

APA-2

**ALABAMA STATE BOARD
OF MEDICAL EXAMINERS**

NOTICE OF INTENDED ACTION

AGENCY NAME: Alabama State Board of Medical Examiners

RULE NO. & TITLE: 540-X- 1 Appendix B, Collaborative Practice Registration Renewal

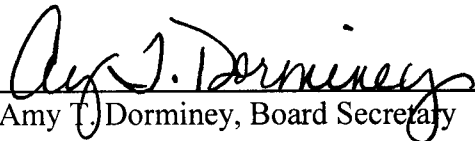
INTENDED ACTION: To repeal the appendix

SUBSTANCE OF PROPOSED ACTION: To repeal the appendix (renewal application being terminated)

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: Carla H. Kruger, Office of the General Counsel, Alabama State Board of Medical Examiners, Post Office Box 946, Montgomery, Alabama 36101-0946, by mail or in person between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday, until and including July 5, 2018. Persons wishing to obtain copies of the text of this rule and submit data, views, or comments or arguments orally should contact Carla H. Kruger, by telephone (334-242-4116) during said period in order to set up an appointment for a hearing respecting such oral data, views, or arguments. Additionally, the intended action is available at the Board's web site, www.albme.org.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE: July 5, 2018

CONTACT PERSON AT AGENCY: Carla H. Kruger



Amy T. Dorminey, Board Secretary

**20XX Collaborative Practice Registration Renewal
Deadline: December 31, 20XX**

Failure to renew this collaborative practice and pay the fee will result in non-approval as a collaborating physician, making it a violation for the physician and CRNP/CNM to practice together effective Jan. 1.

Under Alabama law, this document is a public record and if requested it will be provided in its entirety.

Collaborative Practice Number
Physician's Name
Physician's License Number
CRNP/CNM Name
CRNP/CNM License Number

1. Are your Quality Measures being used specific to this practice?
Yes No
2. Are your Quality Assurance Reviews current and documented?
Yes No
3. Would you like one of the Collaborative Practice Nurse Consultants to contact you for an Educational Meeting for your office?
Yes No

I understand and agree that by typing my name, I am providing an electronic signature that has the same legal effect as a written signature pursuant to Ala. Code §§ 8-1A-2 and 8-1A-7. I attest that the foregoing information has been provided by me and is true and correct to the best of my knowledge, information and belief.

Knowingly providing false information to the Alabama Board of Medical Examiners or Medical Licensure Commission of Alabama could result in disciplinary action.

Author: Alabama State Board of Medical Examiners Statutory Authority: Code of Ala. 1975, §34-24-53, Act 2007-402. History: New Rule: Filed May 21, 2015; effective June 25, 2015. Repealed and New Rule: Filed July 20, 2017; effective September 3, 2017. Repeal approved: May 16, 2018. Repeal filed: May 18, 2018.