Alabama State Board of Medical Examiners and Medical Licensure Commission

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LICENSE AND REGISTRATION RENEWALS

- All licenses expire annually on Dec. 31.
- There is a grace period for full MD/DO licenses only to renew from Jan. 1 to Jan. 31 with a late fee.
- Renewal applications are completed and submitted through the Licensee Portal beginning on Oct. 1.
- Reminder emails are sent to the email address of record beginning in October.
 - o Be sure the email address associated with your mailing address is correct at the Licensee Portal.
- All lawful aliens/foreign national licensees practicing in Alabama are required to submit annually a Declaration of Lawful Presence form with proof of legal presence as a non-permanent alien prior to renewing a license. Once legal presence documentation has been received and approved, the license will be available for renewal.

LICENSES AND REGISTRATIONS AVAILABLE FOR RENEWAL:

- MD/DO Licenses Full (traditional and IMLC)
 - Limited and RSVP
- MD/DO Registrations
 - ACSC
 - Dispensing (controlled substances)
 - Office Based Surgery
 - Pain Management
 - Use of Lasers and Other Modalities
 - Collaborative Pharmacy Practice
- PA/AA Licenses
- QACSC/LPSP

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MD/DO LICENSES

FULL (TRADITIONAL AND IMLC) (Renewal Fee \$300)

Full traditional license renewal requirements:

- All licenses expire on December 31 each year.
- Renewal period is Oct 1 Dec 31 (grace period with an additional charge Jan 1 31).
- Reminder emails are sent to the email address of record beginning in October.
- Renewals are accomplished online using the Licensee Portal beginning on Oct. 1.
- Be sure the information provided is accurate.
- NOTE: All lawful aliens/foreign national licensees must submit annually a <u>Declaration of Citizenship and Lawful</u> <u>Presence of an Alien</u> with documentation prior to license renewal. You will not be allowed to renew online or manually until legal presence documentation has been received and approved.

Full license via the Interstate Medical Licensure Compact renewal:

Licenses obtained via the IMLC must be renewed by using the IMLC renewal website. If the IMLC licensee has an ACSC, the license must first be renewed, then the ACSC may be renewed through the Alabama Licensee Portal.

YOU MUST RENEW LICENSES OBTAINED THROUGH THE COMPACT BY USING THE COMPACT WEBSITE

LIMITED LICENSE

(COQ Renewal Fee \$15/License Renewal Fee \$300)

- Limited certificates of qualification (COQ) and licenses are issued for one year only.
- Limited COQs must be renewed prior to Oct. 10
- Once the COQ is renewed, you must also renew the limited license through the <u>Licensee Portal</u>.

All lawful aliens/foreign national licensees practicing in Alabama are required to submit annually a Declaration of Lawful Presence form with proof of legal presence as a non-permanent alien prior to renewing your license. You will not be allowed to renew until legal presence documentation has been received and approved by SAVE. Likewise, manual renewals will not be processed without proper documentation.

RETIRED SENIOR VOLUNTEER PROGRAM LICENSE

(No Renewal Fee)

- RSV licenses and certificates of qualification expire annually on Dec. 31.
- The certificate of qualification must be renewed prior to renewing the license.
- Fill out the <u>RSVP Certificate of Qualification Renewal Application</u>, have it signed by the clinic or facility administrator, and email or mail it to the Board on or before October 12.
- Once the COQ renewal application has been approved by the Board, the RSVP License is available to be renewed through the <u>renewal website</u> which opens on Oct. 1.
- Please contact your facility with any questions or for additional information.

All lawful aliens/foreign national licensees practicing in Alabama are required to submit annually a Declaration of Lawful Presence form with proof of legal presence as a non-permanent alien prior to renewing your license. You will not be allowed to renew until legal presence documentation has been received and approved by SAVE. Likewise, manual renewals will not be processed without proper documentation.

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REGISTRATIONS

ACSC

(Renewal Fee \$150)

- ACSCs are renewed annually on or before Dec. 31 through the Licensee Portal.
- Be prepared to upload a copy of your current DEA certificate during the renewal process.
- To apply for re-issuance of an expired ACSC, please contact ACSC@albme.org.

DISPENSING (CONTROLLED SUBSTANCES)

(No Renewal/Fee)

Currently, Dispensing Physician registrations do not expire. Dispensing Physicians are expected to terminate their registrations when they no longer dispense controlled substances from any location.

OFFICE BASED SURGERY

(No Fee)

Office Based Surgery registrations are made annually during the license renewal process by Jan. 31. If you answer "yes" to the question of whether you perform office-based surgery, you will be directed to the registration form. There is no fee for this registration.

PAIN MANAGEMENT

(Renewal Fee \$100)

Pain management registrations expire on Dec. 31 of each year and are renewed in the same manner and during the same period as licenses and ACSCs (Oct. - Dec.).

USE OF LASERS AND OTHER MODALITIES AFFECTING LIVING TISSUE

(No Fee)

Registrations for the use of lasers and light/energy-based devices (LLBDs) now renew annually during the license renewal period. If you answer "yes" to the question of whether you utilize LLBDs in your practice, you will be directed to register and/or renew your current registration. There is no fee for this registration.

COLLABORATIVE PHARMACY PRACTICE

(Renewal Fee \$200 Medical Board / \$50 Pharmacy Board)

Collaborative Pharmacy Practice agreements renew every two years. Physicians who are currently in a Collaborative Pharmacy Practice agreement due for renewal will be contacted individually with instructions.

PA/AA LICENSES

(Renewal Fee \$100)

- Licenses are renewed annually on or before Dec. 31.
- The annual CME requirement is 25 AMA PRA Category 1 Credits. (NOTE: Beginning in 2025, the CME requirement will be 50 AMA PRA Category 1 Credits every two years to match the national requirement.)

If a PA/AA fails to renew a license before Jan. 1 of each year, it may subsequently be renewed as follows:

- Between Jan. 1 and Jan. 31, submit a completed application, pay the fee, and certify completion of the required CME credits earned in the prior year.
- Feb. 1 and thereafter, submit a completed application, pay the fee, and submit proof of completion of the required CME credits earned within the preceding 12 months.

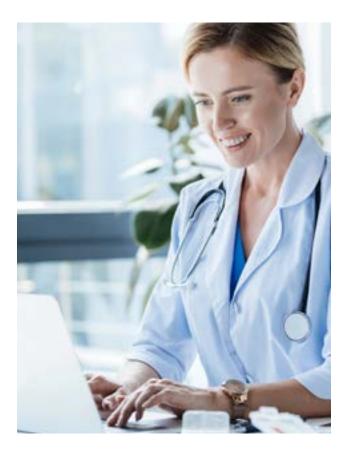
COVERING PHYSICIAN CERTIFICATION

Collaborating and Supervising Physicians are required to certify annually that any approved covering physician continues to agree to serve in that capacity.

During the license renewal process, physicians in collaborative and supervisory agreements with CRNPs, CNMs, PAs, and/ or AAs will be prompted to make the required certification. You will be directed to the Licensee Portal under Covering Physician Information, where you can view the covering physicians for your collaborative/supervisory practice, remove any that are no longer active, and make the certification.

QACSC/LPSP

- QACSC/LPSP is renewed annually on or before Jan. 1 of each year.
- QACSC/LPSP renewals begin on Oct. 1 and are online only through the Licensee Portal.
- As a requirement for QACSC/LPSP renewal, applicant must:
 - o Obtain four AMA PRA Category 1 credits every two years through a <u>Board-approved course regarding</u> the prescribing of controlled substances.
 - o Have a current registration to access the Prescription Drug Monitoring Databank.
 - o Have a current <u>Drug Enforcement Administration</u> registration (you can upload a copy of your DEA certificate during the renewal process).



LIMITED LICENSEES-BEGIN YOUR RENEWAL PROCESS NOW

Holders of limited licenses (residency, fellowship, professorship, and state penal or mental institution) should start now with the limited certificate of qualification and limited license two-step renewal process.

The limited certificate of qualification renewal application (<u>located at this link</u>) must be completed by the applicant AND the program director/other official and be received by the Board by <u>Oct. 10, 2024</u>.

The applications must be approved by the Board no later than its October 17 meeting to provide time for renewal of the limited license by the Medical Licensure Commission.

Please see the instruction letter at the above link for further details.

DECLARATORY RULING CONCERNING COMPOUNDING PRODUCTS BY PHYSICIANS

FACTS PRESENTED

Purchasing

Semaglutide powder is being advertised to physician offices and the public for purchase from innumerable sources. Much of this semaglutide is NOT prescription quality. The outlets are selling semaglutide salt forms and research grade powder. These salt forms and research grade powders are NOT approved by the FDA nor are they evaluated for safety. As such, the only powder that should be used in compounding is the prescription quality powder.

Pharmacists are required to purchase and use only prescription quality active pharmaceutical ingredients when compounding a drug for human consumption. Outlets attempting to sell GLP-1 powder or products to practitioners in Alabama must have the appropriate permit from the ALBOP. Physicians can validate a supplier has an active permit with ALBOP by utilizing the License Verification feature on the ALBOP website, www.albop.com.

Compounding

The Federal Food, Drug and Cosmetic Act (FDCA) expressly recognizes the United States Pharmacopeia (USP) quality standards for medicines. USP has extensive standards outlining the proper and safe processes for compounding sterile injectable products. USP explicitly states that the standards apply to all places where compounded sterile preparations (CSPs) are prepared, including physician offices, and enforcement falls on state regulatory bodies.

These standards expressly lay out requirements for sterility, stability, and beyond use dating as the industry standard to protect public safety in compounding products for prescription use.

We are aware some physicians may not consider themselves compounding because they are simply drawing unit dose syringes from a bulk vial to send home with the patient. However, this practice is regulated as a compounding action.

QUESTIONS PRESENTED

- (1) Does the exemption of physicians under Ala. Code § 34-23-11 permit a physician to compound and dispense a drug using non-prescription quality ingredients?
- (2) Are physicians required to ensure any prescription product or ingredient is purchased from an entity permitted by the Alabama State Board of Pharmacy?
- (3) Are physicians required to comply with USP standards when compounding GLP-1 products?

ANSWER

- Alabama-licensed physicians are not permitted to compound or dispense a drug using nonprescription quality ingredients.
- (2) Alabama-licensed physicians are required to purchase prescription products and ingredients only from an entity

permitted by the Alabama State Board of Pharmacy.

(3) Alabama-licensed physicians are required to comply with USP standards when compounding GLP-1 products.

DISCUSSION

The Alabama State Board of Pharmacy ("ALBOP") regulates the practice of pharmacy, the importation of drugs, and the compounding and dispensing of drugs "in such a manner as to protect the public." Ala. Code § 34-23-2. Generally, no "person, firm, or corporation" can practice pharmacy, compound drugs, or dispense medications unless he or she possesses a license issued by ALBOP. Ala. Code § 34-23-50(a). However, Alabama-licensed physicians may compound, dispense, administer, or supply drugs to their patients for the patient's personal use without a license issued by ALBOP. Ala. Code § 34-23-11.

This exemption is referenced in Ala. Code § 34-23-70, which sets forth certain requirements and restrictions attaching to the operation of a pharmacy. In the midst of a list of requirements ALBOP is empowered to enforce, the Legislature clarified that ALBOP is not authorized to "promulgate or enforce any rule which governs, regulates, or restricts the professional practice of a physician licensed to practice medicine in this state." Ala. Code § 34-23-70(g)(3). It appears to the Board that the Legislature's intent is that ALBOP

not impair an Alabama-licensed physician's medical practice or subject physicians to regulation by ALBOP. This accords with the broad definition of the practice of medicine and the exclusive authority of the Board and Medical Licensure Commission to license and regulate the practice of medicine in this state. See Ala. Code § 34-24-50; § 34-24-53; and § 34-24-311.

However, it is the opinion of the Board that this statute is not intended to exempt physicians from the public welfare and safety purposes accomplished by the licensing and regulation of pharmacists and pharmacies. Indeed, a primary goal of the regulation of the practice of medicine by the Board is "prioritize patient safety and wellness" and to "determine the medical practices" that achieve this goal. Ala. Code § 34-24-53.1(a)(2)-(3). Patient safety and wellness is not prioritized if physicians disregard the safety measures put in place and enforced by ALBOP. Instead, Alabama-licensed physicians should participate in and bolster ALBOP's efforts to combat unscrupulous actors who seek to introduce dangerous drugs to Alabama's citizens.

While it is true that nothing in the Alabama Pharmacy Act "shall prevent any licensed practitioner of the healing arts from personally compounding, dispensing, administering or supplying to his or patients drugs and medicines for their use," it is also true that "[n]o manufacturer . . . wholesale drug distributor . . . or [any other person or entity] identified in the supply chain of any legend drug or device shall ship, or cause to be shipped, into the state any legend drug or device without a valid permit issued by [ALBOP]." Ala. Code §§ 34-23-11 and 34-23-32(g). It is the unambiguous intent of the Legislature that all drugs come into the state through licensed sources. Accordingly, it is the opinion of the Board that physicians must purchase prescription products and ingredients only from an entity permitted by ALBOP.

Furthermore, ALBOP has determined that patient safety requires "[a]ll pharmacies that engage in the compounding of drugs or drug products" to comply with "all applicable and current regulations of the United States Pharmacopeia-National Formulary (USP)-NF." Ala. Admin. Code r. 680-X-2-.43. This directive requires pharmacists to adhere to USP 797, which sets the standards for compounding sterile preparations. USP 797 is a national standard utilized by the FDA, as well as many states. It is intended to apply to "all persons who prepare [compounded sterile preparations] and all places where [these preparations] are prepared. . . . [including] physicians." USP 797 1.1.3. The Board agrees with ALBOP that these sterile practices promote the health and safety of Alabama patients. Indeed, many of the practices promoted in USP 797 accord with existing medical standards, including limitations on the use of bulk vials, garbing and cleanliness, sterilization, and prohibitions on reusing components. There is no evidence before the Board justifying any departure from these standards when a physician is compounding a GLP-1 product. In fact, the

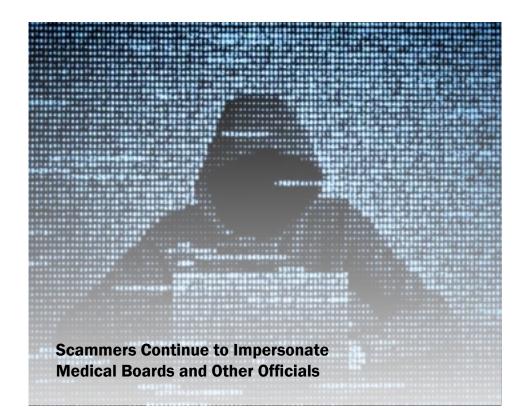
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evidence before the Board overwhelmingly favors adherence to the USP 797 standards. Consequently, it is the opinion of the Board that Alabama-licensed physicians are required to comply with USP standards when compounding GLP-1 products.

Finally, it is the opinion of the Board that physicians must use prescription quality ingredients when compounding and dispensing a drug to their patients. Patient health and wellness is best served when a physician uses quality ingredients intended for human use. In light of recent warnings by the United States Food and Drug Administration ("FDA"), the publication of adverse event data, the warnings of relevant drug manufacturers, and other state boards, it appears to the Board that a physician's patients are put at unjustifiable risk by non-prescription grade GLP-1 products. Therefore, physicians are not permitted to compound or dispense a drug using nonprescription quality ingredients.

This ruling is based upon the precise facts presented and upon statutes and rules currently in existence. The Board specially notes that this decision accords with the actions of other medical boards as well as the FDA. Should any relevant statutes or rules be amended or repealed, this ruling may no longer be valid.

Please see <u>https://www.</u> <u>albme.gov/uploads/</u> <u>pdfs/BOPSemaglutide.</u> <u>DeclaratoryRuling_.pdf</u> for complete ruling with exhibits.



Scammers continue to mail, email, fax, and call physicians, claiming to be medical board investigators, FBI, DEA, even US Customs and Border Protection, and telling licensees they are under investigation or having some other issue with their agency. Sometimes they will tell you a fine is due or that you must wire money from an express delivery store. They will say your license is in jeopardy unless you take a certain action. They can easily "spoof" legitimate telephone IDs and names of agents.

Do not give these individuals any information and hang up immediately. If you do provide information, especially credit card or bank information, you should contact local law enforcement or the Attorney General and your credit card company/bank.

Be aware that Alabama Board of Medical Examiners investigators do not notify physicians of investigations by any means other than in person except in rare cases. When we receive a valid complaint, it is most often personally served on the physician, and the physician signs an acknowledgment of investigation while in the presence of the investigator. If you receive a contact purporting to be from the Board that seems suspicious, you can ask for their direct line and say you would like to call them back. Chances are they will hang up or provide a number that does not go to our agency.

If you are a doctor who has been scammed out of money by someone posing as a government agent, here are the steps you should take:

1. Cease All Contact:

Immediately stop all communication with the scammer. Do not respond to any further calls, messages, or emails from them.

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2. Notify Financial Institutions:

Contact your bank and other financial institutions to inform them of the scam. Safeguard your accounts by changing passwords and monitoring for any suspicious activity.

3. File a Police Report:

Report the incident to your local law enforcement agency. Provide them with all details of the scam, including any communication records and transaction details.

4. Report to the FBI:

File a complaint with the FBI's Internet Crime Complaint Center (IC3) at www.ic3. gov. This helps the FBI track and investigate such scams.

5. Preserve Evidence:

Keep all records related to the scam, including emails, text messages, phone call logs, and any financial transaction information. This evidence will be crucial for any investigation.

6. Educate Yourself and Others:

Learn about common scam tactics to protect yourself in the future. Share your experience with colleagues and friends to raise awareness and prevent others from falling victim to similar scams.

Legitimate law enforcement or government officials will never contact individuals by phone to demand payment or request sensitive information. Any legitimate investigation or legal action will be conducted in person or through official correspondence.



Online Collaborative and Supervisory Practices CME Now Available

The Board has launched a new Continuing Medical Education (CME) Learning Management System offering on-demand online courses designed to support the ongoing professional development of medical practitioners in Alabama.

Our first courses, "Understanding Collaborative Practice in Alabama," and "Supervisory Practice in Alabama," offer comprehensive insights and guidance tailored to the unique aspects of medical practices in Alabama.

COURSE HIGHLIGHTS

Understanding Collaborative Practice in Alabama:

This course explores the details of collaborative practice agreements, ensuring that collaborating physicians are well-versed in the legal and practical aspects of working in collaboration with CRNPs and CNMs.

Supervisory Practice in Alabama:

Focused on the responsibilities and best practices for supervising physicians and PAs, this course is essential for those in supervisory agreements in Alabama, or those aspiring to be.

These courses meet the Alabama Board of Medical Examiners' requirement that all physicians and PAs, effective January 1, 2025, have obtained continuing medical education prescribed by the Board of Medical Examiners regarding the rules and statutes governing collaborative and supervisory practice in Alabama, not more than sixty (60) months prior to January 1, 2025, or within twelve (12) months of commencement of the collaborative or supervisory practice.

For physicians, these courses also meet the Board of Medical Examiners' requirement of obtaining continuing medical education prescribed by the Board of Medical Examiners every forty-eight (48) months following commencement of a collaborative or supervisory practice.

To explore these courses and enroll, please see our <u>Online</u> <u>Courses</u> webpage. We look forward to supporting your continued education and professional development through this new program.

For any questions or additional information, please contact our office via email at <u>learning@</u> <u>albme.gov</u> or call our office at (334) 242-4116.



APPLICATIONS NOW BEING ACCEPTED FOR BRIDGE YEAR GRADUATE PHYSICIAN PERMIT

OVERVIEW

- The Physician Workforce Act of 2023 established a mechanism for limited, supervised practice by graduates of accredited medical schools who applied to, but were not accepted into, a residency training program for the first year following medical school graduation ("bridge year graduate physicians"). International Medical School graduates do not meet the qualification requirements of a bridge year graduate physician permit at this time.
- <u>Bridge Year Graduate Physician Permit Administrative Rules</u> set forth the requirements for the bridge year graduate physician permit.
- This permit does not confer any future right to a license to practice medicine in Alabama.

QUALIFICATIONS FOR A BRIDGE YEAR GRADUATE PHYSICIAN PERMIT

- Graduation from a medical school accredited by the Liaison Committee on Medical Education or the Commission on Osteopathic College Accreditation.
- Achieved a passing score on one of these licensing examinations:
 - o Steps 1 and 2 of the United States Medical Licensing Examination (USMLE),
 - o Comprehensive Osteopathic Medical Licensing Examination (COMLEX), or
 - o Licentiate of the Medical Council of Canada Examination (LMCCE).
- Applied to, but was not accepted into a postgraduate or residency training program accredited by the Accreditation Council for Graduate Medical Education (ACGME), American Osteopathic Association (AOA), Accreditation Committee of the Royal College of Physicians and Surgeons of Canada (ACRCPSC), or the College of Family Physicians of Canada (CFPC) for the first year following medical school graduation.
- The Board, in its discretion, may waive the one-year requirement for applicants who are otherwise eligible and meet all other requirements and are no more than two years post medical school graduation. *The waiver request must be submitted with the application.*

QUALIFICATIONS OF THE SUPERVISING PHYSICIAN

- Possess a current, unrestricted license to practice medicine in Alabama; and
- Have satisfied one of the following:
 - o Practiced medicine for at least three years, excluding any practice in a postgraduate training program, or
 - o Practiced medicine for at least one year and is certified by one or more of the specialty boards recognized by the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA), or
 - Practiced medicine for at least one year and the bridge year graduate physician's practice site is limited solely to a general acute care, critical access, or specialized hospital licensed as such by the Alabama Department of Public Health.
- The Board, in its discretion, may waive these practice requirements.
- The Board may decline to consider an application where the physician is under investigation by the Board. For more information including application instructions, forms and required documents, functions and activities of bridge year graduate physicians, requirements for supervised practice, limitations upon utilization of bridge year graduate physicians, prescriptions and medication orders, covering physicians for bridge year physicians, and the mandatory report by the supervising physician, please see our <u>Bridge Year Graduate Physician Permit web page.</u>

REPORT OF PUBLIC ACTIONS OF THE MEDICAL LICENSURE COMMISSION AND BOARD OF MEDICAL EXAMINERS



July 2024

• Jul. 1 - John T. Belk, MD (MD.46162), Gulf Breeze FL - license is temporarily suspended pending a hearing before the Commission.

• Jul. 2 - Mark P. Koch, DO (DO.322), Monroeville - license is reinstated to full, unrestricted status.

• Jul. 2 - Jacob K. Mathai, MD (MD.47071), Montgomery - license is reinstated to full, unrestricted status.

• Jul. 17 - David J. Halvorson, MD (MD.20146), Birmingham - license

is temporarily suspended pending a hearing before the Commission.

• Jul. 26 - Aaron A. H. Ramirez, MD (MD.42155), Grove Hill - license is revoked.

August 2024

- Aug. 1 Ran Halleluyan, MD (MD.45089), Mobile license is reinstated to full, unrestricted status.
- Aug. 2 Eva Rubin, MD (MD.4559), Vestavia - license is reprimanded, a fine is assessed, and CME required.
- Aug. 15 John T. Belk, MD (MD.46162), Gulf Breeze FL - license is voluntarily

surrendered.

• Aug. 15 - David M. Young, MD (MD.41561), Fredericksburg TX - license is voluntarily surrendered.

September 2024

• Sep. 3 - Oluseun O. Ajayi, MD (no license), Atlanta GA - initial application for certificate of qualification for a license to practice medicine denied.

• Sep. 4 - Janaki Ram Prasad Earla, MD (MD.31343), Trussville - the license is voluntarily surrendered.

• Sep. 6 - Anand P. Lalaji, MD (MD.27242) Atlanta GA - license temporarily suspended pending a hearing.



Alabama State Board of Medical Examiners Alabama Medical Licensure Commission

P.O. Box 946 Montgomery, AL 36101-0946 www.albme.gov

Upcoming BME Meeting Dates

Oct 17 • Nov 14 • Dec 12

The public portion of each meeting is scheduled for 10 a.m. CT (unless otherwise indicated) in the Dixon-Parker Building at 848 Washington Avenue in Montgomery, AL.

Meeting agendas and a full list of meeting dates and times can be found online at <u>www.albme.gov</u>.

Upcoming MLC Meeting Dates

Oct 22 • Nov 25 • Dec 18

Meetings are held in the Dixon-Parker Building at 848 Washington Avenue in Montgomery, AL unless otherwise indicated.

Have questions or need assistance?

Alabama Board of Medical Examiners

Executive Director Human Resources Accounting Board Operations Legal/Public Information Credentialing/ACSCs Investigations Physician Monitoring Advanced Practice Providers

Medical Licensure Commission

Commission Operations Reinstatements/Renewals/Verifications

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