

Physician Assistant Licensure Regulations by State - 2018

National Commission on Certification of Physician Assistants (NCCPA)

Alabama

Alabama Board of Medical Examiners & Medical Licensure Commission
848 Washington Avenue
Montgomery, AL 36104

Phone: (334) 242-4153

Alabama Requirements

545-X-2-.01 Initial License

- Upon the filing of a certificate of qualification issued by the Board of Medical Examiners, along with a properly completed application form, the Commission, after being satisfied that all requirements of the law have been met and that the applicant should be approved for licensure, shall issue the license to practice medicine or osteopathy upon the payment of a \$75.00 fee.
- The license shall be dated and numbered in the order of issuance and shall be signed by the chairman .

Please visit <http://www.alabamaadministrativecode.state.al.us> for more information.

Alaska

Alaska State Medical Board
550 W 7th AVE, STE 1500
Anchorage, AK 99501-3567

Phone: (907) 269-8160

Alaska Requirements

Sec. 08.64.200. Qualifications of physician applicants

Each physician applicant shall:

- submit a certificate of graduation from a legally chartered medical school accredited by the Association of American Medical Colleges and the Council on Medical Education of the American Medical Association;
- submit a certificate from a recognized hospital or hospitals certifying that the applicant has satisfactorily performed the duties of resident physician or intern for a period of
 - one year if the applicant graduated from medical school before January 1, 1995, as evidenced by a certificate of completion of the first year of postgraduate training from the facility where the applicant completed the first year of internship or residency; and
 - two years if the applicant graduated from medical school on or after January 1, 1995, as evidenced by a certificate of completion of the first year of postgraduate training from the facility where the applicant completed the first year of internship or residency and a certificate of successful completion of one additional year of postgraduate training at a recognized hospital
- submit a list of negotiated settlements or judgements in claims or civil actions alleging medical malpractice against the applicant, including an explanation of the basis for each claim or action; and
- not have a license to practice medicine in another state, country, province, or territory that is currently suspended or revoked for disciplinary reasons.
 - The board shall determine whether each physician applicant has any disciplinary or other actions recorded in the nationwide disciplinary data bank of the Federation of State Medical Boards. If the physician applicant was licensed or practiced in a jurisdiction that does not record information with the data bank of the Federation of State Medical Boards, the board shall contact the medical regulatory body of that jurisdiction to obtain comparable information about the applicant

Please visit <https://www.commerce.alaska.gov> for more information.

Arizona

Arizona Regulatory Boards of Physician Assistants
1740 W Adams
Phoenix, AZ 85007

Phone: (480) 551-2700

Arizona Requirements

32-2521. Qualifications

An Applicant for licensure shall:

- Have graduated from a physician assistants educational program approved by the board.
- Pass a certifying examination approved by the board.
- Be physically and mentally able to safely perform health care tasks as a physician assistant.
- Have a professional record that indicates that the applicant has not committed any act or engaged in any conduct that constitutes grounds for disciplinary action against a licensee pursuant to this chapter. This paragraph does not prevent the board from considering the application of an applicant who was the subject of disciplinary action in another jurisdiction if the applicant's act or conduct was subsequently corrected, monitored and resolved to the satisfaction of that jurisdiction's regulatory board.
- Not have had a license to practice revoked by a regulatory board in another jurisdiction in the United States for an act that occurred in that jurisdiction that constitutes unprofessional conduct pursuant to this chapter.
- Not be currently under investigation, suspension or restriction by a regulatory board in another jurisdiction in the United States for an act that occurred in that jurisdiction that constitutes unprofessional conduct pursuant to this chapter. If the applicant is under investigation by a regulatory board in another jurisdiction, the board shall suspend the application process and may not issue or deny a license to the applicant until the investigation is resolved.
- Not have surrendered, relinquished or given up a license in lieu of disciplinary action by a regulatory board in another jurisdiction in the United States for an act that occurred in that jurisdiction that constitutes unprofessional conduct pursuant to this chapter. This paragraph does not prevent the board from considering the application of an applicant who surrendered, relinquished or gave up a license in lieu of disciplinary action by a regulatory board in another jurisdiction if that regulatory board subsequently reinstated the applicant's license.
- Have submitted verification of all hospital affiliations and employment for the five years preceding application. Each hospital must verify the applicant's affiliation or employment on the hospital's official letterhead or the electronic equivalent

Please visit <https://www.azleg.gov> for more information.

Arkansas

Arkansas State Medical Board
1401 West Capitol Avenue
Little Rock, AR 72201-2936

Phone: (501) 296-1802

Arkansas Requirements

17-95-403 Application – Qualifications

- Every person desiring a license to practice medicine shall make application to the Arkansas state medical board
- Application shall be accompanied by the license fee and such documents, affidavits and certificates as the necessary to establish that the applicant possesses the qualifications prescribed by this section, apart from any required examination by the board.

17-95-404 Examination

- The Arkansas state medical board by and through its rules and regulations will approve and designate the examination to be given to those individuals who desire a license to practice medicine in the state of Arkansas.

Please visit <https://www.armedicalboard.org> for more information.

California

Osteopathic Medical Board of California
1300 National Drive
Sacramento, CA 95834-1991

Phone: (916) 928-8390

Contact: osteopathic@dca.ca.gov

California Requirements

Chapter 7.7 Physician Assistants Article 3. Certification and Approval

The board shall issue under the name of the Medical Board of California a license to all physician assistant applicants who meet all of the following requirements:

- Provide evidence of successful completion of an approved program.
- Pass any examination required under Section 3517.
- Not be subject to denial of licensure under Division 1.5 (commencing with Section 475) or Section 3527.
- Pay all fees required under Section 3521.1.

Please visit <http://leginfo.legislature.ca.gov> for more information.

Colorado

Colorado Department of Regulatory Agencies
1560 Broadway
Denver, CO 80202

Phone: (303) 894-7855

Colorado Requirements

Rule 400 Section 1. Qualifications for Licensure Application

To apply for a license, an applicant shall submit:

- A completed Board-approved application and required fee
- Proof of satisfactory passage of the national certifying examination by the National Commission on Certification of Physician Assistants

Please visit <https://www.colorado.gov> for more information.

Connecticut

Connecticut Department of Public Health
Physician Assistant Licensure
410 Capitol Ave.
P.O. Box 340308
Hartford, CT 06134

Phone: (860) 509-7603

Contact: dph.healingarts@ct.gov

Connecticut Requirements

In order to qualify for licensure, an applicant must meet the following eligibility requirements:

- Hold a baccalaureate or higher degree in any field from a regionally accredited institution of higher education;
- Graduated from a physician assistant program accredited, at the time of graduation, by the Accreditation Review Commission on Education for the Physician Assistant ([ARC-PA](#));
- Passed the certification examination of the National Commission on Certification of Physician Assistants, Inc. (NCCPA);
- Holds current certification by the NCCPA;
- Has completed not less than sixty (60) hours of didactic instruction in pharmacology for physician assistant practice in an accredited physician assistant education program or a post-graduate program for physician assistant practice

Please visit <http://www.portal.ct.gov/> for more information.

Delaware

Division of Professional regulation
Physician Assistant Licensure
Cannon Building, Suite 203
861 Silver Lake Blvd.
Dover, Delaware 19904

Phone: (302) 744-4500

Delaware Requirements

1770A Physician Assistants

“Physician assistant” or “PA” means an individual who:

- Has graduated from a physician assistant or surgeon assistant program which is accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) or, prior to 2001, by the Committee on Allied Health Education and Accreditation (CAHEA) of the American Medical Association (AMA), or a successor agency acceptable to and approved by the Board, or has passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants prior to 1986;
- Has a baccalaureate degree or the equivalent education to a baccalaureate degree, as determined by the Council and the Board;
- Has passed a national certifying examination acceptable to the Regulatory Council for Physician Assistants and approved by the Board;
- Is licensed under this chapter to practice as a physician assistant; and
- Has completed any continuing education credits required by rules and regulations developed under this chapter.

Please visit <http://delcode.delaware.gov> for more information.

Florida

Florida Board of Medicine
4052 Bald Cypress Way
Tallahassee, FL 32399-3253

Phone: (850) 245-4131

Florida Requirements

Applicants to become a licensed Physician Assistant must meet the following requirements:

- Be a graduate of a physician assistant training program accredited by the Commission on Accreditation of Allied Health Programs or its successor organization.
- Passed the proficiency examination administered by the National Commission on Certification of Physician Assistants (NCCPA)
- Hold a current certificate issued by the NCCPA. If an applicant does not hold a current certificate issued by the NCCPA and has not actively practiced as a physician assistant within the immediately preceding 4 years, the applicant must retake and successfully complete the entry-level examination of the NCCPA.

Please visit <http://flboardofmedicine.gov> for more information.

Georgia

Georgia Composite Medical Board
2 Peachtree Street, NW
Atlanta, Georgia 30303-3465

Phone: (404) 656-3913

Georgia Requirements

Rule 360-5-.02 Qualifications for Physician Assistant Licensure

An applicant for licensure as a physician assistant must show to the satisfaction of the Board the following:

- An affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the **DHS-USCIS SAVE** (Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency.
- Good moral character as demonstrated by two (2) acceptable references from licensed physicians, who are personally acquainted with the applicant. These may not be completed by the physician(s) applying for utilization of the physician assistant.
- Evidence of satisfactory completion of a training program approved by the Board. The Board has approved or will approve those physician assistant programs of training offered by accredited colleges or universities, whose graduates are eligible for the examination administered by either the NCCPA or NCCAA or their successors, and whose curriculum consists of two or more academic years, including clinical experience in health care appropriate to the task of a physician assistant.
- Evidence that the applicant has achieved a passing score on either:
 - The certification examination administered by the National Commission for Certification of Anesthesiologist Assistants (NCCAA) or its successor, or
 - The certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA) or its successor.

Please visit <http://rules.sos.ga.gov/> for more information.

Hawaii

Department of Commerce and Consumer Affairs
King Kalahaua Building
335 Merchant Street
Honolulu, Hawaii 96813

Phone: (800) 586-3000

Contact: pvl@dcca.hawaii.gov

Hawaii Requirements

§453-5.3 Physician assistant; licensure required.

- The Hawaii medical board shall require each person practicing medicine under the supervision of a physician or osteopathic physician, other than a person licensed under section 453-3, to be licensed as a physician assistant. A person who is trained to do only a very limited number of diagnostic or therapeutic procedures under the direction of a physician or osteopathic physician shall not be deemed a practitioner of medicine or osteopathy and therefore does not require licensure under this section.
- The board shall establish medical educational and training standards with which a person applying for licensure as a physician assistant shall comply. The standards shall be at least equal to recognized national education and training standards for physician assistants.
- Upon satisfactory proof of compliance with the required medical educational and training standards, the board may grant state licensure to a person who has been granted certification based upon passage of a national certifying examination and who holds a current certificate from the national certifying entity approved by the board.

Please visit <http://cca.hawaii.gov> for more information.

Idaho

Idaho Board of Medicine
1755 N Westgate Drive
Boise, Idaho 83720-0058

Phone: (208) 327-7005

Idaho Requirements

021.REQUIREMENTS FOR LICENSURE.

- **Residence.** No period of residence in Idaho shall be required of any applicant, however, each applicant for licensure must be legally able to work and live in the United States. Original documentation of lawful presence in the United States must be provided upon request only. The Board shall refuse to issue a license or renew a license if the applicant is not lawfully present in the United States. (4-9-09)
- **English Language.** Each applicant shall speak, write, read, understand and be understood in the English language. Evidence of proficiency in the English language must be provided upon request only. (4-9-09)
- **Educational Requirement.** Applicants for licensure shall have completed an approved program as defined in Subsection 010.02 and shall provide evidence of having received a college baccalaureate degree from a nationally accredited school with a curriculum approved by the United States Secretary of Education, the Council for Higher Education Accreditation, or both, or from a school accredited by another such agency approved by the Board. (3-29-17)
- **Certification.** Current certification by the National Commission on Certification of Physician Assistants or similar certifying agency approved by the Board. (3-29-17)
- **Personal Interview.** The Board may at its discretion, require the applicant or the supervising physician or both to appear for a personal interview. (3-19-99)
- **Completion of Form.** (3-16-04)
 - If the applicant is to practice in Idaho, he must submit payment of the prescribed fee and a completed form provided by the Board indicating: (3-16-04)
 - The applicant has completed a delegation of services agreement signed by the applicant, supervising physician and alternate supervising physicians; and (3-16-04)
 - The agreement is on file at each practice location and the address of record of the supervising physician and at the central office of the Board; or (3-16-04)
 - If the applicant is not to practice in Idaho, he must submit payment of the prescribed fee and a completed form provided by the Board indicating the applicant is not practicing in Idaho and prior to practicing in Idaho, the applicant will meet the requirements of Subsections 021.06.a.i. and 021.06.a.ii

Please visit <https://adminrules.idaho.gov> for more information.

Illinois

Illinois Department of Financial & Professional Regulation
100 West Randolph
Chicago, IL 60601

Phone: (888) 473-4858

Illinois Requirements

Section 1350.40 Application for Licensure

An applicant for licensure as a physician assistant shall file an application on forms provided by the Division. The application shall include:

- Certification of graduation from an approved program that meets the requirements set forth in Section 1350.30 of this Part or certification from the National Commission on Certification of Physician Assistants, or its successor agency, that the applicant has substantially equivalent training and experience;
- Certification of successful completion of the Physician Assistant National Certifying Examination. The certification shall be forwarded to the Division from the National Commission on Certification of Physician Assistants, or its successor agency;
- Current valid certification issued by the National Commission on Certification of Physician Assistants (NCCPA) or its successor agency
- A certification from the jurisdiction of original licensure and current licensure stating:
 - The date of issuance and status of the license; and
 - Whether the records of the licensing authority contain any record of disciplinary actions taken or pending;
- The fee required in Section 1350.25 of this Part.

A physician assistant license will be issued when the applicant meets the requirements set forth above. However, a physician assistant may not practice until a notice of employment has been filed in accordance with Section 1350.100 of this Part.

Please visit <http://www.ilga.gov> for more information.

Indiana

Indiana Professional Licensing Agency
302 W Washington St
Indianapolis, IN 46204

Phone: (317) 232-2980

Indiana Requirements

Documents Required for Licensure:

- **Photograph** - Submit one (1) passport quality photo taken within the past eight (8) weeks.
- **Application Fee** - Please submit an application fee in the amount of \$100.00 payable to Professional Licensing Agency. All fees are non-refundable and non-transferable.
- **Notarized Copy Information** - When submitting a notarized copy of an original document, the notary must make a statement to the fact that the notary has seen the original document. If this is not done the document will not be accepted.
- **Positive Responses** - If you have answered any of the questions on the application “yes” you must submit a notarized affidavit detailing the occurrence/situation, the outcome, date of occurrence, if it is a malpractice payment include the amount paid in your behalf. **An affidavit is not needed if you responded to Question #12 regarding employment history.** If applicable please submit copies of all court documents and/or arrest records. Letters from attorneys or insurance companies are not accepted in lieu of your statement; however they may be included with your statement.
- **Criminal Background Checks** - Any physician assistant seeking initial licensure are required to submit to fingerprinting and a national criminal background check by the Indiana State Police. The individual applicant will be responsible for the cost of the background check. The backgrounds must be done by the state approved vendor and any checks done outside the chain of command will not be accepted. Information on how to be fingerprinted and a list of frequently asked questions, go to [criminal background check information](#).
- **Official Transcript** - Submit an official transcript of courses and grades from an approved Physician Assistant school showing that the degree has been confirmed.
- **Diploma** - Submit a notarized copy of your diploma
- **Score Report** - You must request that your official score report be sent directly to Professional Licensing Agency from the NCCPA.
- **NCCPA Certificate** - Submit a notarized copy of your current NCCPA certificate.
- **Verification of State Licensure(s)** - You must request a “License Verification or Letter of Good Standing” from each State/Country in which you currently are or have ever been licensed, certified, or registered in any regulated health profession or occupation. This includes all licenses, etc., that are active, expired, inactive, retired, delinquent etc. In addition to any physician assistant license/certification etc., this also pertains to any professional health license such as an EMT, nurse, pharmacist, etc. You will need to print off the verification form and contact the appropriate entities/states regarding their

process. They may charge a fee for this service. They will need to complete the verification and mail it directly to our office. Many states use their own computer generated document, in lieu of our form, which is acceptable. We do accept official web verifications; the verification must come directly from the State in which you were licensed.

- **Supervisory Agreement** - The supervising physician shall submit a description of the exact privileges and tasks the physician assistant shall be performing under the physician's supervision

Please visit <http://www.in.gov> for more information.

Iowa

Iowa Department of Public Health
0075, 321 E 12th St 6th floor
Des Moines, IA 50319

Phone: (515) 281-7689

Iowa Requirements

645—326.2 (148C) Requirements for licensure.

The following criteria shall apply to licensure:

- An applicant shall complete a board-approved application packet. Application forms may be obtained from the board's Web site (<http://www.idph.state.ia.us/licensure>) or directly from the board office. All applications shall be sent to the Board of Physician Assistants, Professional Licensure
- An applicant shall complete the application form according to the instructions contained in the application.
- Each application shall be accompanied by the appropriate fees payable by check or money order to the Iowa Board of Physician Assistants. The fees are nonrefundable.
- Each applicant shall provide official copies of academic transcripts that have been sent to the board directly from an approved program for the education of physician assistants. EXCEPTION: An applicant who is not a graduate of an approved program but who passed the NCCPA initial certification examination prior to 1986 is exempt from the graduation requirement.
- An applicant shall provide a copy of the initial certification from NCCPA, or its successor agency, sent directly to the board from the NCCPA, or its successor agency.
- Prior to beginning practice, the physician assistant shall notify the board of the identity of the supervising physician(s) on the board-approved form

Please visit <https://www.legis.iowa.gov> for more information.

Kansas

Kansas Board of Healing Arts
800 SW Jackson
Topeka, KS 66612

Phone: (785) 296-7413

Kansas Requirements

65-28a04. Licensure as a physician assistant, requirements; refusal to license; continuing education; registration to licensure transition

No person shall be licensed as a physician assistant by the state board of healing arts unless such person has:

- Presented to the state board of healing arts proof that the applicant has successfully completed a course of education and training approved by the state board of healing arts for the education and training of a physician assistant or presented to the state board of healing arts proof that the applicant has acquired experience while serving in the armed forces of the United States which experience is equivalent to the minimum experience requirements established by the state board of healing arts;
- passed an examination approved by the state board of healing arts covering subjects' incident to the education and training of a physician assistant; and
- submitted to the state board of healing arts any other information the state board of healing arts deems necessary to evaluate the applicant's qualifications.
 - The board may refuse to license a person as a physician assistant upon any of the grounds for which the board may revoke such license.
 - The state board of healing arts shall require every physician assistant to submit with the renewal application evidence of satisfactory completion of a program of continuing education required by the state board of healing arts. The state board of healing arts by duly adopted rules and regulations shall establish the requirements for such program of continuing education as soon as possible after the effective date of this act. In establishing such requirements, the state board of healing arts shall consider any existing programs of continuing education currently being offered to physician assistants.
 - A person registered to practice as a physician assistant immediately prior to the effective date of this act shall be deemed to be licensed to practice as a physician assistant under this act, and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to February 1, 2001, shall be processed as an application for licensure under this act

Please visit <http://www.ksbha.org> for more information.

Kentucky

Kentucky Board of Medical Licensure
310 Whittington Parkway
Louisville, KY 40222

Phone: (502) 429-7150

Kentucky Requirements

311.844 Licensing of physician assistants -- Requirements -- Endorsement from other state -- Renewal of license.

To be licensed by the board as a physician assistant, an applicant shall:

- Submit a completed application form with the required fee;
- Be of good character and reputation;
- Be a graduate of an approved program; and
- Have passed an examination approved by the board within three (3) attempts

Please visit <http://www.lrc.ky.gov> for more information.

Louisiana

Louisiana State Board of Medical Examiners
630 Camp Street
New Orleans, LA 70130

Phone: (504) 599-0503

Contact: licensing@lsbme.la.gov

Louisiana Requirements

§1507. Qualifications for Licensure

To be eligible for licensure under this Chapter, an applicant shall:

- be at least 20 years of age;
- be of good moral character;
- demonstrate his competence to provide patient services under the supervision and direction of a supervising physician by:
 - being a graduate of a physician assistant training program accredited by the Committee on Allied Health Education and Accreditation (CAHEA), or its predecessors or successors, including but not limited to the Accreditation Review Commission on Education for the Physician Assistant, and by presenting or causing to be presented to the board satisfactory evidence that the applicant has successfully passed the national certification examination administered by the National Commission on Certificate of Physician Assistants (NCCPA) or its successors, together with satisfactory documentation of current certification; or
 - presenting to the board a valid, current physician assistant license, certificate or permit issued by any other state of the United States; provided, however, that the board is satisfied that the certificate, license or permit presented was issued upon qualifications and other requirements substantially equivalent to the qualifications and other requirements set forth in this Chapter;
- certify that he is mentally and physically able to engage in practice as a physician assistant;
- not, as of the date of application or the date on which it is considered by the board, be subject to discipline, revocation, suspension, or probation of certification or licensure in any jurisdiction for cause resulting from the applicant's practice as a physician assistant; provided, however, that this qualification may be waived by the board in its sole discretion.

Please visit <http://www.lsbme.la.gov> for more information.

Maine

Board of Licensure in Medicine
161 Capitol Street
137 State House Station
Augusta, Maine 04333-0137

Phone: (207) 287-3601

Maine Requirements

Uniform Requirements for Full License

The Board, or if delegated, Board staff may issue a full license as a physician assistant to an applicant who:

- Submits an administratively complete application on forms approved by the Board;
- Pays the appropriate uniform licensure fee;
- Has successfully completed an educational program for physician assistants accredited by the American Medical Association Committee on Allied Health Education and Accreditation, or the Commission for Accreditation of the Allied Health Education Programs, or their successors;
- Has no license, certification or registration as a physician assistant, or any other type or classification of health care provider license, certification or registration under current discipline, revocation, suspension, restriction or probation;
- Has no cause existing that may be considered grounds for disciplinary action or denial of licensure as provided by law;
- Passes, at the time of license application, a jurisprudence examination administered by the Board; and
- Has passed the NCCPA certification examination and holds a current certification issued by the NCCPA that has not been subject to disciplinary action by the NCCPA at the time the license application is acted upon by the Board.

Please visit <http://www.maine.gov> for more information.

Maryland

Maryland Board of Physicians
4201 Patterson Avenue
Baltimore, Maryland 21215

Phone: (410) 764-4777

Contact: kim.jackson@maryland.gov

Maryland Requirements

.03 Licensure — Qualifications for Initial Licensure

- Moral Character. The applicant shall be of good moral character.
- Age. The applicant shall be 18 years old or older.
- Fee. An applicant for initial licensure shall pay the initial application fee and any additional charges set by the Board.
- Education and Training. The applicant shall meet at least one of the following requirements:
 - Have a doctor of medicine degree from a school of medicine accredited by LCME at the time of the applicant's graduation and have successfully completed 1 year of postgraduate training at an accredited training program;
 - Have a doctor of osteopathy degree from a school of osteopathy in the United States, its territories or possessions, Puerto Rico, or Canada that has standards for graduation equivalent to those established by the American Osteopathic Association (AOA) and have successfully completed 1 year of postgraduate training at an accredited training program;
 - Have a doctor of medicine degree from any other medical school, have successfully completed the requirements for and obtained ECFMG certification, and have successfully completed 2 years of post-graduate training at an accredited training program; or
 - Have a document stating that the applicant has successfully completed a fifth pathway program as defined in Health Occupations Article, §14-308(a)(2), Annotated Code of Maryland, have successfully completed all of the formal graduation requirements of a foreign medical school except for the postgraduate or social service components as required by the foreign country or its medical school, and have successfully completed 2 years of postgraduate training at an accredited training program.
- On a case-by-case basis, the Board may consider full-time teaching in an LCME-accredited medical school in the United States as an alternative to the accredited postgraduate clinical medical education programs required in §D of this regulation.
- The Board may consider practice in another state of the United States or in Canada as an alternative to the accredited postgraduate clinical medical education program required in §D of this regulation if:
 - There is a minimum of 10 years clinical practice in the United States or Canada, with 3 years being within 5 years of the date of the application; and

- The clinical practice occurred under a full unrestricted license to practice medicine.
- G. Examination.
 - An applicant for licensure in Maryland shall successfully complete at least one of the following examination requirements:
 - Achieve a passing score on all parts of the National Board of Medical Examiners examination as evidenced by an endorsement of certification issued by the National Board of Medical Examiners;
 - Achieve a score as follows:
 - At least 75 on each part of the FLEX examination;
 - A FLEX weighted average score of at least 75 on a FLEX examination taken before 1985 and achieved in one sitting; or
 - A FLEX weighted average score of at least 75 on a FLEX examination taken before 1985 and be currently certified by a member board of the American Board of Medical Specialties;
 - Achieve a passing score, as evidenced by receipt of either a Diplomate Certification or a Certification of Completion issued by the National Board of Osteopathic Medical Examiners after January 1, 1971, on:
 - All parts of the examination of the National Board of Osteopathic Medical Examiners (NBOME);
 - All levels of the Comprehensive Osteopathic Medical Licensing Examination (COMLEX); or
 - A combination of these examinations;
 - Achieve the recommended passing score on all levels of the Comprehensive Osteopathic Medical Licensing Exam of the National Board of Osteopathic Medical Examiners;
 - Achieve passing scores on any of the following examination combinations:
 - NBOME Part 1 + NBOME Part 2 + COMLEX Level 3;
 - NBOME Part 1 + COMLEX Level 2 + COMLEX Level 3;
 - NBOME Part 1 + COMLEX Level 2 + NBOME Part 3;
 - COMLEX Level 1 + NBOME Part 2 + NBOME Part 3;
 - COMLEX Level 1 + COMLEX Level 2 + NBOME Part 3; or
 - COMLEX Level 1 + NBOME Part 2 + COMLEX Level 3;
 - Achieve a passing score on all parts of the examination of any state board or the District of Columbia Board of Medicine in the United States;
 - Achieve a passing score on all steps of the United States Medical Licensing Examination (USMLE);

Please visit <http://www.dsd.state.md.us> for more information.

Massachusetts

Board of Registration of Physician Assistants
239 Causeway St
Boston, MA 02114

Phone: (800) 414-0168

Contact: multiboard.admin@state.ma.us

Massachusetts Requirements

Section 9I: Registration; applications; requirements

- Each applicant shall furnish the board with satisfactory proof of graduation from a training program approved by the board, having received a bachelor's degree or higher from an accredited college or university or an equivalent approved by the board, and having passed the certifying examination of the National Commission on Certification of Physician Assistants or other such certifying examination as specified or administered by the board
- Each application shall be accompanied by payment of a license fee to be determined by the commissioner of administration under the provisions of section three B of chapter seven. An applicant shall submit such proof as required by the board as to the applicant's good moral character. Each applicant shall provide the board with a current office address and the name and address of any supervising physician.

Please visit <https://malegislature.gov> for more information.

Michigan

Department of Licensing and Regulatory Affairs
Ottawa Building
611 W. Ottawa
P.O. Box 30004
Lansing, MI 48909

Phone: (517) 373-1820

Michigan Requirements

ALL APPLICANTS:

- A fingerprint report and criminal background check are required.
- Human Trafficking requirement – Administrative Rule R 338.6103: This is a one-time training that is separate from continuing education (CE)

ELIGIBILITY FOR PHYSICIAN'S ASSISTANT LICENSE BY EXAMINATION

(first license)

- Graduate from an accredited Physician's Assistant (PA) educational program.
- Pass the PANCE examination administered by the National Commission on Certification of Physician's Assistants (NCCPA).
- Submit the Physician's Assistant by Examination application found at http://www.michigan.gov/lara/0,4601,7-154-72600_72603_27529_27550---,00.html with the appropriate fee. If also applying for a controlled substance license, submit the additional fee listed on the application.
- You may also submit an additional fee listed on the application to apply for a temporary license if you have completed the PA educational program, but have not yet taken the PANCE examination

Please visit <http://www.michigan.gov> for more information.

Minnesota

Minnesota Board of Medical Practice
2829 University Avenue SE
Minneapolis, MN 55414-3246

Phone: (612) 617-2130

Contact: medial.Board@state.mn.us

Minnesota Requirements

147A.02 QUALIFICATIONS FOR LICENSURE

Except as otherwise provided in this chapter, an individual shall be licensed by the board before the individual may practice as a physician assistant.

The board may grant a license as a physician assistant to an applicant who:

- submits an application on forms approved by the board;
- pays the appropriate fee as determined by the board;
- has current certification from the National Commission on Certification of Physician Assistants, or its successor agency as approved by the board;
- certifies that the applicant is mentally and physically able to engage safely in practice as a physician assistant;
- has no licensure, certification, or registration as a physician assistant under current discipline, revocation, suspension, or probation for cause resulting from the applicant's practice as a physician assistant, unless the board considers the condition and agrees to licensure;
- submits any other information the board deems necessary to evaluate the applicant's qualifications; and
- has been approved by the board.

Please visit <https://www.revisor.mn.gov> for more information.

Mississippi

Mississippi State Board of Medical Licensure
1867 Crane Ridge Drive
Jackson, MS 39216

Phone: (601) 987-3079

Mississippi Requirements

Rule 1.3 Qualifications for Licensure

Applicants for physician assistant licensure must meet the following requirements:

- Satisfy the Board that he or she is at least twenty-one (21) years of age and of good moral character.
- Complete an application for license and submit same to the Board in the manner prescribed by the Board with a recent passport type photograph.
- Pay the appropriate fee as determined by the Board.
- Present a certified copy of birth certificate or valid passport.
- Submit proof of legal change of name if applicable (notarized or certified copy of marriage license or other legal proceeding).
- Possess a master's degree in a health-related or science field.
- Successfully complete an educational program for physician assistants accredited by ARC-PA or its predecessor or successor agency.
- Pass the certification examination administered by the NCCPA and have current NCCPA certification.
- Provide information on registration or licensure in all other states where the applicant is or has been registered or licensed as a physician assistant.
- Submit fingerprints for state and national criminal history background checks.
- No basis or grounds exist for the denial of licensure as provided in Part 2615, Rule 1.15

Please visit <http://www.msbl.ms.gov> for more information.

Missouri

Missouri Division of Professional Registration
Missouri Advisory Commission for Physician Assistants
3605 Missouri Boulevards
P.O. Box 4
Jefferson City, MO 65102

Phone: (573) 751-0098
Contact: healingarts@pr.mo.gov

Missouri Requirements

20 CSR 2150-7.100 Applicants for Licensure

- Applicants shall furnish satisfactory evidence as to their good moral character including a letter of reference from the director of their physician assistant program
- Applicants must present satisfactory evidence of completion of a physician assistant program accredited by the Committee on Allied Health Education and Accreditation of the American Medical Association or by its successor agency the Commission for the Accreditation of Allied Health Education Programs or its successor agency
- Applicants who did not complete a physician assistant program and were employed as physician assistants for three (3) years prior to August 28, 1989, shall have written verification of employment, made under oath, submitted to the board from the physician who supervised the applicant
- Applicants shall have verification of passage of the certifying examination and active certification submitted to the board from the National Commission on Certification of Physician Assistants.
- Applicants are required to make application upon forms prepared by the board.
- No application will be considered unless fully and completely made out on the specified form and properly attested.
- Applicants shall attach to the application a recent unmounted photograph not larger than three and one-half inches by five inches (3 1/2" × 5").
- Applications shall be sent to the State Board of Registration for the Healing Arts, PO Box 4, Jefferson City, MO 65102.
- Applicants shall submit the licensure application fee in the form of a cashier's check or money order drawn on or through a United States bank made payable to the State Board of Registration for the Healing Arts
- Applicants shall have verification of licensure, registration, and/or certification submitted from every state and/or country in which the applicants have ever held privileges to practice
- Applicants must submit a complete curriculum vita from high school graduation to the date of application submission. This document shall include the name(s) and address(es) of all employers and supervisors, dates of employment, job title, and all professional and nonprofessional activities.

Please visit <https://www.sos.mo.gov> for more information.

Montana

Montana Department of Labor & Industry
Board of Medical Examiners
301 South Park Avenue
Helena, MT 59620-0513

Phone: (406) 444-5773

Contact: UnitC@mt.gov

Montana Requirements

37-20-402. Criteria for licensing physician assistant

A person may not be licensed as a physician assistant in this state unless the person:

- is of good moral character;
- is a graduate of a physician assistant training program accredited by the accreditation review commission on education for the physician assistant or, if accreditation was granted before 2001, accredited by the American medical association's committee on allied health education and accreditation or the commission on accreditation of allied health education programs; and
- has taken and passed an examination administered by the national commission on the certification of physician assistants.

Please visit <http://leg.mt.gov> for more information.

Nebraska

Nebraska Department of Health and Human Services
301 Centennial Mall South
Lincoln, Nebraska 68509

Phone: (402) 471-3121

Nebraska Requirements

Application Procedures and Requirements

The following criteria must be met for a Physician Assistant to be licensed:

- Proof of graduation from an approved program;
- Certified proof of passing the Physician Assistant National Certifying Examination (PANCE) offered by the [National Commission on Certification of Physician Assistants \(NCCPA\)](#);
- Proof of age (such as photocopy of driver's license or birth certificate);
- Completed application form and required documentation
- Application fee of \$150.00, payable to DHHS Public Health Licensure
- A person who has not yet taken or passed the NCCPA exam may obtain a temporary license

Please visit <http://dhhs.ne.gov> for more information.

Nevada

Nevada State Board of Medical Examiners
9600 Gateway Drive
Reno, NV 89521-8953

Phone: (775) 688-2144

Contact: nsbme@medboard.nv.gov

Nevada Requirements

NRS 630.275 Regulations concerning licensure

The Board shall adopt regulations regarding the licensure of a physician assistant, including, but not limited to:

- The educational and other qualifications of applicants.
- The required academic program for applicants.
- The procedures for applications for and the issuance of licenses.
- The procedures deemed necessary by the Board for applications for and the initial issuance of licenses by endorsement pursuant to [NRS 630.2751](#) or [630.2752](#).
- The tests or examinations of applicants by the Board.
- The medical services which a physician assistant may perform, except that a physician assistant may not perform those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, podiatric physicians and optometrists under [chapters 631, 634, 635](#) and [636](#), respectively, of NRS, or as hearing aid specialists.
- The duration, renewal and termination of licenses, including licenses by endorsement.
- The grounds and procedures respecting disciplinary actions against physician assistants.
- The supervision of medical services of a physician assistant by a supervising physician, including, without limitation, supervision that is performed electronically, telephonically or by fiber optics from within or outside this State or the United States.
- A physician assistant's use of equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics, including, without limitation, through telehealth, from within or outside this State or the United States.

Please visit <https://www.leg.state.nv.us> for more information.

New Hampshire

Office of Professional Licensure and Certification
New Hampshire Board of Medicine
121 South Fruit Street
Concord, NH 03301

Phone: (603) 271-2152

New Hampshire Requirements

PART Med 302 QUALIFICATIONS

Med 302.01 Educational Requirements

- Applicants for licensure shall have completed a minimum of 2 years of college coursework prior to acceptance into medical school.
- Applicants who have graduated from medical schools located in the United States or Canada shall confirm that the medical school is accredited by the Liaison Committee for Medical Education (LCME).
- Applicants from medical schools located outside the United States or Canada shall maintain the academic standard recognized by the United Nations World Health Organization (UNWHO) and have their studies confirmed by the Educational Commission for Foreign Medical Graduates (ECFMG).
- Applicants shall have completed at least 2 years of postgraduate medical training (postgraduate year 1, postgraduate year 2) in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA); or its equivalent which shall include, at a minimum, the following:
 - Board certification in the applicant's area of specialty; or
 - Completion of 10 or more years of practice combined with proof of 2 years of post graduate training outside the United States or Canada.
- Applicants who have not completed 2 years of postgraduate training in an institution accredited by ACGME or AOA shall petition the board pursuant to Med 205.01 to determine if the applicant's qualifications meet the requirements of (d) above. Such petitions shall provide any information in addition to that specified in (d) above which the applicant wishes the board to consider in making a determination of equivalency

Med 303.01 Examination Requirements

Applicants for licensure shall have passed one of the following series of examinations:

- National Board of Medical Examiners (NBME), parts I, II and III;
- The Federation Licensing Examination (FLEX), components 1 and 2;
- The United States Medical Licensing Examination (USMLE), steps 1, 2, Clinical Knowledge and Clinical Skills, and 3;
- National Board of Osteopathic Examiners (NBOE) parts I, II and III; or
- The Medical Council of Canada Examination (LMCC).

Please visit <http://www.gencourt.state.nh.us> for more information.

New Jersey

State Board of Medical Examiners
P.O. Box 183
Trenton, New Jersey 08625

Phone: (609) 826-7100

Contact: bmepa@dca.lps.state.nj.us

New Jersey Requirements

45:9-27.13. License requirements

The board shall issue a license as a physician assistant to an applicant who has fulfilled the following requirements:

- Is at least 18 years of age;
- Is of good moral character;
- Has successfully completed an accredited program; and
- Has passed the national certifying examination administered by the National Commission on Certification of Physician Assistants, or its successor.

Please visit <http://www.njconsumeraffairs.gov> for more information.

New Mexico

New Mexico Medical Board
2055 S. Pacheco Street
Building 400
Santa Fe, NM 87505

Phone: (505) 476-7220

Contact: nmbme@state.nm.us

New Mexico Requirements

- **Criminal History Background Check**
 - Like other state medical boards around the country, the NM Medical Board requires that all applicants for licensure complete a criminal history background check in order to fulfill its statutory mandate to protect the health and safety of the public.
- **Education Requirements**
 - All applicants must have graduated from a physician assistant program accredited by the Committee on Allied Health Education and Accreditation (CAHEA) of the American Medical Association, the Accreditation Review Committee on Education for the Physician Assistant (ARC-PA) or its successor agency, or passed the Physician Assistant National Certifying Examination administered by NCCPA prior to 1986 and has proof of continuous practice with an unrestricted license as a physician assistant in another state for four years prior to application
- **Professional Recommendations**
 - You must have two (2) Professional Recommendation forms completed and sent directly to the Board by **physicians or physician assistants** licensed to practice medicine in the United States or Physician Assistant Program Directors, or the Director's designee who have personal knowledge of the applicant's moral character and competence to practice.
- **Work Experience Verification for Supervised PA**
 - You must have the chief of staff or facility's administrative staff in each and every hospital or health facility where you have held privileges or been employed during the past two (2) years complete the Work Experience Verification form(s) and return the completed form(s) directly to the New Mexico Medical Board.
- **Verification of Clinical Practice for Collaborative PA**
 - You must have at least one of your supervising physicians complete the Work Experience Verification form(s) to verify clinical practice as a physician assistant for three years immediately preceding the application and return the completed form(s) directly to the New Mexico Medical Board.
- **Verification of Current Malpractice Liability Insurance for Collaborative PA**
 - You must provide the Board with a copy of your certificate of current malpractice liability insurance.

- **Applicants Oath**
 - You must complete the form entitled “Applicant’s Oath” in its entirety including affixing a recent (less than 6 months) color passport quality photograph of yourself in the designated space.
- **Supervising Physician Statement of Responsibility (SPSR)**
 - Upon employment and before beginning practice, a supervised physician assistant together with a New Mexico licensed physician (MD), must submit a completed “Supervising Physician Statement of Responsibility Form” directly to the Board office. **A supervised Physician Assistant may not begin practice until a completed and signed Supervising Physician Statement of Responsibility (SPSR) form is received by the New Mexico Medical Board. However, a license may be issued prior to the Board receiving the completed SPSR form.**

Please visit <http://www.nmmb.state.nm.us> for more information.

New York

New York State Education Department
Office of the Professions
P.O. Box 22001
Albany, NY 12201-2001

Phone: (518) 474-3817

Contact: medbd@nysed.gov

New York Requirements

To be licensed as a registered physician assistant in New York State you must:

- be of good moral character;
- be at least 21 years of age;
- meet education requirements;
 - must have completed high school or its equivalent and you must present satisfactory evidence of completion of a program for the training of physician assistants that is approved by the New York State Education Department as licensure qualifying or accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) or a program that is determined by the Department to be the substantial equivalent of a licensure qualifying or accredited program
- meet examination requirements
 - You must pass the Physician Assistant National Certifying Examination (PANCE), a computer examination, that is administered by the National Commission on Certification of Physician Assistants (NCCPA).

Please visit <http://www.op.nysed.gov> for more information.

North Carolina

North Carolina Medical Board
1203 Front Street
Raleigh, NC 27609-7533

Phone: (919) 326-1100

North Carolina Requirements

21 NCAC 32S .0202 QUALIFICATIONS AND REQUIREMENTS FOR LICENSE

Except as otherwise provided in this Subchapter, an individual shall obtain a license from the Board before practicing as a physician assistant. An applicant for a physician assistant license shall:

- submit a completed application, available at www.ncmedboard.org, to the Board;
- meet the requirements set forth in G.S. 90-9.3 and has not committed any of the acts listed in G.S. 90-14;
- supply a certified copy of applicant's birth certificate if the applicant was born in the United States or a certified copy of a valid and unexpired U.S. passport. If the applicant does not possess proof of U.S. citizenship, the applicant shall provide information about the applicant's immigration and work status that the Board shall use to verify applicant's ability to work lawfully in the United States;
- submit to the Board proof that the applicant completed a Physician Assistant Educational Program. He or she shall also show successful completion of the Physician Assistant National Certifying Examination;
- pay to the Board a non-refundable fee of two hundred dollars (\$200.00) plus the cost of a criminal background check. There is no fee to apply for a physician assistant limited volunteer license;
- submit National Practitioner Data Bank (NPDB) and Healthcare Integrity and Protection Data Bank (HIPDB) reports. These reports shall be requested by the applicant and submitted to the Board within 60 days of the request;
- submit a Board Action Data Bank Inquiry report from the Federation of State Medical Boards (FSMB). This report shall be requested by the applicant and submitted to the Board within 60 days of the request;
- submit to the Board, at P. O. Box 20007, Raleigh, NC 27619, two complete original fingerprint record cards, on fingerprint record cards supplied by the Board upon request;
- submit to the Board, at P. O. Box 20007, Raleigh, NC 27619 or license@ncmedboard.org, a signed consent form allowing a search of local, state, and national files to disclose any criminal record;
- disclose whether he or she has ever been suspended from, placed on academic probation, expelled, or required to resign from any school, including a PA educational program;
- attest that he or she has no license, certificate, or registration as a physician assistant currently under discipline, revocation, suspension, probation, or any other adverse action resulting from a health care licensing board;
- certify that he or she is mentally and physically able to safely practice as a physician assistant and is of good moral character;

- provide the Board with two original recommendation forms dated within six months of the application, at P. O. Box 20007, Raleigh, NC 27619, These recommendations shall come from persons under whom the applicant has worked or trained who are familiar with the applicant's academic competence, clinical skills, and character. At least one reference form shall be from a physician and the other reference form must be from a physician assistant peer under whom the applicant has worked or trained. References shall not be from any family member or, in the case of applicants who have not been licensed anywhere, references shall not be from fellow students of the applicant's Physician Assistant Educational Program;
- if two years or more have passed since graduation from a Physician Assistant Educational Program, document that he or she has completed at least 100 hours of continuing medical education (CME) during the preceding two years, at least 50 hours of which must be recognized by the National Commission on Certification of Physician Assistants as Category I CME. An applicant who is currently certified with the NCCPA will be deemed in compliance with this Subparagraph

Please visit <http://reports.oah.state.nc.us> for more information.

North Dakota

North Dakota Board of Medicine
418 E. Broadway Ave.
Bismarck, ND 58501

Phone: (701) 328-6500

North Dakota Requirements

50-03-01-02. Examination requirements

No physician assistant may be employed in the state until the assistant has passed the certifying examination of the national commission on certification of physician assistants or other certifying examinations approved by the North Dakota board of medicine

Please visit <https://www.ndbom.org> for more information.

Ohio

State Medical Board of Ohio
30 East Broad Street
Columbus, OH 43215

Phone: (614) 466-3934

Contact: med.license@med.ohio.gov

Ohio Requirements

4730.08 Certificate to practice as physician assistant

A license to practice as a physician assistant issued under this chapter authorizes the holder to practice as a physician assistant as follows:

- The physician assistant shall practice only under the supervision, control, and direction of a physician with whom the physician assistant has entered into a supervision agreement under section 4730.19 of the Revised Code.
- The physician assistant shall practice in accordance with the supervision agreement entered into with the physician who is responsible for supervising the physician assistant, including, if applicable, the policies of the health care facility in which the physician assistant is practicing.

Please visit <http://codes.ohio.gov> for more information.

Oklahoma

Oklahoma State Board of Medical Licensure and Supervision
101 NE 1st Street
Oklahoma City, OK 73105-1821

Phone: (405) 962-1400

Oklahoma Requirements

435:15-3-1. Qualification; application

No license shall be issued unless an applicant:

- Submits an application and other information pursuant to subsections (b) and (c) and remits the required fee;
- Has successfully completed an educational program for physician assistants accredited by the Accreditation Review Commission on Education for the Physician Assistant, or prior to 2001, either by the Committee on Allied Health Education and Accreditation, or the Commission on Accreditation of Allied Health Education Programs. The board may also issue a license to an applicant who does not meet the educational requirement specified in this section, but who passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants prior to 1986;
- Has passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants;
- Jurisprudence examination.
 - Has responded correctly to seventy-five (75) percent or greater questions on a jurisprudence examination prepared by the board staff. The examination shall include:
 - The Physician Assistant Act; and
 - Significant state statutes or rule impacting physician assistant practice.
- The board shall supply the applicant with a copy of the statutes, rules, or other material from which the examination is based while the applicant is completing the examination.
 - An applicant that does not meet the requirement under subsection (4)(i) after three attempts shall meet with the secretary of the board to create a study plan prior to reexamination;
- Does not hold a license or registration as a physician assistant that is currently under discipline, revocation, suspension, or probation relating to practice as a physician assistant. The board may waive this paragraph

Please visit <http://www.okmedicalboard.org> for more information.

Oregon

Oregon Medical Board
1500 SW 1st Ave
Portland, OR 97201-5847

Phone: (971) 673-2700

Oregon Requirements

677.512 Licensure; renewal; fees; rules

- A person seeking licensure as a physician assistant shall complete an application form provided by the Oregon Medical Board and submit the form to the board, accompanied by nonrefundable fees for the application and for the license in amounts determined by rule of the board.
- The board may issue a license to a physician assistant who:
 - Submits an application as required by the board by rule;
 - Pays the application fee established by the board by rule;
 - Has completed an educational program accredited by a nationally recognized accreditation organization for physician assistant educational programs;
 - Has passed the initial national examination required of physician assistants to become nationally certified;
 - Is mentally and physically able to engage safely in practice as a physician assistant;
 - Has not been disciplined by a physician assistant licensing board in another state, unless the board considers the discipline and determines that the person is competent to practice as a physician assistant; and
 - Is of good moral character as determined by the board.
- The board may issue a license by reciprocity to a person who is licensed as a physician assistant in another state and meets the requirements of subsection (2)(c) and (d) of this section.
- The board shall adopt necessary and proper rules to govern the renewal of licenses issued under this section.
 - If the board requires a licensee to complete continuing education in order to renew a license issued under this section, the board shall allow a licensee to meet those requirements by providing the board with documentation of military training or experience that is substantially equivalent to the continuing education required by the board

Please visit <https://www.oregonlegislature.gov> for more information.

Pennsylvania

State Board of Medicine
P.O. Box 2469
Harrisburg, PA 17105-2649

Phone: (717) 783-1400

Contact: ST-MEDICINE@PA.GOV

Pennsylvania Requirements

§ 18.141. Criteria for licensure as a physician assistant

The Board will approve for licensure as a physician assistant an applicant who:

- Satisfies the licensure requirements in § 16.12 (relating to general qualifications for licenses and certificates).
- Has graduated from a physician assistant program recognized by the Board.
- Has submitted a completed application together with the required fee, under § 16.13 (relating to licensure, certification, examination and registration fees).
- Has passed the physician assistant examination.

Please visit <https://www.pacode.com> for more information.

Rhode Island

Department of Health
3 Capitol Hill
Providence, RI 02908

Phone: (401) 222-5960

Rhode Island Requirements

§ 5-54-9. Criteria for licensure as a physician assistant

The board shall recommend to the director for licensure as a physician assistant an applicant who:

- Is of good character and reputation;
- Graduated from a physician assistant training program certified by the AMA's Committee on Allied Health, Education, and Accreditation, its successor, the Commission on Accreditation of Allied Health Education Programs (CAAHEP), its successor or the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) or its successor.
- Passed a certifying examination approved by the National Commission on Certification of Physician Assistants or any other national certifying exam approved by the board.
- Submitted a completed application together with the required fee as set forth in § 23-1-54.

Please visit <http://webserver.rilin.state.ri.us> for more information.

South Carolina

South Carolina Board of Medical Examiners
110 Centerview Dr
Columbia, SC

Phone: (803) 896-4500

South Carolina Requirements

The following are the basic requirements for obtaining licensure to practice as a physician assistant:

- Pass the NCCPA Exam and document current NCCPA Certification
- Verification from AMA approved PA school
- Take and pass the Medical Practice Act exam
- Verification from all states in which a license is/was held
- Criminal Background Check
- 3 letters of recommendation
- Affidavit of Eligibility
- \$120 fee
- Personal interview with a Board Member/designee (temporary license will be issued prior to interview)

Please visit <http://www.llr.state.sc.us> for more information.

South Dakota

Board of Medical & Osteopathic Examiners
101 N Maine Ave
Sioux Falls, SD 57104

Phone: (605) 367-7781

South Dakota Requirements

36-4A-8. Issuance of license—Qualifications

The board may grant a license to an applicant who:

- Is of good moral character;
- Has successfully completed an educational program for physician assistants accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor agency, or, prior to 2001, either by the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Program;
- Has passed the Physician Assistant National Certification Examination administered by the National Committee on Education for Physician Assistants; and
- Has submitted verification that the physician assistant applicant is not subject to any disciplinary proceeding or pending complaint before any medical or other licensing board unless the board considers such proceedings or complaint and agrees to licensure.

Please visit <http://sdlegislature.gov> for more information.

Tennessee

Department of Health
710 James Robertson Parkway
Nashville, TN 37243

Contact: tn.health@tn.gov

Tennessee Requirements

63-19-105. Qualifications and Licensure

No person shall represent to be or function as a physician assistant under this part unless such person holds a valid physician assistant license or temporary license issued by the board. The board shall license no person as a physician assistant unless:

- The person is a graduate of a physician assistant training program accredited by the Committee on Allied Health Education and Accreditation of the American Medical Association or its successor accrediting agency; and
- The person has successfully completed the examination of the National Commission on the Certification of Physician Assistants. A graduate of a physician assistant training program accredited by the Committee on Allied Health Education and Accreditation of the American Medical Association or its successor accrediting agency may receive a temporary license from the board allowing such individual to function as a physician assistant under this part:
 - For a period of fifteen (15) months immediately following graduation to allow the person an opportunity to attempt the examination; and
 - For a period of one (1) additional year thereafter in which to attempt and successfully complete the examination if the person is not successful on the first attempt; or
- Alternatively, to subdivisions (a)(1) and (2), the person qualified as a physician assistant prior to April 26, 1983, and thereafter continued to represent to be or functioned as a physician assistant; and
- Notwithstanding subdivision (a)(3), the board shall not license any person as a physician assistant after July 1, 1991, unless such person meets the requirements of subdivisions (a)(1) and (2); provided, that the board may continue to issue license renewals to any person who was licensed as a physician assistant pursuant to subdivision

Please visit <https://advance.lexis.com> for more information.

Texas

Texas Medical Board
333 Gaudalupe
Austin, TX 78701

Phone: (512) 305-7010

Texas Requirements

To be eligible for a PA License in Texas, an applicant must meet the following requirements:

- Successful completion of an educational program for physician assistants or surgeon assistants accredited by the Accreditation Review Commission on Education for the Physician Assistant, or by that committee's predecessor or successor entities
- Passage of PANCE within 6 attempts
- NCCPA Certification
- Any health care licenses held not subject to any type of disciplinary action
- Good moral and professional character
- Mentally and physically able to function safely as a PA
- Passage of the jurisprudence (JP) exam
- Have practiced at least 20 hours a week for 40 weeks in one of the two years preceding application

Please visit <http://www.tmb.state.tx.us> for more information.

Utah

Utah Division of Occupational and Professional Licensing
160 East 300 South
Salt Lake City, UT 84111

Phone: (801) 530-6628

Utah Requirements

58-70a-302. Qualifications for licensure

Each applicant for licensure as a physician assistant shall:

- (1) submit an application in a form prescribed by the division;
- (2) pay a fee determined by the department under Section [63J-1-504](#);
- (3) be of good moral character;
- (4) have successfully completed a physician assistant program accredited by the:
 - (a) Accreditation Review Commission on Education for the Physician Assistant; or
 - (b) if prior to January 1, 2001, either the:
 - (i) Committee on Accreditation of Allied Health Education Programs; or
 - (ii) Committee on Allied Health Education and Accreditation;
- (5) have passed the licensing examinations required by division rule made in collaboration with the board;
- (6) meet with the board and representatives of the division, if requested, for the purpose of evaluating the applicant's qualifications for licensure; and
- (7) (a) if the applicant desires to practice in Utah, complete a form provided by the division indicating:
 - (i) the applicant has completed a delegation of services agreement signed by the physician assistant and the supervising physician; and
 - (ii) the agreement is on file at the Utah practice sites; or(b) complete a form provided by the division indicating the applicant is not practicing in Utah and, prior to practicing in Utah, the applicant will meet the requirements of Subsection (7)(a).

Please visit <https://le.utah.gov> for more information.

Vermont

Department of Health
108 Cherry Street
Burlington, VT 05402

Phone: (802) 863-7200

Vermont Requirements

§ 1734. Eligibility

The board may grant a license to practice as a physician assistant to an applicant who:

- submits a completed application form provided by the board;
- pays the required application fee;
- has graduated from an accredited physician assistant program or has passed and maintained the certification examination by the National Commission on the Certification of Physician Assistants (NCCPA) prior to 1988;
- has passed the certification examination given by the NCCPA;
- is mentally and physically able to engage safely in practice as a physician assistant;
- does not hold any license, certification, or registration as a physician assistant in another state or jurisdiction which is under current disciplinary action, or has been revoked, suspended, or placed on probation for cause resulting from the applicant's practice as a physician assistant, unless the board has considered the applicant's circumstances and determines that licensure is appropriate;
- is of good moral character;
- submits to the board any other information that the board deems necessary to evaluate the applicant's qualifications; and
- has engaged in practice as a physician assistant within the last three years or has complied with the requirements for updating knowledge and skills as defined by board rules. This requirement shall not apply to applicants who have graduated from an accredited physician assistant program within the last three years

Please visit <https://legislature.vermont.gov> for more information.

Virginia

Virginia Department of Health Professions
Perimeter Center
9960 Maryland Drive
Henrico, Virginia 23233-1463

Phone: (804) 367-4400

Virginia Requirements

18VAC85-50-50. Licensure: entry requirements and application.

The applicant seeking licensure as a physician assistant shall submit:

- A completed application and fee as prescribed by the board.
- Documentation of successful completion of an educational program as prescribed in §54.1-2951.1 of the Code of Virginia.
- Documentation of passage of the certifying examination administered by the National Commission on Certification of Physician Assistants.
- Documentation that the applicant has not had a license or certification as a physician assistant suspended or revoked and is not the subject of any disciplinary proceedings in another jurisdiction

Please visit <https://www.dhp.virginia.gov> for more information.

Washington

Washington State Department of Health
Kent Regional Office
20425 72nd Avenue South, Building 2, Suite 310
Kent, WA 98032

Phone: (800) 525-1027

Washington Requirements

WAC 246-918-080 Physician assistant—Requirements for licensure.

- Except for a physician assistant licensed prior to July 1, 1999, individuals applying to the commission for licensure as a physician assistant must have graduated from an accredited commission approved physician assistant program and successfully passed the NCCPA examination.
- An applicant for licensure as a physician assistant must submit to the commission:
 - A completed application on forms provided by the commission;
 - Proof the applicant has completed an accredited commission approved physician assistant program and successfully passed the NCCPA examination;
 - All applicable fees as specified in WAC [246-918-990](#);
 - Proof of completion of four clock hours of AIDS education as required in chapter [246-12](#) WAC, Part 8; and
 - Other information required by the commission.
- The commission will only consider complete applications with all supporting documents for licensure.
- A physician assistant may not begin practicing without written commission approval of a delegation agreement

Please visit <http://app.leg.wa.gov> for more information.

West Virginia

West Virginia Board of Medicine
101 Dee Drive
Charleston, WV 25311

Phone: (304) 558-2921

West Virginia Requirements

11-1B-3. Qualification and Application for Licensure to Practice as a Physician Assistant.

The Board's physician assistant licensure application form shall include, and applicants must provide, the following information:

- The applicant's name, e-mail address, home address, preferred mailing address and primary practice location address(es) and telephone numbers
- Demographic information of the applicant, such as date of birth, sex, etc.;
- A photograph taken within the previous twelve (12) months which substantially resembles the applicant;
- Documentation establishing that the applicant:
 - Obtained a baccalaureate or master's degree from an accredited program of instruction for physician assistants; or
 - Graduated from an approved program of instruction in primary health care or surgery prior to July 1, 1994; or
 - Was certified by the Board as a "Type B" physician assistant prior to July 1, 1983;
- Documentation that the applicant has passed the Physician Assistant National Certifying Examination administered by the NCCPA and is currently certified by the NCCPA;
- Documentation and/or certification which establishes that the applicant does not hold a physician assistant license, certification or registration in any jurisdiction which is currently suspended or revoked;
- Information with respect to the applicant's professional practice, character and fitness to practice as a physician assistant;
- Other information as determined by the Board which relates to whether the applicant is mentally and physically able to engage safely in practice as a physician assistant; and
- Any additional information identified by the Board for licensure

Please visit <https://wvbom.wv.gov> for more information.

Wisconsin

Department of Safety and Professional Services
1400 East Washington Avenue,
P.O. Box 8935,
Madison, Wisconsin 53708.

Phone: (608) 266-2112

Wisconsin Requirements

Med 8.05 Panel review of applications; examinations required

An applicant for examination for licensure as a physician assistant shall submit to the board:

- An application on a form prescribed by the board.
- After July 1, 1993, proof of successful completion of an educational program, as defined in ss. [Med 8.02 \(4\)](#) and [8.04](#).
- Proof of successful completion of the national certifying examination.
- Proof that the applicant is currently certified by the national commission on certification of physician assistants or its successor agency.
- The fee specified in s. [440.05 \(1\)](#), Stats.
- An unmounted photograph, approximately 8 by 12 cm., of the applicant taken no more than 60 days prior to the date of application which has on the reverse side a statement of a notary public that the photograph is a true likeness of the applicant

Please visit <https://dsps.wi.gov> for more information.

Wyoming

Wyoming Board of Medicine
130 Hobbs Avenue
Cheyenne, WY 82009

Phone: (307) 778-7053

Contact: wyomedboard@wyo.gov

Wyoming Requirements

Section 7. Eligibility for Licensure

The board may grant a physician assistant license to an applicant who:

- Is not less than 21 years of age
- Has graduated from a physician assistant training program accredited by the CAAHEP or its predecessor or successor organization
- Has satisfactorily completed a certification examination administered by the NCCPA or other national certifying agency established for such purposes which has been reviewed and approved by the board and is currently certified
- Physician assistants licensed by the board prior to July 1, 1995 are not required to be currently certified by the NCCPA and are not required to provide proof of current NCCPA certification with any of the applications submitted to the board described in Section 8 below.
- The board may recognize specialty classifications of training of physician assistants. These classifications shall reflect the training and experience of the physician assistant.
- The board may grant emeritus license to practice as a physician assistant under the supervision of a physician holding an active medical license in this state, which may be used for the provision of uncompensated physician assistant services

Please visit <https://rules.wyo.gov> for more information.