions of O.C.G.A. §§ ~~43-34-8~~ ~~43-34-37~~ and ~~43-1-19~~, as well as the Board rules governing unprofessional conduct.

(12) Except as provided in paragraph (7), volunteer licenses issued under this Chapter will expire on the last day of the month in which the applicant's birthday falls as provided by Rule 360-2-.05. In addition to the renewal requirements of Rule 360-2-.05, the renewal applicant must provide evidence of continued employment in the non-compensated employ of public, not for profit, or nonprofit agencies, institutions, corporations, or associations that provide medical services solely to indigent patients in board. Those applicants who cannot establish such continued employment are not eligible to renew their volunteer licenses.

Authority O.C.G.A. Secs. 43-34-5 and 43-34-41

360-2-.09 Temporary Postgraduate Training Permits.

(1) Definitions.

(a) "ACGME" means Accreditation Council for Graduate Medical Education.

(b) "AMA" means American Medical Association.

(c) "AOA" means the American Osteopathic Association.

(d) "Application" means an application form completed according to the instructions provided in the application, which includes all the required documentation, signatures, seals and the application fee as published in the Board's fee schedule.

(e) "Board" means the Composite State Board of Medical Examiners.

(f) "ECFMG" means Educational Commission for Foreign Medical Graduates.

(g) "Permit holder" means a person authorized to participate in a postgraduate medical training program subject to the limitations in O.C.G.A. §~~43-34-8~~ ~~43-34-47~~ and Rules 360-2-.09 through 360-2-.11.

(h) "Physician" means a doctor of medicine or osteopathy licensed to practice medicine by the Board pursuant to Article 2, Chapter 34 of Title 43 of the Official Code of Georgia Annotated.

(i) "Postgraduate training program" means a program for the training of interns, residents or post residency fellows that is approved by the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA) or the Board.

(j) "Temporary postgraduate training permit" means a permit issued by the Board to a graduate of a Board approved medical or osteopathic school who is enrolled in a postgraduate training program deemed acceptable by the Board and who does not currently hold a full and unrestricted license in this State.

(k) "Training Institution" means an institution that sponsors and conducts a postgraduate training program approved by the ACGME, the AOA or other program approved by the Board for the training of interns, residents or postgraduate fellows.

(2) A temporary postgraduate training permit is mandatory for participation in all postgraduate medical training programs in this State, unless the individual holds a license to practice medicine in this State prior to participating in the postgraduate medical training program or has applied for a temporary postgraduate training permit.

~~(a) All information necessary to make an application complete must be received by the Board within 30 45 days.~~

(a) The Board shall issue temporary postgraduate training permits to applicants meeting the Board's qualifications within 30 45 days of receipt by the Board of a completed application.

~~(b) Upon receipt of a fully completed application for a temporary postgraduate training permit, the Board will issue an acknowledgment letter to the applicant that the application is complete.~~

~~(d) An Applicant who has not completed his/her application within 30 days of receipt by the Board shall not participate in the postgraduate training program until the Board has received a fully completed application and issued an acknowledgment letter to the applicant.~~

(b) Incomplete applications that have been on file with the Board for more than 60 days shall be deemed invalid, and the applicant shall be required to submit a new application as provided in paragraph 3 of this rule.

(3) Requirements for issuance of a temporary postgraduate training permit:

(a) An affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE

(Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency.

(a) (b) Submission of a fully completed application required by the Board and the application fee as published in the Board's published fee schedule.

1. The application form shall be completed according to the instructions provided in the Application. The Board will not consider an application until it is complete and the Board has received all the required documentation, signatures, seals and fees.

2. Applicants shall inform the Board in writing within 10 days of a change of address while an application is pending.

3. Application fees are nonrefundable.

4. Deposit of an application fee by the Board does not indicate acceptance of the application or that any other permit requirements have been fulfilled.

(a) Evidence satisfactory to the Board of graduation from a medical or osteopathic school approved by the ACGME, the AOA or the Liaison Committee on Medical Education; or

(b) If a graduate of a foreign medical school, evidence satisfactory to the Board of holding a valid certificate issued by ECFMG or having successfully completed a fifth pathway program established in accordance with AMA criteria and passing the ECFMG qualifying medical component examination.

(c) Certification from the Program Director on a form provided by the Board verifying the applicant's appointment to participate in a postgraduate training program that is

1. An internship or residency program accredited by the ACGME or AOA; or

2. A clinical fellowship program at an institution with a residency program accredited either by the ACGME or the AOA that is in a clinical field the same as or related to the clinical field of the fellowship program.

3. If there is a change in Program Directors during the Program year, the new Program Director must so notify the Board on a form approved by the Board for said notification.

(4) Issuance of a temporary postgraduate training permit shall not be construed to imply that the permit holder will be deemed eligible for a license to practice medicine in this State.

(5) The Board shall have the authority to refuse to issue or renew or to suspend, revoke, or limit a temporary postgraduate training permit based upon any of the grounds or violations enumerated in OCGA §§ ~~43-34-8~~ ~~43-1-19~~ and ~~43-34-37~~. Nothing in this rule shall be construed to prevent the

Board from denying or conditionally granting an application for a temporary postgraduate training permit.

Authority O.C.G.A. Secs. 43-34-8 and 43-34-43.

360-2-.10 Renewal of Temporary Postgraduate Training Permits.

(1) Each permit holder shall notify the Board within thirty (30) days of all changes of address. Any mailing or notice from the Board shall be considered to be served on the permit holder when sent to the permit holder's last address on file with the Board.

(2) All temporary postgraduate training permits shall expire annually on June 30th, but may, in the discretion of the Board and upon application duly made and payment of the renewal fee required by the Board, be renewed annually for the duration of the postgraduate training program for a period not to exceed seven (7) years.

(3) Deposit of the renewal fee by the Board does not indicate acceptance of the renewal application or that any permit requirements have been fulfilled.

(4) To be eligible for renewal, the permit holder must furnish satisfactory evidence that he or she continues to participate in the postgraduate training program indicated on the completed program director's certification form as required in Rule 360-2-.09(3)(d).

(5) Failure to renew a postgraduate training permit by the designated expiration date shall result in a penalty for late renewal as required by the Board. Postgraduate training permits that are not renewed within **one month** of expiration shall be revoked for failure to renew and a new application with the appropriate fee shall be required.

(6) A permit holder shall not participate in postgraduate training in this State after the expiration of a postgraduate training permit.

Authority O.C.G.A. Secs. 43-34-5, 43-34-43.

360-2-.11 Termination of Temporary Postgraduate Training Permits.

(1) A permit holder shall immediately notify the Board of withdrawal or termination from a postgraduate training program and of the reasons for said withdrawal or termination.

(2) A permit issued pursuant to Code Section 43-34-47 and Rules 360-2-.09 or 360-2-.10 shall automatically expire upon the permit holder's withdrawal or termination from, completion of the postgraduate training program or upon the permit holder obtaining a license to practice medicine under Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated.

(3) A permit holder who withdraws from a postgraduate training program and is accepted or appointed to participate in another postgraduate training program must apply for a new

postgraduate training permit as provided in Rule 360-2-.09(3); however, the Board will not issue a new postgraduate training permit as provided herein if the permit holder's postgraduate training exceeds seven years.

Authority O.C.G.A. Secs. 43-34-5, 43-34-43.

360-2-.12 Reporting Requirements for Program Directors Responsible for Training Temporary Postgraduate Permit Holders.

(1) Each training institution may designate a physician, who is licensed in this State pursuant to Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated, who would qualify as a Program Director to fulfill the responsibilities as set forth in this rule. Any physician who completed the Program Director Certification form required by Rule 360-2-.09 and who fails to comply with the reporting requirements of Rule 360-2-.12 shall be subject to disciplinary action by the Board.

(2) Program directors must report to the Board the following within 15 days of the event:

(a) a permit holder's withdrawal or termination from or completion of a postgraduate training program and the reasons for such termination or withdrawal;

(b) the occurrence of any of the events identified as grounds for disciplinary action or as violations enumerated in O.C.G.A. §§ ~~43-34-8~~ ~~43-1-19~~ and ~~43-34-37~~ or a practice restriction taken against a permit holder;

(c) any permit holder who has an unauthorized absence from the program for any length of time in excess of two weeks and the reason;

(3) At the completion of the program year, Program Directors must provide the Board with a list of permit holders participating in the Program Director's postgraduate medical training program who are recommended for advancement to the next level.

(4) At the completion of the program year, Program Directors must report to the Board whether a permit holder participating in the Program Director's postgraduate medical training program has failed to advance in the program for performance or behavioral reasons.

Authority O.C.G.A. Secs. 43-34-5, 43-34-8, and 43-34-43.

360-2-.13 Emergency Practice Permit.

~~In the event of an occurrence which~~ During an event for which the Governor of the State of Georgia has issued an executive order declaring a disaster or ~~when the Governor has issued an executive order declaring~~ a state of emergency, the Board may waive some of the licensure requirements in order to permit the provision of emergency health services to the public. Before practicing medicine in Georgia under this provision, the applicant must receive the Board's approval of the following ~~the Board must receive and approve from the applicant:~~

- (a) an application for this emergency practice permit;
- (b) proof of ~~the applicant's~~ current and unrestricted licensure in another state;
- (c) a current National Practitioner's Data Bank ("NPDB") Report and/or
- (d) a copy of a valid government issued photo id.

All permits issued under this provision shall be valid for 90 days or until the statement of emergency or disaster has been lifted by the Governor of the State of Georgia, whichever comes first.
Authority O.C.G.A. Secs. 43-34-5, 43-34-28, 43-34-31, 43-34-22, and 38-3-51.