

INSTRUCTIONS FOR OSTEOPATHIC (DO) PHYSICIANS &
PHYSICIAN ASSISTANTS for

**Application for Licensure Pursuant to Executive Order 16 FY19/20
Through the Duration of the COVID-19 Public Health Emergency Only**

- The attached application is **solely** for the purpose of work related to the COVID-19 public health emergency;
- If you have been disciplined by a licensing Board within the last 10 (ten) years and that discipline included practice restrictions, limitations, probation or the loss of your license, you **do not** qualify for this license;
- **NOTE:** The practice of fraud, deceit or misrepresentation in obtaining a license constitutes grounds for discipline pursuant to 32 MRS §2591-A(2)(A);
- You must have a valid license, in good standing, in another state which will remain valid for a minimum of 90 days from the issue of this license or, you must have retired within the last 24 months (both DOs and PAs);
- **PA applicants:** Mandatory supervisory or collaborative practice requirements for physician assistants assisting in the health care response to COVID-19 are suspended during the COVID-19 public health emergency;
- **Fees for this application are waived** (all other application fees apply);
- Complete all sections of the application, providing your home mailing address, phone number and personal e-mail address **and** the address and phone number of your principal practice site. Do **NOT** provide addresses, phone numbers or e-mail addresses for any licensing company you may be working with. In keeping with Maine laws, your personal information will not be shared unless you designate it as your public contact address;
- **Fees for this application only are waived** (other application fees apply);
- State license verifications and National Practitioner Data Bank queries will be processed by the Board;
- Please scan (preferably in color) your application **and** a recent photo (again, preferably in color) to: osteopfr@maine.gov. You do not need to have this application or your photo notarized;
- Upon issue, your license will be e-mailed directly to your personal e-address from noreply@maine.gov. If you have not received the license or heard from this Board within 24 hours of submitting your application, please check your spam folder. If you do not find your license there, please e-mail osteopfr@maine.gov to verify that it was received;
- You will be able to print and forward your license as necessary.

The Board's statute and all current rules as well as other statutory/rule information will be e-mailed to you shortly after the issue of your license.

If you will be prescribing scheduled medication you must register with Maine's Prescription Monitoring Program. To do so, please go to: <http://www.maine.gov/dhhs/samhs/osa/data/pmp/prescriber.htm>.

For information regarding the prescribing of opioid medications in Maine, please refer to the Board's Joint Rule, Chapter 21 – Use of Controlled Substances for Treatment of Pain and also to the Maine Office of Substance Abuse and Mental Health Services, Rule Chapter 11 by going to: <http://www.maine.gov/sos/cec/rules/10/chaps10.htm#118>.

Please e-mail questions to: susane.strout@maine.gov or osteopfr@maine.gov.

Maine Board of Osteopathic Licensure

APPLICATION FOR USE BY OSTEOPATHIC (DO) PHYSICIANS & PHYSICIAN ASSISTANTS

FOR LICENSURE THROUGH THE DURATION OF THE COVID-19 EMERGENCY

Personal Data – Please print

Name: _____ Circle: DO or PA Gender: M F Date of Birth: / / ____SSN: _____

Work Address: _____

Personal Address: _____

Business Phone: _____ Home/Cell Phone: _____ DEA: _____ NPI: _____

Medical School/PA Program attended: _____ Year Graduated: _____

Licensure: Do/have you held a license in good standing within the US? Yes ___ No ___ State/s? _____

DOs – Your specialty/specialties? _____ Board Certified? YES ___ NO ___

PAs - Are you certified by the National Commission on Certification of Physician Assistants? YES ___ NO ___

Personal Data: Please circle YES or NO. If you answer 'yes', provide details on a separate sheet. If details are not provided, your application may not be processed. In the past ten (10) years, have you had any of the following occurrences?

1. Been arrested, charged, summonsed, indicted or convicted of any criminal offense (incl. motor vehicle offenses but NOT incl. minor traffic/parking violations)? OUI is NOT considered a minor offense. YES NO
2. Had a finding of sexual misconduct regarding a patient or others (including sexual harassment)? YES NO
3. Had a licensing Board deny an application/take action incl. practice restrictions, probation or revocation? YES NO
4. Been notified of the existence of allegations involving you which are open as of the date of this application? YES NO
5. Been denied registration or licensure or had your ability to prescribe or dispense controlled substances modified, restricted, suspended, voluntarily suspended or revoked by the Drug Enforcement Administration? YES NO
6. Been charged, had your hospital, HMO or other health care entity privileges suspended or revoked? YES NO

I hereby attest that the information supplied in this application is true and accurate. I further understand that any false answers may result in denial, suspension or revocation of my license to practice in Maine. I also hereby authorize hospitals, medical institutions or organizations, personal physicians, employers (both past & present), business & professional associates (past & present) and all governmental agencies and instrumentalities to release, to this Board any information, files or records required for evaluation of my professional and ethical qualifications for licensure in the State of Maine.

I hereby apply for this license for the sole purpose of work related to the COVID-19 public health emergency.

Date: ____/____/____ Applicant Signature: _____

Full Name (typed or handwritten – legibly): _____

Your E-Mail Address (license will be e-mailed directly to you): _____

Please e-mail your application to: osteo.pfr@maine.gov.

PA Applicants: Mandatory supervision or collaborative practice requirements for physician assistants assisting in the health care response to COVID-19 are suspended during the public health emergency