

§ 90-12.03. Internationally-trained physician employee license.

(a) The Board may issue an "internationally-trained physician employee license" to practice medicine and surgery to a physician when the Board has received satisfactory verification of all of the following requirements:

- (1) The applicant has been offered employment as a physician in a full-time capacity at (i) a hospital that is located in North Carolina and licensed by the State of North Carolina or (ii) a medical practice located in a rural county with a population of less than 500 people per square mile, in North Carolina, where a physician fully licensed by the State under this Chapter is physically practicing on-site at the rural medical practice.
- (2) The applicant has a current and active license in good standing to practice medicine in a foreign country or had that type of license expire no more than five years prior to submission of an application to the Board.
- (3) The applicant previously completed 130 weeks of medical education at a medical school listed in the World Dictionary of Medical Schools and is eligible to be certified by the Educational Commission for Foreign Medical Graduates and meets one of the following requirements:
 - a. The applicant has completed two years of postgraduate training in a graduate medical education program approved by the applicant's country of licensure.
 - b. The applicant has actively practiced medicine in the applicant's country of licensure for at least 10 years after graduation.
- (4) The applicant has demonstrated competency to practice medicine in one of the following ways:
 - a. Successfully passing each part of an examination listed in G.S. 90-10.1.
 - b. Successfully passing each part of a nationally recognized standard medical licensing examination from a country that is a member of the International Association of Medical Regulatory Authorities that meets all of the following requirements:
 1. Tests for the ability to practice medicine.
 2. Tests for medical knowledge, skills, and understanding of clinical science essential for providing patient care, including general practice, cardiology, internal medicine, gastroenterology, hematology, nephrology, neurology, pediatrics, psychiatry, pulmonology, obstetrics and gynecology, radiology, rheumatology, urology, and surgery.
 3. Tests for communication and interpersonal skills.
 4. Includes an interactive testing component.The examining body must provide verification in English directly to the Board that the applicant has passed an examination meeting the requirements of this sub-subdivision.
 - c. Receiving specialty board certification as approved by any of the following:
 1. The American Board of Medical Specialties.
 2. The Bureau of Osteopathic Specialists of the American Osteopathic Association.
 3. The Royal College of Physicians and Surgeons of Canada.
 4. Any other specialty board recognized pursuant to rules adopted by the Board.

d. Submitting to a comprehensive assessment demonstrating clinical competence by a program approved by the Board.

Alternatively, the Board may waive the requirements of this subdivision and issue a temporary license and require the applicant to successfully pass the Special Purpose Examination (SPEX) or Post-Licensure Assessment Systems within one year.

- (5) The applicant has not had a license revoked, suspended, restricted, denied, or otherwise acted against in any jurisdiction and is the subject of no pending investigations. For purposes of this subdivision, the licensing authority's acceptance of a license to practice voluntarily relinquished by a licensee or relinquished by stipulation, consent order, or other settlement in response to or in anticipation of the filing of administrative charges against the licensee's license, or an inactivation or voluntary surrender of a license while under investigation, is deemed to be an action against a license to practice.
- (6) The applicant does not have any convictions in any court involving moral turpitude, or the violation of a law involving the practice of medicine, or a conviction of a law substantially equivalent to a felony. The applicant shall submit to, and the Board must receive, a background screening from the country in which they are licensed.
- (7) The applicant has practiced medicine for at least five years.
- (8) The applicant is proficient in English.
- (9) The applicant is legally authorized to work in the United States. An applicant may apply for an internationally-trained physician employee license before receiving federal work authorization but may not begin employment with the North Carolina hospital or rural medical practice until receiving legal work authorization from the relevant federal agency.
- (10) The applicant submits an application fee pursuant to G.S. 90-13.1(a).

(b) The holder of the internationally-trained physician employee license issued under this section shall not practice medicine or surgery outside the confines of the North Carolina hospital or rural medical practice, or its affiliate, by whose employment the holder was qualified to be issued the license pursuant to subdivision (1) of subsection (a) of this section. A person who violates this subsection shall be guilty of a Class 3 misdemeanor and, upon conviction, shall be fined not more than five hundred dollars (\$500.00) for each offense. The Board, at its discretion, may revoke the special license after due notice is given to the holder of the certified physician employee license.

(c) An internationally-trained physician employee license shall become inactive at the time its holder does one or more of the following:

- (1) Ceases to be employed in a full-time capacity by a North Carolina hospital or medical practice meeting the criteria set forth in subdivision (1) of subsection (a) of this section.
- (2) Ceases to be employed at a medical practice located in a rural county or practices if a physician licensed by the State under this Chapter is not physically practicing on-site at the medical practice.
- (3) Obtains any other license to practice medicine issued by the Board.

The Board shall retain jurisdiction over the holder of the inactive license.

(d) A physician with an internationally-trained physician employee license shall be eligible to apply for a full license to practice medicine in North Carolina after four years of active practice in North Carolina. The Board shall grant a full license if the applicant has no disciplinary actions by any state, federal, or foreign regulatory agency, no pending investigations by any state, federal, or foreign regulatory agency, no misdemeanor convictions in the two years preceding

their application for a full license, no felony convictions, no pending misdemeanor or felony charges, and no adverse actions affecting their privileges or ability to practice. For purposes of this section, "misdemeanor" shall not include traffic violations.

(e) The Board, in consultation with partner organizations as needed, shall collect information necessary to evaluate the implementation and success of the pathway to licensure established in this section, including at least the following:

- (1) The number of applicants for provisional licensure.
- (2) The applicant's licensing country or country where they were authorized to practice medicine and, if different, country of education and training.
- (3) The number of provisional licenses granted under this section.
- (4) The number of provisional licenses denied under this section.
- (5) The number of full and unrestricted licenses granted to applicants who completed the pathway to licensure established in this section.
- (6) The number of full and unrestricted license applications denied to applicants who completed the pathway to licensure established in this section.
- (7) The reasons for denial of applications for provisional and full unrestricted licenses under this section.
- (8) The number of complaints received regarding holders of a provisional license issued under this section and the disciplinary actions taken, if any.
- (9) The practice setting and specialty of applicants in their licensing country or country of origin and as employed during their provisional and limited licensure.
- (10) The geographic area or rural/urban designation of where licensees practice during provisional licensure and after the period of provisional licensure.
- (11) The practice setting and specialty of internationally-trained physicians who completed the pathway to licensure upon receiving a full and unrestricted license.

(f) Annually on or before December 1, the Board shall report the information collected pursuant to subsection (e) of this section for the previous calendar year to the Joint Legislative Oversight Committee on Health and Human Services. (2025-37, s. 2(a).)