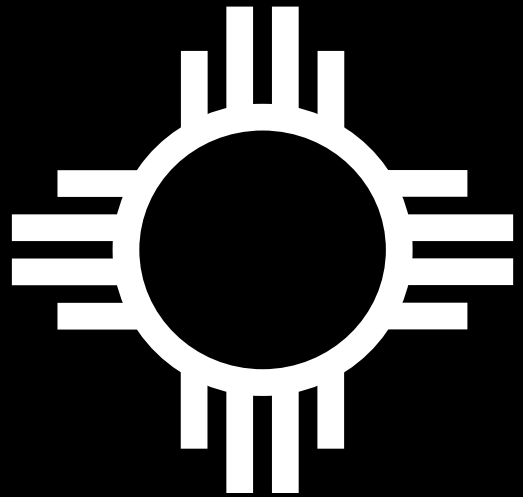


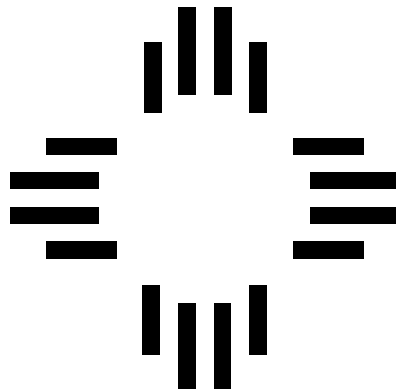
**NEW
MEXICO
REGISTER**



Volume XIV
Issue Number 1
January 15, 2003

New Mexico Register

**Volume XIV, Issue Number 1
January 15, 2003**



The official publication for all notices of rulemaking and filings of adopted, proposed and emergency rules in New Mexico

The Commission of Public Records
Administrative Law Division
Santa Fe, New Mexico
2003

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New Mexico Register

Volume XIV, Number 1

January 15, 2003

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Rules published in this issue of the New Mexico Register are effective on the publication date of this issue unless otherwise specified. "No rule shall be valid or enforceable until it is filed with the records center and published in the New Mexico register as provided by the State Rules Act. Unless a later date is otherwise provided by law, the effective date of a rule shall be the date of publication in the New Mexico register." Section 14-4-5 NMSA 1978.

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The New Mexico Register
Published by
The Commission of Public Records
Administrative Law Division
1205 Camino Carlos Rey
Santa Fe, NM 87507

The *New Mexico Register* is available free at <http://www.nmcpr.state.nm.us/nmregister>

The *New Mexico Register* is published twice each month by the Commission of Public Records, Administrative Law Division. The cost of an annual subscription is \$270.00, except the first subscription from each New Mexico state agency may be ordered at \$85.00. Individual copies of any Register issue may be purchased for \$12.00. Subscription inquiries should be directed to: The Commission of Public Records, Administrative Law Division, 1205 Camino Carlos Rey, Santa Fe, NM 87507.

Telephone: (505) 476-7907; Fax (505) 476-7910; E-mail rules@rain.state.nm.us.

Notices of Rulemaking and Proposed Rules

NEW MEXICO INFORMATION TECHNOLOGY COMMISSION

STATE OF NEW MEXICO
INFORMATION TECHNOLOGY COM-
MISSION

IN THE MATTER OF ADOPTING 1.12.9
NMAC,
COMPETITIVE PROCESS FOR INFOR-
MATION SYSTEMS RESOURCES

NOTICE OF PROPOSED RULEMAKING AND PROCEDURAL ORDER

I. SOLICITATION OF COMMENTS

The Information Technology Commission (Commission) issues this Notice of Proposed Rulemaking to provide an opportunity for public comment and to create a record for a decision on a proposed new rule: 1.12.9 NMAC, Competitive Process for Information Systems Resources. The Commission requests written comments from all interested persons and entities on the proposed new rule.

All relevant and timely comments, including data, views, or arguments, will be considered by the Commission. In reaching its decision, the Commission may take into account information and ideas not contained in the comments, providing that such information or a writing containing the nature and source of such information is placed in the public file, and provided that the fact of the Commission's reliance on such information is noted in the Order issued by the Commission.

II. ORDER

IT IS THEREFORE ORDERED that this Notice of Proposed Rulemaking and Procedural Order be issued.

IT IS FURTHER ORDERED that all interested parties may file written comments on the proposed rule on or before February 7, 2003. All relevant and timely comments, including data, views, or arguments will be considered by the Commission before final action is taken in this proceeding. Written comments must be filed prior to the deadline for receipt of comments either in hard copy with the Deputy Chief Information Officer, Information Technology Management Office, 404 Montezuma,

Santa Fe, NM 87501 or by electronic mail to the Deputy Chief Information Officer at cio@state.nm.us. The rule number must appear on each submittal. Comments will be available for public inspection during regular business hours in the Information Technology Management Office, 404 Montezuma, Santa Fe, NM 87501.

PLEASE BE ADVISED THAT the New Mexico Lobbyist Regulation Act, NMSA 1978, Section 2-11-1 *et seq.*, regulates lobbying activities before state agencies, officers, boards and commissions in rulemaking and other policy-making proceedings. A person is a lobbyist and must register with the Secretary of State if the person is paid or employed to do lobbying or the person represents an interest group and attempts to influence a state agency, officer, board or commission while it is engaged in any formal process to adopt a rule, regulation, standard or policy of general application. An individual who appears for himself or herself is not a lobbyist and does not need to register. The law provides penalties for violations of its provisions. For more information and registration forms, contact the Secretary of State's Office, State Capitol Building, Room 420, Santa Fe, NM 87503, (505) 827-3600.

IT IS FURTHER ORDERED that the Commission may require the submission of additional information, make further inquiries, and modify the dates and procedures if necessary to provide for a fuller record and a more efficient proceeding.

IT IS FURTHER ORDERED that staff of the Information Technology Management Office shall cause a copy of this Notice to be published once in the *New Mexico Register*; once in the *Albuquerque Journal*, and to be posted to the Internet at <http://www.cio.state.nm.us> all on or before January 15, 2003. To obtain a copy of the proposed rule: (1) send the rule name, rule number, and a self-addressed envelope to the Information Technology Management Office, 404 Montezuma, Santa Fe, NM 87501; (2) call the Information Technology Management Office at 505-476-0400 with the rule name and rule number; e-mail the Deputy Chief Information Officer at cio@state.nm.us with the rule name and rule number (you will receive a copy of the rule in Microsoft WORD format by return e-mail); or download the proposed rule from the Internet at <http://www.cio.state.nm.us>. The proposed rule is also available for inspection and copying during regular business hours in the

Information Technology Management Office, 404 Montezuma, Santa Fe, NM 87501.

PLEASE BE ADVISED THAT individuals with a disability who are in need of summaries or other types of accessible forms of the proposed rule or comments may contact the Deputy Chief Information Officer at (505)476-0400.

DONE, this 20th day of December, 2002.

INFORMATION TECHNOLOGY COM-
MISSION

By: Robert Tacker, Chair

NEW MEXICO BOARD OF MEDICAL EXAMINERS

NEW MEXICO BOARD OF MEDICAL EXAMINERS

Notice

The New Mexico Board of Medical Examiners will convene a Public Rule Hearing on Thursday, February 20, 2003 at 1:30 p.m. at State Records Center and Archives, Yucca Room, 1205 Camino Carlos Rey, Santa Fe, New Mexico. The purpose of the Rule Hearing is to consider amending 16.10.2 NMAC Physicians: Licensure Requirements.

A board meeting will follow the hearing. The board may go into executive session to discuss pending litigation, personnel or licensee matters. A final agenda for the board meeting will be available at the board office on February 19, 2003. Persons desiring to present their views on the proposed amendment may appear in person at said time and place or may submit written comments no later than 5:00 p.m., February 17, 2003, to the board office, 491 Old Santa Fe Trail, 2nd floor, Lamy Building, Santa Fe, NM, 87501.

Copies of the proposed rules are available on request from the Board office at the address listed above, by phone (505) 827-5022, or on the internet at www.state.nm.us/nmbme/whatsnew.html.

If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service in order to attend or participate in the hearing or meeting, please contact the Executive Director at 491 Old Santa Fe Trail, Santa Fe, NM prior to the meeting. Public documents, including the agenda and minutes,

can be provided in various accessible formats. Please contact the Executive Director if a summary or other type of accessible format is needed.

**End of Notices and
Proposed Rules Section**

Adopted Rules and Regulations

NEW MEXICO BOARD OF MEDICAL EXAMINERS

**TITLE 16 OCCUPATIONAL
AND PROFESSIONAL LICENSING
CHAPTER 10 MEDICINE AND
SURGERY PRACTITIONERS
PART 14 MANAGEMENT OF
CHRONIC PAIN WITH CON-
TROLLED SUBSTANCES**

16.10.14.1 ISSUING AGENCY:

New Mexico Board of Medical Examiners, hereafter called the board.

[16.10.14.1 NMAC - N, 1/20/03]

16.10.14.2 SCOPE: This part applies to all physicians and physician assistants licensed by the board.

[16.10.14.2 NMAC - N, 1/20/03]

16.10.14.3 STATUTORY

AUTHORITY: These Rules are promulgated pursuant to and in accordance with the Medical Practice Act, sections 61-6-1 through 61-6-35 NMSA 1978.

[16.10.14.3 NMAC - N, 1/20/03]

16.10.14.4 DURATION: Permanent

[16.10.14.4 NMAC - N, 1/20/03]

16.10.14.5 EFFECTIVE DATE:

January 20, 2003, unless a later date is cited at the end of a section.

[16.10.14.5 NMAC - N, 1/20/03]

16.10.14.6 OBJECTIVE: It is the position of the New Mexico Board of Medical Examiners that practitioners have an obligation to treat chronic pain and that a wide variety of medicines including controlled substances and other drugs may be prescribed for that purpose. When such medicines and drugs are used, they should be prescribed in adequate doses and for appropriate lengths of time after a thorough medical evaluation has been completed.

[16.10.14.6 NMAC - N, 1/20/03]

16.10.14.7 DEFINITIONS:

A. "Addiction" is a neurobehavioral syndrome with genetic and environmental influences that results in psychological dependence on the use of substances for their psychic effects. It is characterized by behaviors that include one or more of the following: impaired control over drug use; compulsive use; continued use despite harm; and, craving. Physical dependence and tolerance are normal physiological consequences of extended opioid

therapy for pain and should not by themselves be considered addiction.

B. "Chronic pain" means a pain state which is persistent and in which the cause of the pain cannot be removed or otherwise treated.

C. "Drug abuser" means a person who takes a drug or drugs for other than legitimate medical purposes.

D. "Pain" means an unpleasant sensory and emotional experience associated with inflammation or with actual or potential tissue damage, or described in terms of such inflammation and damage.

E. "Physical dependence" means a state of adaptation that is manifested by a drug-specific withdrawal syndrome that can be produced by abrupt cessation, rapid dose reduction, decreasing blood level of the drug, administration of an antagonist, or a combination of these.

F. "Tolerance" means a state of adaptation in which exposure to a drug induces changes that result in a diminution of one or more of the drug's effects over time.

[16.10.14.7 NMAC - N, 1/20/03]

16.10.14.8 GUIDELINES: The following guidelines will be used by the New Mexico Board of Medical Examiners to determine whether a physician's or physician assistant's prescriptive practices are consistent with the appropriate treatment of pain.

A. The treatment of pain with various medicines and/or controlled substances is a legitimate medical practice when accomplished in the usual course of professional practice. It does not preclude treatment of patients with addiction, physical dependence and/or tolerance who have legitimate pain. However, such patients do require very close monitoring and precise documentation.

B. The prescribing, ordering, administering or dispensing of controlled substances to meet the individual needs of the patient for management of chronic pain is appropriate if prescribed, ordered, administered or dispensed in compliance with the following:

(1) A practitioner shall complete a physical examination and include an evaluation of the patient's psychological and pain status. The medical history shall include any previous history of significant pain, past history of alternate treatments for pain, potential for substance abuse, coexisting disease or medical conditions, and the presence of a medical indication or contra-indication against the use of controlled sub-

stances;

(2) A written treatment plan shall be developed and tailored to the individual needs of the patient, taking age, gender, culture, and ethnicity into consideration, with stated objectives by which treatment can be evaluated, e.g. by degree of pain relief, improved physical and psychological function, or other accepted measure. Such a plan should include a statement of the need for further testing, consultation, referral or use of other treatment modalities;

(3) The practitioner shall discuss the risks and benefits of using controlled substances with the patient and/or surrogate or guardian;

(4) Complete and accurate records of care provided and drugs prescribed shall be maintained. When controlled substances are prescribed, the name of the drug, quantity, prescribed dosage and number of refills authorized should be recorded. Patients with a history of substance abuse or who are in an environment posing a high risk for misuse or diversion of drugs (e.g., living with a drug abuser, living or working in a place where drugs are available) may require special consideration; and

(5) The management of patients needing chronic pain control requires monitoring by the attending and/or the consulting practitioner. In addition, a practitioner should consult, when indicated by the patient's condition, with health care professionals who are experienced (by the length and type of their practice) in the area of chronic pain control; such professionals need not be those who specialize in pain control. Consultation should occur early in the course of long-term treatment, and at reasonable intervals during continued long-term treatment for assessment of benefit and need. It is especially important, when treating addicts for legitimate pain apart from their addiction, to obtain a contractual agreement with the patient, appropriate consultation, and to set a schedule for re-evaluation at appropriate time intervals.

(6) If, in a practitioner's medical opinion, a patient is seeking pain medication for reasons that are not medically justified, the practitioner is not required to prescribe controlled substances for the patient.

C. The Board will evaluate the quality of care on the following basis: appropriate diagnosis and evaluation; appropriate medical indication for the treatment prescribed; documented change or persistence of the recognized medical indication; and, follow-up evaluation with appropriate continuity of care. The Board will judge the validity of prescribing based on the practitioner's treatment of the patient

and on available documentation, rather than on the quantity and chronicity of prescribing. The goal is to control the patient's pain for its duration while effectively addressing other aspects of the patient's functioning, including physical, psychological, social, and work-related factors.

D. The Board will review both over-prescription and under-prescription of pain medications using the same standard of patient protection as a guiding principle.

E. A practitioner who appropriately prescribes controlled substances and who follows this rule would be considered to be in compliance with this rule and not be subject to discipline by the Board, absent some violation of the Medical Practice Act or Board rules.

[16.10.14.8 NMAC - N, 1/20/03]

History of 16.10.14 NMAC: [Reserved]

NEW MEXICO BOARD OF MEDICAL EXAMINERS

This is an amendment to 16.10.2 NMAC, sections 7, 9, 10, 11, 12, 13, 14 and 15.

16.10.2.7 DEFINITIONS.

A. "Board approved school" means a medical college or school that has been approved by the Liaison Committee on Medical Education, composed of the American Medical Association and the Association of American Medical Colleges, ~~or~~ has a Liaison Council on Medical Education (LCME)-approved curriculum or equivalent for graduates of Canadian schools, is on the approved list of the California State Medical board, or has been approved by the Board.

B. "Board approved training program" means a program approved by the Accrediting Council on Graduate Medical Education of the American Medical Association (ACGME), the Royal Collage of Physicians and Surgeons of Canada (RCPSC), or a residency program located within an ACGME approved institution that has been approved by the Board.

C. "HSC" means the Hospital Services Corporation, a New Mexico corporation, and a Credential Verification Organization certified by the National Commission on Quality Assurance (NCQA)

~~[E.]~~ D. "FCVS" ~~[means the Federation of State Medical Boards Credential Verification Service.]~~ means the Federation Credential Verification Service of the Federation of State Medical Boards,

~~[D.]~~ E. "Telemedicine" means the practice of medicine across state lines as defined in the Medical Practice Act, Section 61-6-6,K NMSA 1978.

[16.10.2.7 NMAC - Rp 16 NMAC 10.2.7, 4/18/02; A, 1/20/03]

16.10.2.9 MEDICAL LICENSE BY EXAMINATION.

A. Prerequisites for Licensure. Each applicant for a license to practice as a medical doctor in New Mexico must possess the following qualifications:

(1) Graduated and received a diploma from a Board approved school;

(2) Successfully passed one of the examinations or combinations of examinations defined in 16.10.3 NMAC; and

(3) Completed two years of post-graduate training or been approved by the Board in accordance with the provisions of Section 61-6-11,C NMSA 1978;

(4) When the board has reason to believe that an applicant for licensure is not competent to practice medicine it may require the applicant to complete a special competency examination or to be evaluated for competence by other means that have been approved by the board; and

(5) A qualified applicant who has not been actively and continuously in practice for more than 2 years prior to application may be required to successfully complete a special examination or evaluation such as, but not limited to, the SPEX (Special Purpose Examination), the PLAS (Post-Licensure Assessment System of the Federation of State Medical Boards), or specialty re-certification.

B. Required Documentation for all applicants. Each applicant for a license must submit the required fees as specified in 16.10.9.8 NMAC and the following documentation:

(1) A completed application signed and notarized with a passport-quality photo taken within the previous 6 months. Applications are valid for 1 year from the date of receipt by the Board;

(2) Verification of licensure in all states or territories where the applicant holds or has held a license to practice medicine, or other health care profession. Verification must be sent directly to the board office from the other state board(s), must include a raised seal, and must attest to the status, issue date, license number, and other information requested and contained on the form. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners for applicants using FCVS or applying directly to the Board;

(3) Two recommendation forms from physicians, chiefs of staff or depart-

ment chairs or equivalent with whom the applicant has worked and who have personal knowledge of the applicant's character and competence to practice medicine. The recommending physicians must have personally known the applicant and have had the opportunity to personally observe the applicant's ability and performance. Forms must be sent directly to the board from the recommending physician. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners for applicants using FCVS or applying directly to the Board;

(4) Verification of all hospital affiliations in the last five years, if applicable, not to include postgraduate training. ~~[;and]~~ This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners for applicants using FCVS or applying directly to the Board;

(5) A copy of all ABMS specialty board certifications, if applicable. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners for applicants using FCVS or applying directly to the Board; and

(6) The board may request that applicants be investigated by the biographical section of the American Medical Association, the Drug Enforcement Administration, the Federation of State Medical Boards, the National Practitioner Data Bank, and other sources as may be deemed appropriate by the board. ~~[The board may also request information from other medical licensing boards and hospitals where the applicant has practiced; and]~~

(7) Applicants who have graduated from a medical school not located in the United States must provide proof that they are in compliance with the immigration laws of the United States.

C. Additional Documentation for applicants using the FCVS. All applicants are encouraged to use the FCVS as once a credential file is created future applications for medical licensure will be streamlined. However, application through FCVS is not required. Applicants using the FCVS must submit a completed application to the FCVS, who will provide primary source documentation to the Board. Only the documents required in 16.10.2.9.B are required in addition to the FCVS report.

D. Additional Documentation for applicants using HSC.

(1) Status report of ECFMG certification sent directly to the Board from ECFMG, if applicable;

(2) Copy of ECFMG interim letter documenting additional postgraduate training for International Medical Graduates applying through the Fifth Pathway process, if applicable;

(3) Certified transcripts of exam scores as required in 16.10.3 NMAC sent directly to the Board from the testing agency.

(4) Proof of identity must be presented at the personal interview. Acceptable documents include birth certificate, passport, naturalization documents, and visas.

[D:] E. Additional Documentation for applicants applying directly to New Mexico and not using FCVS or HSC.

(1) Verification of medical education form with school seal or notarized, sent directly to the board from the school;

(2) Transcripts sent directly to the board from the medical school;

(3) Notarized copy of diploma;

(4) Status report of ECFMG certification sent directly to the Board from ECFMG, if applicable.

(5) Copy of ECFMG interim letter documenting additional postgraduate training for International Medical Graduates applying through the Fifth Pathway process, if applicable;

(6) Postgraduate training form sent to the Board directly from the training program;

(7) Certified transcripts of exam scores as required in 16.10.3 NMAC sent directly to the Board from the testing agency; and

(8) Proof of identity must be presented at the personal interview. Acceptable documents include birth certificate, passport, naturalization documents, and visas.

(9) Certified copies of source documents obtained directly from another state licensing jurisdiction who has the original document on file will be accepted in lieu of original documents when the originals cannot be obtained for a valid cause.

[E:] F. Licensure Process.
Upon receipt of a completed application, including all required documentation and fees, the applicant will be scheduled for a personal interview before the board or a board member designated by the board and must present original documents as requested by the board.

(1) Applicants whose applications are complete and who successfully complete the interview may be issued an Interim license valid for a period of up to twelve months.

(2) In addition to the required personal interview, each applicant approved for

licensure must personally attend the board Orientation meeting within twelve months of the date of the interview prior to the issuance of a permanent license.

(3) Following attendance at the Orientation meeting, the applicant will receive a permanent license to practice medicine.

[F:] G. Initial License Expiration. Medical licenses expire on July 1 of every third year. Initial licenses are valid for a period of not more than thirty-seven months or less than thirty months. [16.10.2.9 NMAC - N, 5/1/02; A, 1/20/03]

16.10.2.10 MEDICAL LICENSE BY ENDORSEMENT

A. Prerequisites for Licensure. Each applicant for a license to practice as a medical doctor in New Mexico by endorsement must be of good moral character, hold a full and unrestricted license to practice medicine in another state, and possess the following qualifications:

(1) Successfully passed one of the examinations or combinations of examinations defined in 16.10.3 NMAC within three attempts per step/level and within a seven year time period from the date the first step is passed;

(2) Be free of disciplinary history, license restrictions, or pending investigations in all jurisdictions where a medical license is or has been held;

(3) Graduated from an approved medical school or hold current Educational Commission for Foreign Medical Graduates (ECFMG) certification; and

(4) Completion of three years of progressive postgraduate training in an accredited program; or

(5) Current certification from a medical specialty board recognized by the American Board of Medical Specialties (ABMS). Lifetime certificate holders who have not passed a written specialty recertification examination must demonstrate successful completion of the Special Purpose Examination (SPEX) or applicable recertification examination.

B. Required Documentation for all applicants. Each applicant for a license must submit the required fees as specified in 16.10.9.8 NMAC and the following documentation:

(1) A completed application signed and notarized with a passport-quality photo taken within the previous 6 months. Applications are valid for 1 year from the date of receipt by the Board;

(2) Verification of licensure in all states or territories where the applicant holds or has held a license to practice medicine, or other health care profession. Verification must be sent directly to the

board office from the other state board(s), must include a raised seal, and must attest to the status, issue date, license number, and other information requested and contained on the form.

(3) Two recommendation forms from physicians, chiefs of staff or department chairs or equivalent with whom the applicant has worked and who have personal knowledge of the applicant's character and competence to practice medicine. The recommending physicians must have personally known the applicant and have had the opportunity to personally observe the applicant's ability and performance. Forms must be sent directly to the board from the recommending physician. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners:

(4) Verification of all hospital affiliations in the last five years, if applicable, not to include postgraduate training. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners;

(5) A copy of all ABMS specialty board certifications, if applicable. This information will be provided by HSC for applicants using that service, or directly to the New Mexico Board of Medical Examiners; and

(6) The board may request that applicants be investigated by the biographical section of the American Medical Association, the Drug Enforcement Administration, the Federation of State Medical Boards, the National Practitioner Data Bank, and other sources as may be deemed appropriate by the board.

(7) Applicants who are not U.S. citizens must provide proof that they are in compliance with the immigration laws of the United States.

C. Licensure Process.
Upon receipt of a completed application, including all required documentation and fees, the applicant will be scheduled for a personal interview before the board or a board member designated by the board and must present proof of identity and other original documents as requested by the board.

(1) Applicants whose applications are complete and who successfully complete the interview may be issued an Interim license valid for a period of up to twelve months.

(2) In addition to the required personal interview, each applicant approved for licensure must personally attend the board Orientation meeting within twelve months of the date of the interview prior to the issuance of a permanent license.

(3) Following attendance at the Orientation meeting, the applicant will receive a permanent license to practice medicine.

D. Initial License Expiration. Medical licenses expire on July 1 of every third year. Initial licenses are valid for a period of not more than thirty-seven months or less than thirty months. [16.10.2.10 NMAC - N, 1/20/03]

16.10.2.[40]11 TELEMEDICINE LICENSE.

A. Prerequisites for Licensure. Each applicant for a Telemedicine license must be of good moral character and hold a full and unrestricted license to practice medicine in another state or territory of the United States.

B. Required Documentation. Each applicant for a telemedicine license must submit the required fees as specified in 16.10.9.8 NMAC and the following documentation:

(1) Completed application, signed and notarized with a passport quality photo taken within 6 months. Applications are valid for 1 year from the date of receipt;

(2) Verification of licensure in all states where the applicant holds or has held a license to practice medicine, or other health care profession. Verification must be sent directly to the board office from the other state(s) board, must include a raised seal, and must attest to the status, issue date, license number, and other information requested and contained on the form.

(3) Applicants who have had previous disciplinary or other action against them are required to meet with the entire board. The board may, in its discretion, issue a license to practice medicine across state lines if it finds that the previous disciplinary or other action does not indicate that the physician is a potential threat to the public.

C. Licensure Process. Upon receipt of a completed application, including all required documentation and fees, board staff will request and review an AMA Physician Profile and Federation of State Medical Boards Board Action Databank Search. When the application is complete the Secretary-Treasurer or board designee will review and may approve the application. A personal interview is not required unless there is a discrepancy in the application that cannot be resolved. [Attendance at the board orientation meeting is not required.]

D. Initial License Expiration. Telemedicine licenses expire on July 1 of every third year. Initial licenses are valid for a period of not more than three years or less than two years.

E. Exemption from Licensure Requirements are defined in Section 61-6-17 of the Medical Practice Act and include a physician licensed to practice under the laws of another state who acts as a consultant to a New Mexico licensed physician on an irregular or infrequent basis not to exceed ten patients per year.

[16.10.2.11 NMAC - Rp 16 NMAC 10.2.13, 4/18/02; 16.10.2.11 NMAC - Rn & A, 16.10.2.10 NMAC, 1/20/03]

16.10.2.[44]12 POSTGRADUATE TRAINING LICENSE. A Postgraduate Training license is required for all interns, residents, and fellows enrolled in board approved training programs within the State. Individuals enrolled in board approved training programs outside of New Mexico may apply for a Postgraduate Training license as a pre-requisite to obtaining a New Mexico Public Service license.

A. Required Documentation. Each applicant shall submit the required fee as specified in 16.10.9.8 NMAC and complete the Board-approved application.

(1) Applicants enrolled at the University of New Mexico Health Science Center must submit an application through the Office of Graduate Medical Education for review before it is forwarded to the Board for review and approval.

(2) Applicants enrolled at a board approved training program outside New Mexico must submit the postgraduate training license application directly to the Board.

B. Licensure Process. Upon receipt of a completed application and fee, the Secretary-Treasurer or board designee will review the application and may approve the license.

C. License Expiration: Postgraduate Training licenses are valid for no longer than one year, but may be renewed for a period not to exceed eight years or completion of the residency, whichever is shorter, and as long as the license holder is enrolled in a board approved training program. Postgraduate Training licenses may be renewed prior to expiration.

[16.10.2.12 NMAC - Rp 16 NMAC 10.2.14, 4/18/02; 16.10.2.12 NMAC - Rn, 16.10.2.11 NMAC, 1/20/03]

16.10.2.[42]13 PUBLIC SERVICE LICENSE. A resident physician may apply for a public service license, which enables him to practice medicine outside the training program. The resident physician must be continuing in the board approved training program.

A. Prerequisites for Licensure. Each applicant for a Public

Service license shall have graduated from an approved medical school, passed all required examinations as defined in 16.10.3 NMAC, and completed one year of post-graduate training. In addition, the applicant shall have completed an application for licensure including all required documentation [~~and FCVS, or the documentation~~] required in 16.10.2.9. B [~~#~~] through 16.10.2.9.E as applicable. Other requirements include:

(1) Written approval from his training program director.

(2) A Postgraduate Training license issued by the New Mexico Board of Medical Examiners.

(3) A resident physician with one-year postdoctoral training may only apply for a public service license when he is under the direct supervision of a New Mexico physician or when employed in a medically underserved area.

(4) If a physician is not being supervised directly, there must be procedures in place for a licensed New Mexico physician to review, on at least a quarterly basis, prescriptions written and dispensed for controlled substances and operative procedures performed.

B. Required Documentation. Each applicant for a Public Service license shall submit the required fee as specified in 16.10.9.8 NMAC and the following documentation:

(1) Completed application, signed and notarized with a passport quality photo taken within the previous 6 months. Applications are valid for 1 year from the date of receipt;

(2) Letter of approval from the Training Program Director.

C. Licensure Process. Upon receipt of a completed application, including all required documentation and fees, the applicant will be scheduled for a personal interview before the board or a board member designated by the board and must present original documents as requested by the board.

(1) Applicants whose applications are complete and who successfully complete the interview may be issued an Interim license valid for a period of up to twelve months.

(2) In addition to the required personal interview, each applicant approved for licensure must personally attend the board Orientation meeting within twelve months of the date of the interview prior to the issuance of a public service license.

(3) Following attendance at the Orientation meeting, the applicant will receive a public service license to practice medicine.

D. License Expiration.

Public Service licenses expire on July 1. Initial licenses are valid for a period of not more than 13 months or less than 8 months, or until completion of the training program. Public Service licenses may be renewed annually as long as the applicant remains eligible.

[16.10.2.13 NMAC - Rp 16 NMAC 10.3.9, 4/18/02; 16.10.2.13 NMAC - Rn & A, 16.10.2.12 NMAC, 1/20/03]

16.10.2.[43]14 TEMPORARY TEACHING, RESEARCH, AND SPECIALIZED DIAGNOSTIC AND TREATMENT LICENSES.

The Secretary-Treasurer may issue temporary licenses to physicians licensed in other states or jurisdictions who wish to teach, conduct research, or perform specialized diagnostic and treatment procedures in New Mexico on a temporary basis. The following provisions apply:

A. Prerequisites for Licensure. The applicant must:

(1) Be otherwise qualified to practice medicine in New Mexico;

(2) Hold an unrestricted license in another state or country;

(3) Submit the name of the sponsoring or associating physician(s), who must be actively licensed in New Mexico;

B. Required Documentation:

(1) Specific program or protocol of work planned;

(2) Address of sponsoring institution or organization where the work will be performed;

(3) An affidavit from the sponsoring physician attesting to the qualifications of the applicant and the purpose of the functions or medical procedures the applicant will perform;

(4) Verification of licensure in state or jurisdiction where physician is practicing; and

(5) A license fee as set forth in 16.10.9 NMAC.

C. Licensure Process.

Upon receipt of a completed application, including all required documentation and fees, board staff will request and review an AMA Physician Profile and Federation of State Medical Boards Board Action Databank Search. When the application is complete the Secretary-Treasurer or board designee will review and may approve the application. A personal interview is not required unless there is a discrepancy in the application that cannot be resolved or if there are any actions or restrictions on any license held in another state or jurisdiction.

D. The applicant may perform only those functions listed in the application.

E. The duration of a temporary teaching, research, or specialized diagnostic and treatment license shall not exceed three months, provided however that the license may be renewed up to three times upon payment of appropriate fees and written justification for the plan remaining in effect. If the plan changes, an updated plan must be submitted by the sponsoring physician to the Board for review and approval.

[16.10.2.14 NMAC - Rp 16 NMAC 10.3.8, 4/18/02; 16.10.2.14 NMAC - Rn, 16.10.2.13 NMAC, 1/20/03]

16.10.2.[44]15 YOUTH CAMP OR SCHOOL LICENSES.

The Secretary-Treasurer may issue temporary licenses to physicians to provide temporary medical services to organized youth camps or schools. Youth camp or school licenses are issued for a period not to exceed three months. Applicants must be qualified for licensure in New Mexico and shall submit the following documentation:

A. Completed application with a passport-quality photograph, taken within the previous 6 months, attached;

B. Verification of current unrestricted license from state or jurisdiction where applicant is currently practicing or licensed;

C. Verification of D.E.A. permit; and,

D. A temporary license fee as set forth in 16.10.9.8 NMAC.

E. Licensure Process. Upon receipt of a completed application, including all required documentation and fees, board staff will request and review an AMA Physician Profile and Federation of State Medical Boards Board Action Databank Search. When the application is complete the Secretary-Treasurer or board designee will review and may approve the application. A personal interview is not required unless there is a discrepancy in the application that cannot be resolved or if there are any actions or restrictions on any license held in another state or jurisdiction. [16.10.2.15 NMAC - Rn, 16.10.2.14 NMAC, 1/20/03]

NEW MEXICO BOARD OF MEDICAL EXAMINERS

This is an amendment to 16.10.9 NMAC, sections 7 and 8.

16.10.9.7 DEFINITIONS:

[Reserved]

A. "FCVS" means the Federation Credential Verification Service of the Federation of State Medical Boards.

B. "HSC" means the Hospital Services Corporation, a New Mexico corporation, and a certified credential verification organization serving hospitals and health plans.

[16.10.9.7 NMAC - Rp 16 NMAC 10.9.7, 7/15/01; A, 1/20/03]

16.10.9.8 PHYSICIAN FEES:

A. Application fee of \$100 for applicants providing source documentation through FCVS or HSC.

B. Application fee of \$350 for applicants applying to the Board and not using the Federation Credential Verification Service.

C. Interim permit fee of \$40.

D. Triennial license renewal fee of \$220 plus a triennial fee to support the impaired physicians program of \$90.

E. Temporary license fee for a temporary camp or school license of \$25.

F. Temporary license fee for a temporary teaching/research license of \$100.

G. Processing fee of \$25 for placing a license on inactive status;

H. Late fee of \$100 for all physicians who renew their license to active status, or provide required documentation after June 30 but no later than August 15 of the year of expiration.

I. Late fee of \$150 for physicians who renew their licenses to active status, or provide required documentation between August 16 and October 1 of the year of expiration.

J. Reinstatement fee of \$200, for reinstatement of a suspended license, which shall be in addition to other fees due and payable to the Board.

K. Duplicate license fee of \$30.

L. Duplicate renewal certificate fee of \$15.

M. Postgraduate training license fee of \$10.

N. Public service license fee of \$50 annually.

O. Biennial application fee of \$100 for a physician supervising a pharmacist clinician.

P. Telemedicine initial licensing and triennial renewal fee of \$180.

[16.10.9.8 NMAC - Rp 16 NMAC 10.9.8.1, 7/15/01; A, 5/1/02; A, 7/14/02; A, 1/20/03]

NEW MEXICO BOARD OF MEDICAL EXAMINERS

This is an amendment to 16.10.19 NMAC, section 10.

16.10.19.10 SUPERVISION REQUIREMENTS:

A. Pursuant to Session Laws of 2001, Ch. 311, Section 9, an anesthesiologist may not supervise more than two (2) anesthesiologist assistants, except in emergency cases.

B. The supervising anesthesiologist shall submit written notice of intent to supervise an anesthesiologist assistant on forms prescribed by the Board. These forms must be submitted and approved before the anesthesiologist assistant begins work. Supervising anesthesiologists who are notifying the board of their intent to supervise an anesthesiologist assistant with less than one year of experience will include a plan for providing enhanced supervision during the first year of practice.

C. An anesthesiologist assistant shall only work under the supervision of an anesthesiologist approved by the Board.

D. Failure of the supervising anesthesiologist to comply with the Medical Practice Act and the Rules may result in denial of approval for current or future anesthesiologist assistant supervision.

E. Except in cases of emergency, the supervising anesthesiologist must be present in the operating room during induction of a general or regional anesthetic and during emergence from a general anesthetic, and the presence of the supervising anesthesiologist must be documented in the patient record.

F. The supervising anesthesiologist must be present within the operating suite and immediately available to the operating room when an anesthesiologist assistant is performing anesthesia procedures.

G. The supervising anesthesiologist shall ensure that all activities, functions, services and treatment measures are properly documented in writing and that all anesthesia records are reviewed, countersigned and dated.

[16.10.19.10 NMAC - N, 8/11/01; A, 1/20/03]

NEW MEXICO REGULATION AND LICENSING DEPARTMENT RESPIRATORY CARE ADVISORY BOARD

NOTICE OF RULE REFORMATTING AND RENUMBERING Respiratory Care Advisory Board

On January 30, 2003, the renumbering and reformatting of the following regulations, reformatted and renumbered to comply with the current NMAC requirements, will become effective:

Regulation Title	Numbered From	Numbered To
Fees	16 NMAC 23.2	16.23.2 NMAC
Qualifications for Practitioner License	16 NMAC 23.3	16.23.3 NMAC
Application Procedures for Practitioner License	16 NMAC 23.4	16.23.4 NMAC
Temporary Permit Renewal	16 NMAC 23.7	16.23.7 NMAC
Renewal and Expiration of Practitioner License	16 NMAC 23.8	16.23.8 NMAC
Inactive Status for Practitioner License	16 NMAC 23.9	16.23.9 NMAC
License Reactivation; License Lapse	16 NMAC 23.11	16.23.11 NMAC
Continuing Education	16 NMAC 23.12	16.23.12 NMAC
Expanded Practice	16 NMAC 23.13	16.23.13 NMAC
Parental Responsibility Act Compliance	16 NMAC 23.15	16.23.15 NMAC
Disciplinary Proceedings	16 NMAC 23.16	16.23.16 NMAC
Grounds for Disciplinary Action	16 NMAC 23.17	16.23.17 NMAC
Disciplinary Guidelines for Impaired Practitioner	16 NMAC 23.18	16.23.18 NMAC

End of Adopted Rules and Regulations Section

SUBMITTAL DEADLINES AND PUBLICATION DATES

2003

Volume XIV	Submittal Deadline	Publication Date
Issue Number 1	January 2	January 15
Issue Number 2	January 16	January 31
Issue Number 3	February 3	February 14
Issue Number 4	February 17	February 28
Issue Number 5	March 3	March 14
Issue Number 6	March 17	March 31
Issue Number 7	April 1	April 15
Issue Number 8	April 16	April 30
Issue Number 9	May 1	May 15
Issue Number 10	May 16	May 30
Issue Number 11	June 2	June 13
Issue Number 12	June 16	June 30
Issue Number 13	July 1	July 15
Issue Number 14	July 16	July 31
Issue Number 15	August 1	August 15
Issue Number 16	August 18	August 29
Issue Number 17	September 2	September 15
Issue Number 18	September 16	September 30
Issue Number 19	October 1	October 15
Issue Number 20	October 16	October 30
Issue Number 21	October 31	November 13
Issue Number 22	November 14	November 26
Issue Number 23	December 1	December 15
Issue Number 24	December 16	December 30

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