

1 State Board of Medical Examiners

2

3 Adopted Rule Regarding Changes in the Continuing Medical
4 Education Requirement Necessary for Physicians and Osteopaths to
5 Retain Their Licenses to Practice Medicine

6

7 Rules as Adopted

8 7 MCAR S 4.012 Continuing medical education.

9 A. Continuing education cycles. During three-year cycles,
10 each physician licensed to practice by this board shall obtain
11 75 hours of continuing medical education credit as required by
12 this rule.

13 For the purpose of administering this rule, each
14 individual initially licensed after the effective date of this
15 rule commences his or her first three-year cycle on January 1
16 following the date of initial licensure. Future cycles will run
17 consecutively from that point. Continuing medical education
18 taken between the date of initial licensure and the January 1
19 following the date of initial licensure may be credited towards
20 the first cycle.

21 Those individuals assigned three-year reporting prior to
22 the effective date of this rule shall remain in their assigned
23 reporting cycle.

24 B. Activities for which credit may be obtained. Continuing
25 medical education credit may be obtained from the following
26 activities:

27 1. Category 1. No less than 45 hours of credit must be
28 obtained in any cycle by attendance at educational activities
29 approved by the board pursuant to D.

30 2. Category 2. No more than 20 hours of credit may be
31 obtained in any cycle through educational activities sponsored
32 by a hospital, clinic, or medical or osteopathic society and not
33 meeting the standards contained in category 1.

34 3. Category 3. No more than 20 hours of credit may be
35 obtained in any cycle through medical teaching of medical
36 students, residents, practicing physicians, and allied health

1 professionals.

2 4. Category 4. No more than 20 hours of credit may be
3 obtained in any cycle for papers, publications, books, lectures,
4 and exhibits.

5 a.-c. [Unchanged.]

6 5. Category 5. No more than 20 hours of credit may be
7 obtained by engaging in professional reading, peer patient care
8 review activities, self-assessment examinations sponsored by a
9 professional organization recognized by the board as maintaining
10 a significant level of quality control, and preparation for
11 certification or recertification examinations administered by a
12 national specialty board.

13 C. Approval of courses for credit. Persons or organizations
14 intending to offer courses for continuing education credit not
15 included under D.6. may apply to the board in advance for
16 approval. Any person or organization may submit a course for
17 approval by the board. The following information shall be
18 provided to the board, as well as any other information which
19 the board may reasonably require for the purpose of evaluating
20 the course for which approval is sought.

21 1.-4. [Unchanged.]

22 D. Category 1 credit. The board shall grant Category 1
23 continuing education credit for any educational activity which
24 meets the following standards:

25 1.-5. [Unchanged.]

26 6. Any course planned, sponsored, or co-sponsored by a
27 medical or osteopathic medical school, state or national medical
28 or osteopathic association, or a national medical specialty
29 society shall be presumed to meet the above standards. This
30 presumption may be withdrawn by the board if it determines that
31 a school, association, or specialty society has sought credit
32 for a course not meeting these standards.

33 E. [Unchanged.]

34 F. Alternative compliance. The board may accept
35 certification or recertification by an American specialty board
36 in lieu of compliance with the continuing education requirements

1 during the cycle in which certification or recertification is
2 granted.

3 G. Verification of compliance. Licensees shall, at the
4 relicensure period coinciding with the end of their cycle,
5 provide a signed statement to the board on a form provided by
6 the board indicating compliance with this rule. The board may,
7 in its discretion, require such additional evidence as is
8 necessary to verify compliance with the rule. The board may
9 also accept certification of other state or national medical
10 groups whose continuing medical education requirements are the
11 equivalent of or greater than those of this board in lieu of
12 compliance with these standards.

13 A licensee failing to submit a statement or who submits a
14 statement which, on its face, indicates noncompliance with this
15 rule may be subject to the disciplinary provisions contained in
16 I.

17 H. Exemptions.

18 1. The board may grant an exemption from the continuing
19 education requirements of this rule to a licensee for full-time
20 participation in residency or fellowship training at a
21 professionally accredited institution.

22 2. Physicians under emeritus registration status as
23 provided in 7 MCAR S 4.013 are exempt from the continuing
24 medical education requirements of this rule.

25 I. Penalties for noncompliance. The board may refuse to
26 renew, suspend, condition, limit, or qualify the license of any
27 person whom the board determines has failed to comply with the
28 requirements of this rule.

29 If the board refuses to renew a license, a hearing must be
30 held only if the licensee submits a written request for a
31 hearing within 30 days after receiving notice of the refusal to
32 renew. The hearing must be conducted pursuant to the provisions
33 of the Minnesota Administrative Procedure Act.

34 7 MCAR S 4.0121 Emeritus registration for retired physicians.

35 A. Application. Any physician duly licensed to practice
36 medicine in the state pursuant to Minnesota Statutes, chapter

1 147, who declares that he or she is retired from the active
2 practice of medicine may apply to the board for physician
3 emeritus registration. The physician may do so by indicating on
4 his or her annual registration form or by petitioning the board
5 if he or she is in fact completely retired and has not been the
6 subject of disciplinary action resulting in the suspension,
7 revocation, qualification, condition, or restriction of the
8 physician's license to practice medicine.

9 B. Status of registrant. The emeritus registration is not a
10 license to engage in the practice of medicine as defined in
11 Minnesota Statutes, chapter 147, or in the rules of the board.
12 The registrant shall not engage in the practice of medicine.

13 C. Continuing education requirements not applicable. The
14 continuing medical education requirements of 7 MCAR S 4.012 are
15 not applicable to emeritus registration.

16 D. Change to active status. A registrant who desires to
17 change to active status may do so by providing the following
18 materials, pending the approval of these materials by the board:

19 1. completion of a form prepared by the board which
20 includes name, basic medical education, medical license number,
21 duration of medical licensure, date of emeritus registration,
22 membership in medical societies, information on the applicant's
23 physical and mental health, and information on any disciplinary
24 action taken against the physician in regards to his or her
25 medical practice;

26 2. complying with the continuing medical education
27 requirements for the time period in which one's license was in
28 inactive status and under the emeritus registration pursuant to
29 7 MCAR S 4.012 A. This requirement must be fulfilled prior to
30 submission of the application;

31 3. submission of all back licensure fees while one's
32 license was under inactive status and the emeritus registration;

33 4. submission of references by two physicians licensed to
34 practice medicine in Minnesota verifying that the registrant has
35 the capacity to practice medicine; and

36 5. submission of a notarized, completed, and signed

1 information release form, listing all schools attended,
2 hospitals and clinics served at, and branch of military served
3 in.

4 E. Documentation of status. A physician granted emeritus
5 registration shall, upon payment of a fee, receive a document
6 certifying that he or she has been registered as emeritus and
7 has completed his or her active professional career licensed in
8 good standing with the Minnesota Board of Medical Examiners.
9 The fee for such a document shall be \$5. The document fee shall
10 not be a prerequisite for consideration of an application for
11 emeritus registration.

12 F. Renewal cycle or fees not applicable. Being registered
13 as emeritus will not subject a person to the annual renewal
14 cycle or renewal fees.