Part 2605: Medical, Osteopathic and Podiatric Physicians

Part 2605 Chapter 01: Licensure Requirements for the Practice of Allopathic and Osteopathic Physicians

Rule 1.1 Licensure by Credentials. The Board endorses licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Part 2605, Rule 1.2, all applicants for medical licensure who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June 1994, the Board shall endorse licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.

Those doctors of osteopathic medicine who graduated prior to June 1, 1973, will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect must be submitted to this Board from that licensing board.

The Board may endorse Diplomates of the NBME; the NBOME (COMLEX), if examination completed on or after February 13, 1973, or licentiates of the Medical Council of Canada.

The Board may consider licensure to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he or she is certified by a board recognized by the ABMS.

In addition to the above requirements for licensure by credentials, an individual shall meet the following requirements:

A. Applicant must be twenty-one (21) years of age and of good moral character.

B. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:

1. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited at the time of graduation by the LCME, a Joint Committee of the Association of American Medical Colleges (AAMC) and the AMA or the College of Osteopathic Medicine which must be accredited by the AOA.

2. If the degree is from a Canadian medical school, the school must be accredited at the time of graduation by the LCME and by the Committee on Accreditation for Canadian Medical Schools.
3. If the degree is from a foreign medical school, an applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program and be currently board certified by a specialty board recognized by the ABMS. The Board will accept for licensure only those individuals completing Fifth Pathway Programs by December 31, 2009. Credentialing via Fifth Pathway Programs will be considered on an individual basis.
4. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.

C. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the ACGME or by the AOA; or training in Canada accredited by the RCPS.

D. If a graduate from a foreign medical school, applicant must present documentation of having completed either:

1. three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the RCPS; or
2. one (1) year of ACGME-approved postgraduate training in the United States or training in Canada approved by the RCPS, be currently board certified by a specialty board recognized by the ABMS and must have approval by the Board.

E. An applicant who otherwise possesses all of the qualifications for licensure by credentials, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the SPEX or COMVEX*, unless the applicant:

1. Submits satisfactory proof of current certification by an ABMS and participating in Maintenance of Certification (MOC) or AOA approved specialty board and participating in Osteopathic Continuous Certification (OCC); or

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* SPEX (SPECIAL PURPOSE EXAMINATION) is a cognitive examination assisting licensing jurisdictions in their assessment of current competence requisite for general, undifferentiated medical practice by physicians who hold or have held a valid license in a U.S. jurisdiction. SPEX is made available through the Federation of State Medical Boards.

COMVEX-USA (COMPREHENSIVE OSTEOPATHIC MEDICAL VARIABLE EXAMINATION) is the evaluative instrument offered to osteopathic physicians who need to demonstrate current osteopathic medical knowledge. COMVEX-USA is made available through the National Board of Osteopathic Medical Examiners.

2. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of an ACGME or AOA approved training program. In such case, a license shall remain in effect so long as licensee is a member of the faculty of the ACGME or AOA approved training program.

F. Submit certified copy of birth certificate or valid passport.

G. Complete an application for medical license and submit it to the Board in a manner prescribed by the Board with a recent passport type photograph.

H. Submit fee prescribed by the Board.

I. Appear for a personal interview in the office of the Board, successfully pass the Jurisprudence Examination as administered by the Board, and submit for a criminal background check.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 1.2 Waiver. Notwithstanding the above requirements for Licensure by Credentials in Rule 1.1, the Board may, upon written request by the physician and after review of all relevant factors, choose to waive any or all of the existing requirements for licensure. To be considered for a waiver, the physician must:

A. be a graduate of an approved medical school;
B. have a current unrestricted license in another state; and
C. have at least 3 years of clinical experience in the area of expertise.

In determining whether to grant the waiver, factors to be considered by the Board shall include, but not be limited to:

A. the medical school from which the physician graduated and its reputation;
B. post-graduate medical education training;
C. appointment to a clinical academic position at a licensed medical school in the United States;
D. publication in peer-reviewed clinical medical journals recognized by the Board;
E. the number of years in clinical practice;
F. specialty, if the physician plans to practice in Mississippi; and
G. other criteria demonstrating expertise, such as awards or other recognition.

Requests for waivers must be submitted in writing to the Executive Director of the Board, who will then review each request with a committee appointed by the president of the Board, taking into account the above factors. The committee shall consist of the Executive Director, a staff employee of the Board, and two voting members of the Board. Recommendations from the committee shall be presented to the Board for approval.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 1.3 Licensure Examinations. The Board recognizes four (4) separate and distinct examinations, to-wit: The examinations administered by the NBME, NBOME (COMLEX), FLEX and USMLE. The Board adopted the FLEX as a method of licensure by examination on March 8, 1973. Prior to this date, the Board administered a written examination and endorsed licenses to practice medicine or osteopathic medicine obtained in most states by written examination. A separate discussion of each examination and this Board's requirements for the purpose of licensure is as follows:

A. FLEX

1. The Board adopted the FLEX as the method of licensure by examination on March 8, 1973. The last regular administration of the FLEX was December 1993. The Board will recognize FLEX as a valid medical licensing examination subject to all requirements heretofore and hereinafter set forth.
2. Prior to January 24, 1985, the FLEX examination was divided into three components:

   Day I--Basic Science

   Day II--Clinical Science

   Day III--Clinical Competence

   In order to pass this examination, each applicant must have obtained a FLEX weighted average of 75 with Day I given a value of 1/6 of the entire examination, Day II given a value of 2/6, and Day III given a value of 3/6. The Board may make an exemption to the weighted average of 75 if the applicant has completed an approved residency program and is currently certified by a specialty board recognized by the ABMS or the AOA.

   After January 24, 1985, the Board approved administration of a new FLEX examination with a different design from that administered since 1973. This examination was a three-day examination, and was comprised of two components. Component I consisted of one and one-half (1½) days and judged the readiness of a physician to practice medicine in a supervised setting. Component II consisted of one and one-half (1½) days and judged the readiness of a physician to practice independently. A score of 75 is considered a passing grade for each component.

3. An applicant had seven (7) years in which to pass both components of the FLEX.

B. USMLE

1. The USMLE is a three-step examination for medical licensure in the United States and is sponsored by the FSMB and NBME. The Board adopted the USMLE as an additional method of licensure by examination on September 16, 1993. The USMLE replaced FLEX and the NBME certification examinations during a phase-in period from 1992 to 1994. Unlike the three-day (two-component) FLEX, USMLE is a three-step examination that consists of three two-day examinations,

Step 1, Step 2, and Step 3. Each step is complementary to the other; no step can stand alone in the assessment of readiness for medical licensure. The clinical skills examination is a separately administered component of Step 2 and is referred to as Step 2 Clinical Skills, or Step 2 CS. Unlike the FLEX, which was taken upon or after graduation from medical school most applicants will take Step 1 and 2 of the USMLE during their medical school years. Step 3 will be taken after graduation.

2. USMLE Steps 1, 2 and 3 must be passed within a seven-year time period beginning when the examinee passes his or her first Step. The Board, at its discretion, may waive this requirement based on extraordinary circumstances. The Board encourages all applicants to take Step 3 of the USMLE as soon as possible following receipt of the M.D. or D.O. degree.

C. NBME or NBOME

The Board recognizes diplomates of the NBME and on or after February 13, 1973, diplomates of the NBOME (COMLEX). Both examinations are administered in three (3) parts, Parts I, II and III and must be passed within a seven-year time period beginning when the examinee passes his or her first part.

D. EXAM COMBINATIONS

Now that the FLEX and examinations administered by the NBME have been phased out, the Board will accept passing scores for the following combinations of the FLEX, NBME and USMLE examinations:

EXAMINATION SEQUENCE	ACCEPTABLE COMBINATIONS
NBME Part I *plus* NBME Part II *plus* NBME Part III	NBME Part I or USMLE Step 1 *plus* NBME Part II or USMLE Step 2 *plus* NBME Part III or USMLE Step 3
FLEX Component I *plus* FLEX Component II	FLEX Component I *plus* USMLE Step 3 *or* NBME Part I or USMLE Step 1 *plus* NBME Part II or USMLE Step 2 *plus* FLEX Component II

USMLE Step 1 *plus* USMLE Step 2 *plus* USMLE Step 3	

Amended September 13, 1997. Amended January 18, 2001. Amended February 18, 2003. Amended March 8, 2007. Amended May 17, 2007. Amended January 24, 2008. Amended July 1, 2009. Amended October 13, 2009. Amended March 19, 2015. Amended April 28, 2015.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Part 2605 Chapter 2: Licensure Requirements for the Practice of Podiatrists

Rule 2.1 Licensure by Credentials. If the original license of an applicant was obtained by state board examination, the applicant must have the state board where original license was obtained by written examination submit a certified copy of the examination directly to the Board.

The Board may grant licenses to Diplomates of the NBPME. If a Diplomate of the NBPME, the applicant must have certification of endorsement from that Board submitted directly to the Board. Applicants graduating podiatry school on or after January 1, 2010, must take and pass all three (3) parts of the APMLE.

In addition to the above, an individual shall meet the following requirements:

A. Applicant must be twenty-one (21) years of age, and of good moral character.

B. Applicant must have had at least four (4) years high school and be graduate of same; he or she shall have at least one (1) year pre-podiatry college education.

C. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.

1. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
2. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be accredited by the CPME at the time of graduation.

D. Present proof of completion of one (1) year of APMA-approved postgraduate training in the U.S. or Canada. If the podiatrist graduated from an accredited college of podiatric medicine prior to 1990, has continuously practiced for the past ten (10) years and has held unrestricted license(s) to practice podiatry, the one (1) year of APMA-approved postgraduate training may be waived at the Board's discretion.

E. Submit certified copy of birth certificate or valid passport.

F. Complete an application for podiatry license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.

G. Submit fee prescribed by the Board.

H. Appear for a personal interview in the office of the Board, submit for a criminal background check and successfully pass the Jurisprudence Examination as administered by the Board.

Amended March 8, 2007. Amended May 17, 2007. Amended January 24, 2008. Amended November 20, 2008. Amended November 13, 2015.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Part 2605 Chapter 3: Temporary Licensure

Rule 3.1 Temporary Licensure.

A. Mississippi temporary medical or podiatric licenses may be issued to applicants for licensure in Mississippi under the following conditions:

1. A restricted temporary medical or podiatric license may be issued upon proper completion of an application to an applicant who otherwise meets all requirements for licensure except successful completion:
   a. of the postgraduate training requirements provided in Part 2605, Chapter 1, Rule 1.1 or Chapter 2, Rule 2.1; and/or
   b. of Step 3 of USMLE, Level 3 of COMLEX, or Part 3 of the APMLE.

   Such restricted temporary license shall entitle the physician to practice medicine or podiatric medicine only within the confines of an ACGME, AOA or APMA approved postgraduate training program in this state and may be renewed annually for the duration of the postgraduate training for a period not to exceed five (5) years.
2. An unrestricted temporary medical license may be issued in an exceptional case to an applicant seeking licensure by credentials. Such an unrestricted temporary license shall remain valid only for a period of time sufficient for applicant to submit required documents and credentials to complete an application for permanent licensure, but in no instance to exceed 30 days.

B. The Board may issue a temporary license to practice medicine for a period not to exceed 90 days at a youth camp licensed by the State Department of Health to any nonresident physician who is not licensed to practice medicine in this state or to any resident physician who is retired from the active practice of medicine in this state while serving as a volunteer at such camp.

1. Nonresident Physician
   i. must have favorable references from two physicians with whom the applicant has worked or trained within the last year;
   ii. must have written certification from the medical licensing authority in the state in which he or she holds a currently valid license to practice medicine; and
   iii. must submit fee prescribed by the Board.
2. Retired Resident Physician
   i. must be in good standing with the Board, and
   ii. must submit fee as prescribed by the Board.

C. The Board may issue a temporary license to practice medicine to physicians who have been admitted for treatment in a drug and/or alcohol treatment program approved by the Board, or who are enrolled in the fellowship of addictionology in the Mississippi

State Medical Association Professionals Health Program; provided that, a nonresident applicant shall hold a valid (unrestricted) license to practice medicine in another state and the medical licensing authority of that state shall certify to the Board in writing that such license is in good standing.

1. A temporary license issued under this rule shall be valid for a period of ninety (90) days but may be renewed every ninety (90) days for the duration of the fellowship or treatment program. If the applicant discontinues treatment or leaves the fellowship program, the temporary license shall automatically become null and void. The Board may rescind or extend this temporary license for cause.
2. A temporary license issued to a physician under this rule shall be limited to the out-patient phase of the treatment program or the time necessary to complete the fellowship of addictionology. The physician to whom the license is issued may administer treatment and care within the scope of the drug and/or alcohol treatment program or fellowship in an institutional setting and shall not otherwise practice in this state. A physician licensed under this rule shall not apply to the U.S. Drug Enforcement Administration for a controlled substances registration certificate and must be under the supervision of another physician holding a valid and unrestricted license in this state.
3. A physician who has had his or her permanent license to practice in this state revoked or suspended by the Board due to habitual personal use of intoxicating liquors or narcotic drugs, or any other drug having addiction-forming or addiction-sustaining liability, may be granted a temporary license pursuant to this rule provided the temporary license is not in conflict with the prior disciplinary order of the Board rendered against the physician.
4. The applicant applying for a ninety (90) day temporary license to practice while in treatment in an approved drug and/or alcohol treatment program or while enrolled in the fellowship of addictionology shall pay a fee prescribed by the Board (not to exceed $50.00) to the Board. No additional fee shall be charged for an extension.

Mississippi temporary medical licenses are issued under the condition that the licensee shall not apply to the U.S. Drug Enforcement Administration for a Controlled Substances Registration Certificate.

Amended November 13, 2015.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

Rule 3.2 Limited Institutional Licensure.

A. Pursuant to Section 73-25-23, Mississippi Code, a limited institutional license is available only to graduates of foreign medical schools who are employed or are being considered for employment to practice medicine in one or more Mississippi state-supported institutions located in the same county.
B. It is understood that graduates of foreign medical schools holding a limited institutional license, and who are employed by and enrolled in an approved ACGME or AOA postgraduate training program at the University of Mississippi Medical Center, shall be

authorized to participate in any postgraduate educational program at the University of Mississippi Medical Center, or any of its affiliated training program sites.

C. An application for limited institutional licensure may be accepted by the Board only upon the written request of the state-supported institution which has employed or is considering employing a graduate of a foreign medical school to practice medicine.

D. A limited institutional license may be issued for a period of one (1) year for practice in a particular institution after a review and favorable recommendations by a majority of the following:
   1. President or Secretary, Board of Trustees of Institution
   2. Director of Institution
   3. President or Secretary, Local Chartered Medical Society in area in which institution is located
   4. Member, Board of Trustees, Mississippi State Medical Association in area in which institution is located
   5. Member, Mississippi State Board of Medical Licensure from district in which institution is located
   6. Executive Officer, Mississippi State Board of Medical Licensure

E. In addition to the above requirements for a limited institutional license, an applicant shall meet the following requirements:
   1. Must be at least twenty-one (21) years of age and of good moral character.
   2. Must submit copy of diploma and certification of completion from a reputable medical college or reputable college of osteopathic medicine.
   3. Must submit certified copy of valid certificate from the ECFMG or its successor.
   4. Must submit an application completed in every detail with recent passport type photograph.
   5. Must submit fee prescribed by the Board.
   6. Must appear for a personal interview in the office of the Board, submit for a criminal background check and successfully pass the Jurisprudence Examination as administered by the Board.

F. Pursuant to Section 73-25-23, Mississippi Code, a limited institutional license must be renewed annually, after such review as the Board considers necessary. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on and after July 1, 1983, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years.

G. Since a limited institutional license is issued to a graduate of a foreign medical school for employment to practice medicine in a particular Mississippi state-supported institution, or institutions located in the same county, such limited institutional license

shall become void immediately upon termination of employment of the licensee at the institution, or institutions, at which practice is authorized under the license.

H. An annual renewal fee shall be prescribed by the Board.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 3.3 Temporary Training License for Out-of-State Residents. An individual enrolled in an out-of-state postgraduate training program wishing to rotate through an ACGME or AOA approved training program within Mississippi, shall not be required to obtain a restricted temporary license provided the rotation lasts no longer than four (4) weeks. However, the individual must submit the following to the Board:

A. A completed information form which has been supplied by the Board.
B. A letter from the physician's postgraduate training program stating that he or she is going to be participating in a rotation in Mississippi and the duration.
C. A letter from the training program in Mississippi stating the physician will be training with them and the duration.
D. Verification of a current license (limited or training), permit, or letter from the state in which the individual is enrolled in a training program.
E. A licensure fee in the amount of $50.

The individual may not participate in the Mississippi training program until a valid training license has been issued. The license will be effective the date the individual is to begin the Mississippi rotation and will become null and void the day the individual completes the rotation.

If during the duration of the training, it is determined that the physician may stay longer than four (4) weeks, the temporary training license may be renewed for an additional four (4) weeks. Under no circumstances will the license be renewed after eight (8) weeks. An individual anticipating on rotating through a Mississippi training program for a period longer than eight (8) weeks shall be required to obtain a Restricted Temporary Medical License.

The Board reserves the right to deny issuance of a temporary training license as provided herein based on any of the statutory grounds as enumerated in Mississippi Code, Sections 73-25-29 and 73-25-83.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 3.4 Short-Term Training for Out-of-State Physicians. The Board is aware that there are Mississippi physicians assisting out-of-state physicians in expanding professional knowledge and expertise by offering short-term training to the out-of-state physician. The Mississippi physician wishing to offer this training to the unlicensed out-of-state physician(s) must have their short-term training program approved by the Board.

The Mississippi physician must submit a detailed letter stating the purpose of the short-term training program, the objectives of the course, approximately how long the course will last, and any supporting documentation that would assist the Board in determining the approval status of the program.

An individual wishing to attend the Board approved short-term training is not required to obtain a permanent Mississippi medical license; however, the individual must submit the following to the Board:

A. A completed information form which has been supplied by the Board.
B. A letter from the mentor of the Board approved training program stating that the applicant is going to be participating in the short-term training program and the duration.
C. Verification of a current unrestricted permanent license from the state in which the individual is currently practicing.
D. A permit fee in the amount of $25.

The individual may not participate in the short-term training program until a valid training permit has been issued. The permit will be effective the date the individual is to begin the training and will become null and void the day the individual completes the training.

A short-term training permit is typically valid for two to three days; however, it can be issued up to fifteen (15) days. If during the duration of the training, it is determined that the physician may stay longer than fifteen (15) days, the temporary training permit may be renewed for an additional (15) days. Under no circumstances will the permit be renewed after thirty (30) days. An individual anticipating training for a period longer than thirty (30) days will be required to obtain a permanent Mississippi medical license.

Amended November 19, 1998. Amended March 8, 2007. Amended May 17, 2007. Amended July 12, 2007. Amended September 20, 2007.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Part 2605 Chapter 4: Expedited Licensure

Rule 4.1 Military Applicants.

A. Pursuant to MS Code Ann. Section 73-50-1, the Board of Medical Licensure is authorized to issue an expedited license to a military-trained applicant to allow the applicant to lawfully practice medicine in Mississippi. In order to receive the expedited license, the following requirements must be satisfied:
    1. Complete an application for medical license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
    2. Submit documentation that applicant has been awarded a military occupational specialty.

3. Submit documentation of completion of a military program of training.
4. Submit verification of a completed licensing examination as described in Rule 2.3.
5. Have two references submit letters regarding applicant's performance in the practice of medicine.
6. Submit verification that at least two of the past five years preceding the date of submission of the application applicant has engaged in the active practice of medicine.
7. Submit certification that applicant has not committed any act in any jurisdiction that would have constituted grounds for refusal, suspension or revocation of a license to practice medicine in Mississippi at the time the act was committed.
8. Appear for a personal interview in the office of the Board, successfully pass the Jurisprudence Examination as administered by the Board, and submit for a criminal background check.
9. Submit licensure fee prescribed by the Board.

B. Pursuant to MS Code Ann. Section 73-50-1, the Board of Medical Licensure is authorized to issue a license to a military spouse to allow the military spouse to lawfully practice medicine in Mississippi. In order to receive the expedited license, the following requirements must be satisfied:
1. Complete an application for medical license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
2. Submit certification of a current license from another jurisdiction, in which that jurisdiction's requirements for licensure are substantially equivalent to or exceed the requirements for licensure of the Board.
3. Submit verification that at least two of the past five years preceding the date of submission of the application applicant has engaged in the active practice of medicine.
4. Submit certification that applicant has not committed any act in any jurisdiction that would have constituted grounds for refusal, suspension or revocation of a license to practice medicine in Mississippi at the time the act was committed.
5. Submit verification that applicant is in good standing and has not been disciplined by the agency that had jurisdiction to issue the license.
6. Submit licensure fee prescribed by the Board.
7. Appear for a personal interview in the office of the Board, successfully pass the Jurisprudence Examination as administered by the Board, and submit for a criminal background check.

C. All relevant experience of a military service member in the discharge of official duties or, for a military spouse, all relevant experience, including full-time and part-time experience, regardless of whether in a paid or volunteer capacity, shall be credited in the calculation of years of practice in the practice of medicine as required under subsection A or B of this section.

D. A nonresident licensed under this section shall be entitled to the same rights and subject to the same obligations as required of a resident licensed by the Board.

E. The Board may issue a temporary practice permit to a military-trained applicant or military spouse licensed in another jurisdiction while the military-trained applicant or military spouse is satisfying the requirements for licensure under subsection A or B of this section if that jurisdiction has licensure standards substantially equivalent to the

standards for licensure of the Board. The military-trained applicant or military spouse may practice under the temporary permit until a license is granted or until a notice to deny a license is issued in accordance with rules adopted by the Board.

Source: Miss. Code Ann. §73-25-19 (1972, as amended).

Adopted July 10, 2014.

Part 2605 Chapter 5: The Practice by Unlicensed Nonresident Physicians

Rule 5.1 Scope. This regulation shall apply to all individuals who practice or who seek to practice medicine or osteopathic medicine in the state of Mississippi pursuant to authority granted in Mississippi Code, Section 73-25-19.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 5.2 Purpose. Pursuant to Mississippi Code, Section 73-25-19, non-resident physicians, not holding a license in the state of Mississippi, shall not be authorized to practice medicine in this state under any circumstances after remaining in the state for five (5) days, except when called in consultation by a licensed physician residing in this state. To implement its responsibility to protect the public, the Mississippi State Board of Medical Licensure shall monitor those non-resident physicians entering into this state to practice medicine pursuant to Section 73-25-19.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 5.3 Notification to Board Required. Regardless of the number of days of anticipated practice, a non-resident physician not holding a license in the state of Mississippi shall not be authorized to practice medicine in this state under any circumstances, unless the following conditions have been satisfied:

The currently licensed Mississippi physician who needs consultation or assistance must notify the Board in writing of his or her request to have a non-resident physician practice in this state, setting forth (i) the identity of the non-resident unlicensed physician, (ii) a statement as to the purpose for the assistance/consultation, (iii) the location and address of the anticipated practice, and (iv) anticipated duration of practice.

Except in cases of emergencies, the above notification must be submitted to the Board at least seven (7) working days prior to the non-resident unlicensed physician entering into the state.

The non-resident unlicensed physician shall submit to the Board written proof of licensure status in good standing from another state or jurisdiction.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 5.4 Intent. It is the intent and purpose of this regulation to encourage Mississippi licensed physicians to utilize the services of competent and well trained non-resident unlicensed

physicians on an as needed basis. However, where it is anticipated that the services of the non-resident physicians will be utilized on a routine basis, that is, where the non-resident physicians services will be utilized more than twice during any one year period of time, permanent licensure shall be required.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 5.5 Exclusion. This regulation shall not apply to any non-resident physician who holds a temporary license to practice medicine at a youth camp issued under the provisions of Mississippi Code, Sections 75-74-8 and 73-25-17.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 5.6 Effective Date of Regulation. The above rules pertaining to the practice by unlicensed nonresident physicians shall become effective August 22, 2002.

Amended October 19, 2002.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Part 2605 Chapter 6: Administrative Medical License

Rule 6.1 Definitions. *For the purpose of Part 2605 Chapter 6, the following terms have the meanings indicated:*

A. *"Administrative Medical License" means* a license to engage in professional, managerial, or administrative activities related to the practice of medicine or to the delivery of health care services, but does not include nor permit the practice of clinical medicine or the right to engage in medical research including clinical trials on humans.
B. *"Clinical Medicine" means medical practice that includes but is not limited to:*
    1. *Direct involvement in patient evaluation, diagnosis, or treatment;*
    2. *Prescribing of any medication;*
    3. *Delegating medical acts or prescribing authority; or*
    4. *Supervision of physicians, physician's assistants, or advanced practice registered nurses in the practice of clinical medicine.*

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Rule 6.2 **Administrative Medical License.** The Board may issue an administrative medical license to a physician who meets all qualifications for full licensure in the state, including payment of a fee set by the Board but who does not intend to provide medical or clinical services to or for patients while in possession of an administrative medical license and signs a notarized statement to that effect. An administrative medical license is subject to annual renewal.

In addition to the restrictions as noted in Rule 6.1 above, any person holding an administrative medical license shall be subject to all other provisions of the Medical Practice Law, Sections 73-25-1, et. seq., and the Administrative Code of the Board, where deemed applicable.

Source: *Miss. Code Ann. §73-43-11 (1972, as amended).*

Adopted March 19, 2015; amended May 26, 2015.