

**Chapter 40. State Medical Board.**

(Words in **boldface and underlined** indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted. Complete new sections are not in boldface or underlined.)

12 AAC 40.010(b) is amended to read:

(b) A complete application must include the following items

(1) submitted by the applicant:

(A) a completed application on a form provided by the department, including a photograph of the applicant;

(B) a completed authorization for release of records on a form provided by the department and signed by the applicant;

(C) [REPEALED 4/2/2004;

(D)] a **true and correct attestation** [STATEMENT] listing each hospital at which the applicant has held privileges within the five years immediately before the date that the applicant signs the application form, **and a disclosure of any disciplinary action against the applicant by any hospital or other health care facility at any time, including whether**

**(i) the applicant's employment or privileges were restricted, terminated, or investigated; or**

**(ii) the applicant is currently under investigation for a complaint or accusation regarding the applicant's practice;**

**(D)** [(E)] all [REQUIRED] application and licensing fees **required under 12 AAC 02.250;**

**(E)** [(F) REPEALED 7/7/2022;

(G) IF APPLICABLE,] verification of the applicant's post-graduate training that meets the requirements of (h) of this section, **if applicable**;

**(F) an** [(H)] attestation **that** [OF] the **applicant has completed** [APPLICANT'S COMPLETION OF] education in pain management and opioid use and addiction; **if the applicant** [. FOR AN APPLICANT WHO] does not currently hold a valid federal Drug Enforcement Administration registration number, verification will be waived until the applicant applies for a valid registration number;

**(G) a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration**;

(2) **submitted** [REQUESTED BY THE APPLICANT FROM APPROPRIATE AGENCIES AND SENT] directly to the division office **upon the applicant's request**:

(A) evidence [SATISFACTORY TO THE BOARD] that the applicant has passed an appropriate examination **that meets the requirements set out under** [AS DESCRIBED IN] (c) of this section;

(B) verification of licensure from the appropriate licensing authority in each state, territory, province, or other country where the applicant holds or has ever held a license to practice medicine;

(C) [ORIGINAL LETTERS OF VERIFICATION OF HOSPITAL PRIVILEGES FROM EACH OF THE HOSPITALS LISTED BY THE APPLICANT AS REQUIRED IN (1)(D) OF THIS SUBSECTION; THE LETTERS OF VERIFICATION MUST INCLUDE

(i) CONFIRMATION OF THE DATE OF PRIVILEGES HELD BY THE APPLICANT;

(ii) INFORMATION ON ANY DISCIPLINARY ACTION

TAKEN AGAINST THE APPLICANT;

(iii) ANY DEROGATORY INFORMATION ON RECORD ABOUT THE APPLICANT; AND

(iv) ANY REASON FOR WHICH THE APPLICANT WOULD NOT BE READMITTED TO PRIVILEGES IN THAT FACILITY];

(D) CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION (DEA);

(E) clearance from the Federation of State Medical Boards or the Federation of Podiatric State Medical Boards;

[(F) A PHYSICIAN PROFILE FROM THE AMERICAN MEDICAL ASSOCIATION (AMA) OR AMERICAN OSTEOPATHIC ASSOCIATION (AOA), IF APPLICABLE;]

**(D)** [(G)] verification from the applicant's medical school that the applicant completed medical school and received a medical school diploma;

**(E)** [(H) IF APPLICABLE,] verification of the applicant's completion of post-graduate training that meets the requirements of (h) of this section, **if applicable**;

**(E)** [(I)] for foreign medical graduates, verification from the Educational Commission for Foreign Medical Graduates (ECFMG) of successful ECFMG certification, or a certified true copy of the applicant's certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).

12 AAC 40.010(h) is amended to read:

(h) An applicant for licensure under this section who graduated from a medical school

described in **AS 08.64.200(a)** [AS 08.64.200(a)(1)] or a school of osteopathy described in **AS 08.64.205** [AS 08.64.205(1),] must submit **direct source verification of** [A CERTIFIED TRUE COPY OF A CERTIFICATE DOCUMENTING] successful completion of the post-graduate training required under **AS 08.64.200(a)** [AS 08.64.200(a)(2)] or **08.64.205** [AS 08.64.205(2)]. Any other applicant must submit **direct source verification of** [A CERTIFIED TRUE COPY OF A CERTIFICATE DOCUMENTING] successful completion of the post-graduate training required under **AS 08.64.225(a)** [AS 08.64.225(a)(2)(A)], if applicable. Training periods of less than 12 months will not be accepted. [AN ORIGINAL LETTER WITH AN ORIGINAL SIGNATURE SUBMITTED ON PROGRAM LETTERHEAD WILL BE ACCEPTED IN LIEU OF A CERTIFIED TRUE COPY OF A CERTIFICATE IF THE LETTER IS SUBMITTED DIRECTLY TO THE BOARD BY THE RECOGNIZED HOSPITAL OR FACILITY.]

(Eff. 12/30/70, Register 36; am 5/18/85, Register 94; am 8/2/86, Register 99; am 4/10/88, Register 106; am 5/1/94, Register 130; am 6/28/97, Register 142; am 8/17/97, Register 143; am 11/7/98, Register 148; am 8/9/2000, Register 155; am 6/15/2001, Register 158; am 4/2/2004, Register 169; am 10/14/2006, Register 180; am 3/4/2007, Register 181; am 12/21/2007, Register 184; am 5/8/2013, Register 206; am 8/17/2018, Register 227; am 3/25/2020, Register 233; em am 4/21/2020 - 8/18/2020, Register 234; am 11/16/2020, Register 236; am 10/28/2022, Register 243; am \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_, Register \_\_\_\_\_)

<b>Authority:</b>	AS 08.64.100	AS 08.64.210	AS 08.64.250
	AS 08.64.200	AS 08.64.225	AS 08.64.255
	AS 08.64.205	AS 08.64.240	

12 AAC 40.015(b) is amended to read:

(b) A complete application for a license by examination must meet the requirements of AS 08.64.200, 08.64.205, 08.64.209, or 08.64.225 and include the following documents

(1) submitted by the applicant:

(A) a completed application on a form provided by the department, including a photograph of the applicant;

(B) a completed authorization for release of records on a form provided by the department and signed by the applicant;

(C) [REPEALED 4/2/2004;

(D)] a **true and correct attestation** [STATEMENT] listing each hospital at which the applicant has held privileges within the five years immediately before the date the applicant signs the application form, **and a disclosure of any disciplinary action against the applicant by any hospital or other health care facility at any time, including whether**

**(i) the applicant's employment or privileges were restricted, terminated, or investigated; or**

**(ii) the applicant is currently under investigation for a complaint or accusation regarding the applicant's practice;**

**(D)** all [REQUIRED] application and licensing fees **required under 12 AAC 02.250;**

**(E) an attestation that that the applicant has completed** [(F) A CERTIFIED TRUE COPY OF THE APPLICANT'S MEDICAL, OSTEOPATHY, OR PODIATRY SCHOOL DIPLOMA OR CERTIFICATE;

(G) IF APPLICABLE, A CERTIFIED TRUE COPY OF EACH OF THE APPLICANT'S POST-GRADUATE TRAINING PROGRAM CERTIFICATES;

(H) VERIFICATION OF APPLICANT'S COMPLETION OF AT LEAST TWO HOURS OF] education in pain management and opioid use and addiction [EARNED IN A CATEGORY I CONTINUING MEDICAL EDUCATION PROGRAM ACCREDITED BY THE AMERICAN MEDICAL ASSOCIATION, OR EARNED IN A CATEGORY I OR II CONTINUING MEDICAL EDUCATION PROGRAM ACCREDITED BY THE AMERICAN OSTEOPATHIC ASSOCIATION, OR EARNED IN A CONTINUING MEDICAL EDUCATION PROGRAM FROM A PROVIDER THAT IS APPROVED BY THE COUNCIL ON PODIATRIC MEDICAL EDUCATION]; **if the applicant** [. FOR AN APPLICANT WHO] does not currently hold a valid federal Drug Enforcement Administration registration number, verification will be waived until the applicant applies for a valid registration number;

**(F)** [(H)] verification **that** [OF] the **applicant has completed** [APPLICANT'S COMPLETION OF] at least two hours of education in pain management and opioid use and addiction earned in a Category I continuing medical education program accredited by the American Medical Association, [OR EARNED IN] a Category I or II continuing medical education program accredited by the American Osteopathic Association, or [EARNED IN] a continuing medical education program from a provider that is approved by the Council on Podiatric Medical Education; **if the applicant** [. FOR AN APPLICANT WHO] does not currently hold a valid federal Drug Enforcement Administration registration number, verification will be waived until the applicant applies for a valid registration number;

**(G) a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration;**

(2) **submitted** [REQUESTED BY THE APPLICANT FROM APPROPRIATE

AGENCIES AND SENT] directly to the division office **upon the applicant's request:**

(A) [ORIGINAL LETTERS OF VERIFICATION OF HOSPITAL PRIVILEGES FROM EACH OF THE HOSPITALS LISTED BY THE APPLICANT IN (1)(D) OF THIS SUBSECTION; THE LETTERS OF VERIFICATION MUST INCLUDE

(i) CONFIRMATION OF THE DATE OF PRIVILEGES HELD BY THE APPLICANT;

(ii) INFORMATION ON ANY DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT;

(iii) ANY DEROGATORY INFORMATION ON RECORD ABOUT THE APPLICANT; AND

(iv) ANY REASON FOR WHICH THE APPLICANT WOULD NOT BE READMITTED TO PRIVILEGES IN THAT FACILITY;

(B) CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION (DEA);

(C) clearance from the Federation of State Medical Boards or the Federation of Podiatric State Medical Boards;

**(B)** [(D) A PHYSICIAN PROFILE FROM THE AMERICAN MEDICAL ASSOCIATION (AMA) OR THE AMERICAN OSTEOPATHIC ASSOCIATION (AOA), IF APPLICABLE;

(E) REPEALED 3/25/2020;

(F) verification from the applicant's medical school that the applicant completed medical school and received a medical school diploma;

**(C)** [(G) IF APPLICABLE,] verification of completion of post-graduate

training from the facility where the applicant completed the internship or residency program, **if applicable**; training periods of less than 12 months in a program will not be accepted;

**(D)** [(H) for foreign medical graduates, verification from the Educational Commission for Foreign Medical Graduates (ECFMG) of successful ECFMG certification, or a certified true copy of the applicant's certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).

(Eff. 7/29/83, Register 87; am 3/30/84, Register 89; am 4/10/88, Register 106; am 6/28/97, Register 142; am 8/17/97, Register 143; am 6/15/2001, Register 158; am 4/2/2004, Register 169; am 3/4/2007, Register 181; am 12/21/2007, Register 184; am 8/17/2018, Register 227; am 3/25/2020, Register 233; em am 4/21/2020 - 8/18/2020, Register 234; am 11/16/2020, Register 236; am \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)

<b>Authority:</b>	AS 08.64.100	AS 08.64.205	AS 08.64.225
	AS 08.64.180	AS 08.64.209	AS 08.64.240
	AS 08.64.190	AS 08.64.210	AS 08.64.255

12 AAC 40.025(b) is amended to read:

(b) A physician license that has been lapsed for at least one year but less than five years will be reinstated if the applicant meets the requirements in **(a)(2) - (4)** [(a)(2), (3), AND (4)] of this section and

(1) submits a completed reinstatement application on a form provided by the department;

(2) **provides a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [RECEIVES CLEARANCE FROM THE

FEDERAL DRUG ENFORCEMENT ADMINISTRATION (DEA) AND DOCUMENTATION OF THE CLEARANCE IS SENT DIRECTLY TO THE DIVISION BY THE DEA];

(3) arranges for verification of licensure to be sent directly to the division from **the appropriate licensing authority in each state, territory, province, or other country** [OTHER THAN ALASKA] where the applicant is or has been licensed as a physician;

(4) is qualified for a license under AS 08.64.230 and is not disqualified by AS 08.64.240; and

(5) **provides a true and correct attestation listing each hospital at which the applicant has held privileges during the five years immediately before the date the applicant signs the application form and a disclosure regarding of any disciplinary action by any hospital or other health care facility at any time, including whether**

**(A) the applicant's employment or privileges have been restricted, terminated, or investigated; or**

**(B) the applicant is currently under investigation for a complaint or accusation regarding the applicant's practice** [ARRANGES FOR A VERIFICATION OF HOSPITAL PRIVILEGES TO BE SENT DIRECTLY TO THE DIVISION, FROM EACH HOSPITAL WHERE THE APPLICANT HAS HELD PRIVILEGES WITHIN THE FIVE YEARS IMMEDIATELY BEFORE THE DATE THAT THE APPLICANT SIGNS THE APPLICATION FORM].

(Eff. 8/20/87, Register 103; am 5/16/98, Register 146; am 6/15/2001, Register 158; am 7/25/2008, Register 187; am \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_, Register \_\_\_\_\_)

**Authority:** AS 08.01.100 AS 08.64.100 AS 08.64.240

12 AAC 40.033(d)(7) is amended to read:

(7) **provide a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [RECEIVE CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION (DEA) AND ARRANGE FOR DOCUMENTATION OF THE CLEARANCE TO BE SENT DIRECTLY TO THE DIVISION BY THE DEA].

(Eff. 9/30/2001, Register 159; am 12/7/2006, Register 180; am \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)

**Authority:** AS 08.64.100 AS 08.64.240 AS 08.64.313

12 AAC 40.036(b) is amended to read:

(b) A complete application must include **the following:**

(1) **direct source verification of successful completion of medical school** [A CERTIFIED COPY OF A MEDICAL SCHOOL DIPLOMA];

(2) **direct source** verification of the applicant's completion of post-graduate training that meets the requirements of 12 AAC 40.010(h);

(3) verification of licensure from the appropriate licensing authority in each state, territory, or province where the applicant holds or has ever held a license, requested by the applicant and sent directly to the division from the licensing jurisdiction;

(4) all [REQUIRED] application fees **required under 12 AAC 02.250** for a locum tenens permit;

(5) clearance from the Federation of State Medical Boards sent directly to the division;

**(6) clearance from the National Practitioner Data Bank.**

(Eff. 5/18/85, Register 94; am 4/10/88, Register 106; am 8/17/97, Register 143; am 8/9/2000, Register 155; am 6/15/2001, Register 158; am 9/9/2010, Register 195; am 10/8/2017, Register 224; am 12/25/2019, Register 232; am \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)

**Authority:** AS 08.64.100 AS 08.64.180 AS 08.64.279  
AS 08.64.101 AS 08.64.275

12 AAC 40.045(d) is amended to read:

(d) The board, a member of the board, [OR] the executive secretary, **or the board's designee** may issue a courtesy license to an applicant who

- (1) submits a complete application on a form provided by the department;
- (2) pays the application and licensing fees **required under** [ESTABLISHED IN]

12 AAC 02.250;

(3) submits verification [, TO THE BOARD'S SATISFACTION,] of a current license to practice medicine in good standing and not under investigation in the state or territory, or a province of Canada in which the applicant resides;

(4) [SUBMITS CURRICULUM VITAE;

(5)] **submits a description of** [DESCRIBES, TO THE BOARD'S

SATISFACTION,] the circumstances under which the applicant will be practicing, including the name and license number of the supervising physician if the applicant is working in a supervised hospital fellowship;

**(5) submits a description of** [(6) DESCRIBES] the scope of medical practice required to perform the duties for which the courtesy license is issued; the description must include the practice location, duration of practice, and patient population to be seen; the applicant must demonstrate [, TO THE BOARD'S SATISFACTION,] that the scope of medical practice is

for a limited purpose set out in (b) of this section;

**(6)** [(7)] submits a signed [, NOTARIZED] authorization for the release of records;

**(7)** [(8)] submits a certified true copy of an accredited medical school diploma **or** **direct source verification of successful completion of medical school;**

**(8)** [(9)] submits **direct source verification of the applicant's completion of post-graduate training** [A CERTIFIED TRUE COPY OF ALL ACCREDITED POSTGRADUATE TRAINING CERTIFICATES];

**(9)** [(10)] SUBMITS A CERTIFIED TRUE COPY OF AN AMERICAN BOARD OF MEDICAL SPECIALTIES MEMBER BOARD CERTIFICATE; THIS REQUIREMENT MAY BE WAIVED BY THE BOARD IF THE COURTESY LICENSE IS INTENDED TO BE USED FOR A FELLOWSHIP; AND

[(11)] submits a Federation of State Medical **Boards'** [BOARDS'S] Board Action Data Bank clearance report; **and**

**(10) receives clearance from the National Practitioner Data Bank.**

12 AAC 40.045(j)(2) is amended to read:

(2) submits a completed application on a form provided by the department, and

(A) if a physician or osteopath,

(i) verification of a current license to practice medicine or osteopathy in good standing and not under investigation in the jurisdiction in which the applicant resides, or verification of a retired license issued under AS 08.64.276;

(ii) clearance from the Federation of State Medical Boards;

(iii) clearance from the National Practitioner Data Bank; and

(iv) **a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION];

(B) if a physician assistant,

(i) verification of a current license to practice medicine in good standing and not under investigation in the jurisdiction in which the applicant resides;

(ii) clearance from the Federation of State Medical Boards;

(iii) clearance from the National Practitioner Data Bank; and

(iv) **a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION];

(C) repealed 5/5/2023.

(Eff. 5/1/94, Register 130; am 8/9/95, Register 135; am 12/18/2001, Register 160; am 10/8/2017, Register 224; am 12/25/2019, Register 232; em am 4/21/2020 - 8/18/2020, Register 234; am 11/16/2020, Register 236; am 5/5/2023, Register 246; am \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)

**Authority:** AS 08.01.062 AS 08.64.100 AS 08.64.240

12 AAC 40.046(b)(5)(D) is amended to read:

(D) **a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION];

12 AAC 40.046(b)(6)(D) is amended to read:

(D) **a true and correct attestation whether the applicant has been the subject of a revoked or restricted DEA registration** [CLEARANCE FROM THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION].

(Eff. 9/25/2022, Register 243; am \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)

**Authority:** AS 08.01.062 AS 08.64.100 AS 08.64.240  
AS 08.01.063 AS 08.64.101

12 AAC 40.050 is repealed:

**12 AAC 40.050. Biographical data.** Repealed [AN APPLICATION FOR LICENSURE BY CREDENTIALS OR EXAMINATION WILL NOT BE CONSIDERED COMPLETE UNTIL THE APPLICANT HAS REQUESTED THE FOLLOWING DOCUMENTS AND THEY ARE ON FILE IN THE DIVISION OFFICE:

- (1) A PHYSICIAN PROFILE FROM THE AMERICAN MEDICAL ASSOCIATION OR AMERICAN OSTEOPATHIC ASSOCIATION;
- (2) CLEARANCE FROM THE UNITED STATES DEPARTMENT OF JUSTICE, DRUG ENFORCEMENT ADMINISTRATION;
- (3) CLEARANCE FROM THE FEDERATION OF STATE MEDICAL BOARDS REGARDING PREVIOUS OR PENDING DISCIPLINARY ACTIONS AGAINST THE APPLICANT BY ANOTHER JURISDICTION]. (Eff. 8/29/73, Register 47; am 3/30/84, Register 89; am 5/18/85, Register 94; am 8/2/86, Register 99; am 5/1/94, Register 130; repealed \_\_\_\_/\_\_\_\_/\_\_\_\_\_, Register \_\_\_\_\_)