## TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control 545 Department or Agency Alabama Medical Lice	ensure Commission
Rule No. Chapter 545-X-509  Rule Title: Certification of Compliance  New X Amend Repeal	Adopt by Reference
Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety?	YES
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?	YES
Is there another, less restrictive method of regulation available that could adequately protect the public?	NO
Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?	NO
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?	NO
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	YES
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Does the proposed rule have an economic impact?	NO
If the proposed rule has an economic impact, the proposed required to be accompanied by a fiscal note prepared in accompassection (f) of Section 41-22-23, <u>Code of Alabama 1975</u> .  ***********************************	rdance with
Certification of Authorized Official I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabar filing requirements of the Administrative Procedure Division of the Legi	na 1975, and that it conforms to all applicable
Signature of certifying officer	d ms
Date: 11 Am 25 20/2	

## ALABAMA MEDICAL LICENSURE COMMISSION

## **NOTICE OF INTENDED ACTION**

AGENCY NAME:

Alabama Medical Licensure Commission

RULE NO. & TITLE:

545-x-5-.09 Certification of Compliance

INTENDED ACTION:

To amend rule 545-x-5-.09

SUBSTANCE OF PROPOSED ACTION:

To amend rule to eliminate the continuing medical education grace period. To eliminate obtaining continuing medical education as a condition precedent to renewing a medical license.

TIME, PLACE, MANNER OF PRESENTING VIEWS: All interested persons may submit data, views or arguments concerning the proposed new rule(s) and regulation(s) in writing to: Karen H. Silas, Executive Assistant, Alabama Medical Licensure Commission, Post Office Box 887, Montgomery, Alabama 36101-0887, by mail or in person between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday, until and including Friday, August 3, 2012. Persons wishing to obtain copies of the text of this rule and submit data, views or comments or arguments orally should contact Karen H. Silas, by telephone (334/242-4153) during said period in order to set up an appointment for a hearing respecting such oral data, views, or arguments.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

August 3, 2012

**CONTACT PERSON AT AGENCY:** 

Karen H. Silas

James E. West, m.D., Chairman

## 545-X-5-.09 Certification of Compliance.

Every physician shall certify annually that he or she has met <u>or will meet by December</u>

31 the minimum annual continuing medical education requirement established pursuant to this Chapter. This certification will be made on a form provided on the annual license registration certificate application required to be submitted by every licensed physician on or before December 31st of each year. The certification shall be in the following form: (Check a or b)

.om (omook a	O. 2,		
(a) (_	)	hereby certify that I have met or will meet by December 31 the	
annual minimun	n coi	ntinuing medical education requirement of twenty-five (25) hours of	
AMA PRA Cate	gory	I Credits™ or equivalent continuing medical education for the	
calendar year 2	.0	and have <u>or will have</u> supporting documentation if audited.	
(b) (_	)	certify that I am exempt from the minimum continuing	
medical education requirement for the following reason: (Check One)			
(	_)	I do not reside in the State of Alabama and do not have a	
		significant portion of my medical practice in the State of Alabama.	
(_	_)	I was exempt from the CME requirement for the previous calendar	
		year 20, and I moved my residence to the state of Alabama	
		during the calendar year 20	
(_	_)	I received my initial license to practice medicine in Alabama in the	
		calendar year 20	
(_	_)	I have obtained a retirement waiver from the Board of Medical	
		Examiners, and I do not engage in the practice of medicine in any	
		form.	

	I have obtained a waiver from the Board of Medical Examiners due
	to illness, disability or other hardship condition which existed in the
	calendar year 20
()	I am enrolled or was enrolled in a residency training program or
	clinical fellowship program during the calendar year 20
()	I am exempt from the CME requirement for the calendar year 20
	because I am a member of a branch of the armed services and I
	was deployed for military service in the calendar year 20

Author: Wendell R. Morgan

Statutory Authority: Code of Ala. 1975, §34-24-311, Act 89-244. History: Filed November 2, 1990; effective October 1, 1991.

Amended: Filed August 20, 1996; effective September 24, 1996. [Amended]

Repealed and Replaced January 28, 2004.

Adopted as an Emergency Rule effective January 30, 2004

Repeal and Replace Approved for Publication, January 28, 2004

Filed January 30, 2004; Effective May 28, 2004

Amended: Approved for Publication January 27, 2010.

Filed: February 4, 2010; Final Approval April 28, 2010; Filed May 5, 2010;

Effective Date June 9, 2010

Amended: Adopted as an Emergency Rule filed/effective May 25, 2012

Approved for Publication May 23, 2012, Filed May 25, 2012