TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 10 MEDICINE AND SURGERY PRACTITIONERS
PART 15 PHYSICIAN ASSISTANTS: LICENSURE AND PRACTICE REQUIREMENTS

16.10.15.1 ISSUING AGENCY: New Mexico Medical Board hereafter called the board.
[16.10.15.1 NMAC - Rp, 16.10.15.1 NMAC, 1/16/2018]

16.10.15.2 SCOPE: This part applies to physician assistants and their supervising physicians.
[16.10.15.2 NMAC - Rp, 16.10.15.2 NMAC, 1/16/2018]

16.10.15.3 STATUTORY AUTHORITY: This part is adopted pursuant to the Medical Practice Act, Sections 61-6-1 through 61-6-35 NMSA 1978.
[16.10.15.3 NMAC - Rp, 16.10.15.3 NMAC, 1/16/2018]

16.10.15.4 DURATION: Permanent.
[16.10.15.4 NMAC - Rp, 16.10.15.4, 1/16/2018]

16.10.15.5 EFFECTIVE DATE: January 16, 2018, unless a later date is cited at the end of a section.
[16.10.15.5 NMAC - Rp, 16.10.15.5 NMAC, 1/16/2018]

16.10.15.6 OBJECTIVE: This part regulates the licensing and practice of physician assistants and their supervision by or collaboration with licensed physicians.
[16.10.15.6 NMAC - Rp, 16.10.15.6 NMAC, 1/16/2018]

16.10.15.7 DEFINITIONS:

A. "AAPA" means American academy of physician assistants.

B. "Interim license" means permission issued by the board that allows a physician assistant to practice for one year pending completion of all licensing requirements.

C. "Effective supervision" means the exercise of physician oversight, control, and direction of services rendered by a physician assistant. Elements of effective supervision include:

(1) on-going availability of direct communication, either face-to-face or by electronic means;

(2) active, ongoing review of the physician assistants services, as appropriate, for quality assurance and professional support;

(3) a predetermined plan for emergency situations; and

(4) identification of other supervising physicians, as appropriate to the practice setting.

D. "Lapsed" means a license that has not been renewed by March 1 of the expiration year and has been suspended for non-renewal. A license that has lapsed is not valid for practice in New Mexico.

E. "Collaboration" means the process by which a licensed physician and physician assistant jointly contribute to the health care and treatment of patients; provided that:

(1) each collaborator performs actions that the collaborator is licensed or otherwise authorized to perform; and

(2) collaboration shall not be construed to require the physical presence of the licensed physician at the time and place services are rendered by the collaborating physician assistant.

F. "Collaborating Physician" means a physician who holds a current unrestricted license and does not assume legal responsibility for the health care performed by the collaborating physician assistant. A physician under an active monitoring contract with the New Mexico monitored treatment program who meets the other qualifications of this subsection may also act as a collaborating physician.

G. "Criminal history record" means information concerning a person's arrests, indictments, or other formal criminal charges and any dispositions arising there from, including convictions, dismissals, acquittals, sentencing and correctional supervision, collected by state or federal criminal justice agencies or their political subdivisions and stored in the computerized databases of the federal bureau of investigation, the national law enforcement telecommunications systems, the department of public safety or the repositories of criminal history information in other states or their political subdivisions.

H. "Criminal history screening" means a criminal history background investigation of an applicant for licensure by examination or endorsement, or a licensee applying for licensure renewal, through the use of fingerprints reviewed by the department of public safety and submitted to the federal bureau of investigation,

resulting in the generation of a nationwide criminal history record for that applicant.

I. "NCCPA" means national commission on certification of physician assistants.

J. "Primary Care" means health care provided by a healthcare provider who typically acts as the first contact and principal point of continuing care for patients and coordinates other specialist care or services that the patient may require. Primary care specialties are combined internal medicine and pediatrics, family medicine, general internal medicine, geriatrics (gerontology), general obstetrics and gynecology and general pediatrics.

K. "Direct communication" means communication between the supervising physician and physician assistant, in person, telephonically, by email or other electronic means.

L. "Scope of practice" means:

(1) For a supervised physician assistant, means duties and limitations of duties placed upon them by their supervising physician and the board and includes the limitations implied by the field of practice of the supervising physician; and

(2) For a collaborating physician assistant, means those duties which are within their education, training, and experience pursuant to Section 61-6-6 NMSA 1978.

M. "Supervising physician" means a physician who holds a current unrestricted license, provides a notification of supervision, assumes legal responsibility for health care tasks performed by the physician assistant and is approved by the board. A physician under an active monitoring contract with the New Mexico monitored treatment program who meets the other qualifications of this subsection may also act as a supervising physician.

N. "Suspended for non-renewal" means a license that has not been renewed by May 31 of the expiration year, and is lapsed, which is a non-disciplinary action.

O. "Military service member" means a person who is serving in the armed forces of the United States or in a reserve component of the armed forces of the United States, including the national guard, or the spouse of such an individual.

P. "Recent veteran" means a person who has received an honorable discharge or separation from military service within the two years immediately preceding the date the person applies for a physician assistant license pursuant to section 16.10.15.17 NMAC. The veteran shall submit a copy of form DD214, or its equivalent, as part of the application process.

[16.10.15.7 NMAC - Rp, 16.10.15.7 NMAC, 1/16/2018]

16.10.15.8 QUALIFICATIONS FOR LICENSURE AS A PHYSICIAN ASSISTANT UNDER SUPERVISION:

A. graduation from a program for physician assistants accredited by the committee on allied health education and accreditation (CAHEA) of the American medical association, the accreditation review committee on education for the physician assistant (ARC-PA) or its successor agency, or passed the physician assistant national certifying examination administered by NCCPA prior to 1986 and has proof of continuous practice with an unrestricted license as a physician assistant in another state for four years prior to application;

B. current NCCPA certification or certification by another certifying agency approved by the board;

C. supervising physician per 16.10.15.11;

D. good moral and professional character; and

E. any other proof of competency as may be requested by the board.

[16.10.15.8 NMAC - Rp, 16.10.15.8 NMAC, 1/16/2018]

16.10.15.9 LICENSURE PROCESS FOR A PHYSICIAN ASSISTANT UNDER SUPERVISION: Each applicant for a license as a physician assistant under supervision shall submit the required fees and following documentation.

A. A completed application for which the applicant has supplied all information and correspondence requested by the board on forms and in a manner acceptable to the board. Applications are valid for one year from the date of receipt.

B. Two letters of recommendation from physicians licensed to practice medicine in the United States or physician assistant program directors, or the director's designee, who have personal knowledge of the applicant's moral character and competence to practice.

C. Verification of licensure in all states where the applicant holds or has held a license to practice as a physician assistant, or other health care profession. Verification must be sent directly to the board from the other state board(s).

D. Verification of all work experience in the last two years, if applicable, provided directly to the board.

E. All applicants may be scheduled for a personal interview before the board or the board's designee for an interview and must present original documents, as the board requires. The initial license will be issued following completion of any required interview, or approval by a member or agent of the board.

F. The initial license is valid until March 1 of the year following expiration of certification by NCCPA or other certifying agency approved by the board.

G. License by endorsement from New Mexico board of osteopathic examiners. Applicants who are currently licensed in good standing by the New Mexico board of osteopathic examiners may be licensed by endorsement upon receipt of a verification of licensure directly from the New Mexico board of osteopathic examiners and a supervising physician form signed by the medical doctor who will serve as supervising physician.

H. All applicants for initial licensure as a physician assistant are subject to a state and national criminal history screening at their expense.

(1) Applications for licensure will not be processed until receipt of the background check requirements verification.

(2) Applications will be processed pending the completion of the nationwide criminal background screening and may be granted while the screening is still pending.

(3) If the criminal background screening reveals a criminal arrest or charge, the applicant/licensee will be notified to submit copies of legal documents and other related information to the board. Failure to report a criminal arrest or charge is a violation of the Medical Practice Act.

[16.10.15.9 NMAC - Rp, 16.10.15.9 NMAC, 1/16/2018]

16.10.15.10 APPROVAL OF SUPERVISING PHYSICIANS:

A. Pursuant to Section 61-6-10 NMSA 1978, a physician may supervise as many physician assistants as the physician can effectively supervise and communicate within the circumstances of their particular practice setting.

B. All supervising physicians shall submit written notice of intent to supervise a physician assistant on forms prescribed by the board.

C. Within 30 days after an employer terminates the employment of a physician assistant, the supervising physician or the physician assistant shall submit a written notice to the board providing the date of termination and reason for termination.

D. A physician assistant who is employed by the United States government and who works on land or in facilities owned or operated by the United States government or a physician assistant who is a member of the reserve components of the United States and on official orders or performing official duties as outlined in the appropriate regulation of that branch may be licensed in New Mexico with proof that their supervising physician holds an active medical license in another state.

[16.10.15.10 NMAC - Rp, 16.10.15.11 NMAC, 1/16/2018]

16.10.15.11 SUPERVISION OF A PHYSICIAN ASSISTANT: Supervision of a physician assistant must be rendered by a licensed supervising physician.

A. Responsibility of supervising physician.

(1) Provide direction to the physician assistant to specify what medical services should be provided. This may be done through a written utilization plan or by other direct communications.

(2) Provide a means for immediate communication between the physician assistant and the supervising physician.

(3) Comply with the quality assurance requirements specified in Subsection B of 16.10.15.11 NMAC.

B. Quality assurance requirements. A quality assurance program for review of medical services provided by the physician assistant must be in place.

[16.10.15.11 NMAC - Rp, 16.10.15.12 NMAC, 1/16/2018]

16.10.15.12 QUALIFICATIONS FOR COLLABORATIVE PHYSICIAN ASSISTANT LICENSURE:

A. graduation from a program for physician assistants accredited by the committee on allied health education and accreditation (CAHEA) of the American medical association, the accreditation review committee on education for the physician assistant (ARC-PA) or its successor agency, or passed the physician assistant national certifying examination administered by NCCPA prior to 1986 and has proof of continuous practice with an unrestricted license as a physician assistant in another state for four years prior to application;

B. current NCCPA certification or certification by another certifying agency approved by the board;

C. practice primary care as defined in Subsection J of 16.10.15.7 NMAC;

D. completed three years of clinical practice as a physician assistant with supervision by a licensed physician;

E. maintain a policy of malpractice liability insurance;

D. good moral and professional character; and

E. any other proof of competency as may be requested by the board.

[16.10.15.12 NMAC - N, 1/16/2018]

16.10.15.13 LICENSURE PROCESS FOR A COLLABORATIVE PHYSICIAN ASSISTANT:

Each applicant for a collaborative physician assistant license shall submit the required fees and following documentation.

A. A completed application for which the applicant has supplied all information and correspondence requested by the board on forms and in a manner acceptable to the board. Applications are valid for one year from the date of receipt.

B. Two letters of recommendation from physicians licensed to practice medicine in the United States or physician assistant program directors, or the director's designee, who have personal knowledge of the applicant's moral character and competence to practice.

C. Verification of licensure in all states where the applicant holds or has held a license to practice as a physician assistant, or other health care profession.

D. Verification of three years of clinical practice as a physician assistant.

E. Verification of current malpractice liability insurance.

F. All applicants may be scheduled for a personal interview before the board or the board's designee for an interview and must present original documents, as the board requires.

G. The initial license is valid until March 1 of the year following expiration of NCCPA or other certifying agency approved by the board.

H. License by endorsement from New Mexico board of osteopathic examiners. Applicants who are currently licensed in good standing by the New Mexico board of osteopathic examiners may be licensed by endorsement upon receipt of a verification of licensure directly from the New Mexico board of osteopathic examiners; verification of three years of clinical practice as a physician assistant, and verification of current malpractice liability insurance as well as meet other listed requirements.

I. All applicants for initial licensure as a physician assistant are subject to a state and national criminal history screening at their expense.

(1) Applications for initial licensure will not be processed until receipt of the background check requirements verification.

(2) Applications for initial licensure will be processed pending the completion of the nationwide criminal background screening and may be granted while the screening is still pending.

(3) If the criminal background screening reveals a criminal arrest or charge, the applicant/licensee will be notified to submit copies of legal documents and other related information to the board. Failure to report a criminal arrest or charge is a violation of the Medical Practice Act.

[16.10.15.13 NMAC - N, 1/16/2018]

16.10.15.14 COLLABORATIVE AND SUPERVISED STATUS:

A. A physician assistant may request a change from supervised to collaborative status by submitting verification of at least three years of clinical practice supervised by a licensed physician and provide proof of current malpractice liability insurance. This change will allow the physician assistant to work as a collaborative or supervised physician assistant.

B. A physician assistant may request a change from collaborative to supervised status by submitting a supervising physician form to the board.

[16.10.15.14 NMAC - N, 1/16/2018]

16.10.15.15 INTERIM AND TRAINING PERMITS:

A. Interim permits are issued to qualified applicants who have completed the application process and complied with all other licensure requirements except certification by the NCCPA or other certifying agency approved by the board.

(1) Physician assistants not currently certified by NCCPA or other certifying agency approved by the board, have a one-time grace period of one year from the date of graduation from a program

approved by ARC-PA or its successor agency to become certified.

(2) Interim permits expire at the end of the one year grace period. Upon expiration of the interim permit the physician assistant may no longer practice, but may reapply upon certification by NCCPA or other certifying agency approved by the board.

B. Training permits may be issued to qualified applicants, regardless of certification status by NCCPA or other certifying agency approved by the board, who have completed the application process and who have not been actively and continuously in clinical practice for the two years prior to application and who are required by the board to undertake appropriate retraining prior to licensure or reinstatement. A training permit shall be valid for one year and may not be renewed.

[16.10.15.15 NMAC - Rp, 16.10.15.10 NMAC, 1/16/2018]

16.10.15.16 SCOPE OF PRACTICE:

A. Unless otherwise provided by law, physician assistants may provide medical services within the scope of the physician assistants' education and experience.

B. A physician assistant may assist a designated supervising physician or collaborating physician in an inpatient or surgical health care institution within the institution's bylaws or policies including act as a first surgical assistant in the performance of surgery, when permitted by the institution's bylaws or regulations.

[16.10.15.16 NMAC - Rp, 16.10.15.13 NMAC, 1/16/2018]

16.10.15.17 PRACTICE LIMITATIONS: Practice limitations are determined by the supervising physician's or specialty and practice setting in addition to the physician assistant's education and training.

[16.10.15.17 NMAC - Rp, 16.10.15.14 NMAC, 1/16/2018]

16.10.15.18 LICENSE EXPIRATION, RENEWAL, CHANGE OF STATUS:

A. Physician assistant licenses expire on March 1 of the year following expiration of certification by NCCPA or other certifying agency approved by the board. To avoid additional penalty fees, a completed renewal application, accompanied by the required fees, proof of current certification of NCCPA or other certifying agency approved by the board, and other documentation must be submitted through the online renewal system, post-marked or hand-delivered on or before March 1 of the expiration year. A New Mexico physician assistant license that has not been renewed by March 1 of the renewal year will remain temporarily active with respect to medical practice until June 1 of the renewal year at which time, the board shall suspend the license for non-renewal and the status shall be changed to lapsed.

B. The board assumes no responsibility for renewal applications not received by the licensee for any reason. It is the licensee's responsibility to assure the board has accurate address information and to make a timely request for the renewal application if one has not been received prior to license expiration.

C. Renewal applications postmarked or hand-delivered after March 1 but prior to April 15 must be accompanied by the completed renewal application, proof of current certification of NCCPA or other certifying agency approved by the board, the renewal fee and late fee indicated in 16.10.9.9 NMAC.

D. Renewal applications postmarked or hand-delivered on or after April 16 but prior to May 30 must be accompanied by the completed renewal application, proof of current certification of NCCPA or other certifying agency approved by the board, the renewal fee and late fee indicated in 16.10.9.9 NMAC.

E. A physician assistant who has not passed the NCCPA recertification exam or been recertified by another certifying agency approved by the board, prior to the date of license expiration may apply to the board for an emergency deferral of the requirement. A designee of the board may grant deferrals of up to one year.

(1) A physician assistant who is granted an emergency deferral shall pay the renewal fee and additional late fee indicated in 16.10.9.9 NMAC.

(2) The license of a physician assistant who is granted an emergency deferral shall expire two years after the original renewal date, regardless of the duration of the emergency deferral.

F. The board shall suspend for non-renewal and change the status to lapsed on June 1 of the renewal year, the license of any physician assistant who has failed within 90 days after the license renewal date to renew their license, or to change the license status, or to pay all required fees, or to comply with the boards certification requirements, or to provide required documentation, or to request an emergency deferral.

G. At the time of license renewal a physician assistant may request a status change.

(1) A license that is placed on inactive status requires payment of a fee as defined in 16.10.9.9 NMAC. A license in inactive status is not valid for practice in New Mexico but may be reinstated in accordance with the provisions of 16.10.15.16 NMAC.

(2) On request, a license may be placed on retired status. There is no charge for this change in status. A retired license is not valid for practice in New Mexico and such license may not subsequently be reinstated. A physician assistant with a retired license who chooses to reinstate the license must re-apply as a new applicant.

(3) A physician assistant who does not wish to renew the active license in New Mexico and will voluntarily allow the license to lapse may inform the board of the wish not to renew. A voluntarily lapsed license is not valid for practice in New Mexico but may be reinstated in accordance with the provisions of 16.10.15.17 NMAC.

H. Reinstatement within two years. An inactive, lapsed, voluntarily lapsed or suspended license may be placed on active status upon completion of a renewal application in which the applicant has supplied all required fees and proof of current certification by NCCPA or other certifying agency approved by the board.

I. Reinstatement after two years. An inactive, lapsed, voluntarily lapsed or suspended license may be placed on active status upon completion of a reinstatement application for which the applicant has supplied all required fees, information and correspondence requested by the board on forms and in a manner acceptable to the board. Applicants may be required to personally appear before the board or the board's designee for an interview.

J. Reinstatement applications will be subject to a one-time nationwide and statewide criminal history screening.

(1) Reinstatement applications will be processed pending the completion of the statewide criminal history screening and may be granted while the screening still pending.

(2) If the nationwide or statewide criminal background screening reveals a felony or a violation of the Medical Practice Act, the licensee will be notified to submit copies of legal documents and other related information to the board which will make the determination if the applicant is eligible for licensure or if disciplinary action will be taken.

K. Additional continuing medical education requirements. The specific continuing medical education requirements set forth at 16.10.15 NMAC shall be satisfied for license renewal. Proof of satisfaction of these requirements shall be submitted directly to the board.

[16.10.15.18 NMAC - Rp, 16.10.15.16 NMAC, 1/16/2018]

16.10.15.19 EXPEDITED MEDICAL LICENSURE FOR MILITARY AND SPOUSES LICENSED IN ANOTHER JURISDICTION. If a military service member, the spouse of a military service member, or a recent veteran submits an application for a physician assistant license and is a qualified applicant pursuant to this part, the board shall expedite the processing of such application and issue the appropriate license as soon as practicable. Any qualified applicant seeking expedited consideration pursuant to this section shall submit a copy of form DD214 or its equivalent with their application.

[16.10.15.19 NMAC - Rp, 16.10.15.17 NMAC, 1/16/2018]

16.10.15.20 EXEMPTION FROM LICENSURE:

A. A physician assistant student enrolled in a physician assistant or surgeon assistant educational program accredited by the committee on allied health education and accreditation or by its successor shall be exempt from licensure while functioning as a physician assistant student.

B. A physician assistant employed by the United States government and who works on land or in facilities owned or operated by the United States government or a physician assistant who is a member of the reserve components of the United States and on official orders or performing official duties as outlined in the appropriate regulation of that branch.

[16.10.15.20 NMAC - Rp, 16.10.15.15 NMAC, 1/16/2018]

HISTORY of 16.10.15 NMAC:

Pre-NMAC history: Material in this part was derived from that previously filed with the Commission of Public Records - State Records Center and Archives:

NMBME Rule 79-14, Rules and Regulations Governing the Issuance of Certificates of Qualification of Physicians' Assistants, 9/19/79.

NMBME Rule 79-15, Rules and Regulations Pertaining to Physicians' Assistants, 9/19/79.

NMBME Rule 79-15, Rules and Regulations Pertaining to Physicians' Assistants, 10/4/79.

NMBME Rule 79-15, Amendment No. 1, 1/21/81.

Rule 86-2, Physician Assistants - Approval of Supervising Physicians, 2/5/86.

Rule 89-PA1, Physician Assistant-Definitions, 6/16/89.

Rule 89-PA2, Physician Assistants - Qualifications of Physician Assistants, 6/16/89.
Rule 89-PA3, Physician Assistant - Registration, 6/16/89.
Rule 89-PA4, Physician Assistants - Approval of Supervising Physicians, 6/16/89.
Rule 89-PA5, Physician Assistant - Relationship of Physician Assistants to Designated Supervising Physicians, 6/16/89.
Rule 89-PA6, Physician Assistants - Scope of Practice, 6/16/89.
Rule 89-PA9, Physician Assistants - Physician Assistant Students, 6/16/89.
Rule 92-PA6, Physician Assistants - Scope of Practice, 1/14/92.
PA Rule 3, Physician Assistant - Registration, 10/27/94.
PA Rule 5, Physician Assistant - Relationship of Physician Assistants to Designated Supervising Physicians, 10/27/94.

NMAC History:
16 NMAC 10.15, Qualifications and Licensure for Physician Assistants, 3/5/97.
16 NMAC 10.15, Qualifications and Licensure for Physician Assistants, 6/16/98.

History of the Repealed Material:
16 NMAC 10.15, Qualifications and Licensure for Physician Assistant - Repealed, 7/15/01.
16.10.15 NMAC, Physician Assistants: Licensure and Practice Requirements - Repealed, 1/30/2015.
16.10.15 NMAC, Physician Assistants: Licensure and Practice Requirements, filed 1/7/2015 - Repealed, 1/16/2018.

NMAC History:
16.10.15 NMAC, Physician Assistants: Licensure and Practice Requirements (filed 1/7/2015) was replaced by 16.10.15 NMAC, Physician Assistants: Licensure and Practice Requirements, effective 1/16/2018.