

(m) Any licensee advertising board certification in a specialty shall possess current certification by a specialty board or certifying entity. Specialty boards recognized by the American Board of Medical Specialties (ABMS), the American Osteopathic Association (AOA), and/or the American Podiatric Medicine Association (APMA) shall be approved by the Board and included in a list maintained by the Board. A licensee advertising board certification shall conspicuously specify in the advertisement the specific specialty board or certifying entity granting the certification (for example, the American Board of Psychiatry and Neurology, the American Board of Radiology, etc.), the national organization recognizing such specialty board or certifying entity (for example, ABMS, AOA, APMA, etc.), if any, and, if not included in the name of the specialty board or certifying entity itself, the field of medical or surgical specialty in which the certification was conferred.

(n) The requirements for testimonial advertisements are as follows:

1. All testimonials involving a specific or identifiable procedure shall truthfully reflect the actual experience of the patient and shall include the following conspicuously displayed statements:

i. "This procedure may not be suitable for every patient. All patients must be evaluated by a physician as to the appropriateness of performing the procedure".

ii. "The above testimonial represents the individual's response and reaction to the procedure; however, no medical procedure is risk-free. Associated potential risks and complications should be discussed with the physician rendering this procedure".

2. Where an advertiser directly or indirectly provides compensation to a testimonial giver, the fact of such compensation shall be conspicuously disclosed in a legible and readable manner in any advertisement in the following language: "COMPENSATION HAS BEEN PROVIDED FOR THIS TESTIMONIAL."

3. A physician who advertises through the use of testimonials shall maintain documentation relating to such testimonials for a period of three years from the date of the last use of the testimonial. Such documentation shall include, but not be limited to, the name, address and telephone number of the individual in the advertisement, the type and amount or value of compensation and a signed, notarized statement and release verifying the truthfulness of the information contained in the testimonial and indicating that person's willingness to have his or her testimonial used in the advertisement obtained prior to the time the testimonial is advertised.

4. Any guarantee of results from any procedure is prohibited.

(o) Nothing contained in this section shall be construed to prohibit the licensing board from adopting additional

rules concerning advertising by Board licensees. To the extent that any conflict or inconsistency may arise between the provisions of this section and any subsequently adopted rule dealing more specifically with the same subject matter as set forth, such subsequent adopted rule shall control.

R.1984 d.139, effective April 16, 1984.

See: 16 N.J.R. 32(a), 16 N.J.R. 921(a).

A rule entitled "Advertising and Solicitation" formerly at this cite was repealed and replaced.

Amended, R.1984 d.372, effective August 20, 1984.

See: 16 N.J.R. 1026(b), 16 N.J.R. 2286(a).

Subsection (m) new.

Amended by R.1986 d.467, effective December 1, 1986.

See: 18 N.J.R. 1788(d), 18 N.J.R. 2390(a).

Text added to (h) and (l).

Amended by R.1989 d.325, effective June 19, 1989.

See: 21 N.J.R. 696(a), 21 N.J.R. 1710(b).

In (a): deleted "Definitions" and added new 7 regarding graphic representation. Revised language throughout to modify an existing prohibition on use of testimonials, discounts and offering of free services.

Added new (c)11 and 12, deleting old (c)11.

Added new (g)1-8 and new (m) and (n), recodifying old "n" as new "o".

Amended by R.1994 d.329, effective July 5, 1994.

See: 26 N.J.R. 1219(b), 26 N.J.R. 2795(c).

Amended by R.1994 d.522, effective October 17, 1994.

See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

In (a)5, added a reference to the Internet.

Amended by R.2005 d.120, effective April 18, 2005.

See: 36 N.J.R. 4633(a), 37 N.J.R. 1203(a).

Rewrote (m).

Case Notes

Abstention; action by podiatrist association challenging constitutionality of regulation restricting medical professionals' advertising of board certification. *American Institute of Foot Medicine v. New Jersey State Bd. of Medical Examiners*, D.N.J.1992, 807 F.Supp. 1170.

Former N.J.A.C. 13:35-4.1 and 13:35-6.13 requiring degree designations on licenses and regulating advertising, respectively, held invalid as outside Board's authority under the Medical Practices Act. *Eatough v. Bd. of Medical Examiners*, 191 N.J.Super. 166, 465 A.2d 934 (App.Div. 1983).

13:35-6.11 Excessive fees

(a) The Board of Medical Examiners shall review information and complaints concerning allegations of excessive fees charged by licensees of the Board and may establish Excessive Fee Review Committees to perform various aspects of the review function. This regulation is not intended to impinge upon the strong public policy in favor of a competitive, free enterprise economy embodied in the anti-trust laws of the United States and of this State. Excessive Fee Review Committees shall consider comparable fees charged by licensees not under inquiry only to the minimum extent necessary to render a determination as to whether a fee is excessive.

(b) A licensee of the Board of Medical Examiners shall not charge an excessive fee for services. A fee is excessive when, after a review of the facts, a licensee of ordinary prudence would be left with a definite and firm conviction

that the fee is so high as to be manifestly unconscionable or overreaching under the circumstances.

(c) Factors which may be considered in determining whether a fee is excessive include, but are not limited to, the following:

1. The time and effort required;
2. The novelty and difficulty of the procedure or treatment;
3. The skill required to perform the procedure or treatment properly;
4. Any requirements or conditions imposed by the patient or by the circumstances;
5. The nature and length of the professional relationship with the patient;
6. The experience, reputation and ability of the licensee performing the services;
7. The nature and circumstances under which services are provided. Unless services are provided during an emergency or other circumstances where opportunity, custom and practice will preclude discussion prior to the rendition of such services, the licensee shall, in advance of providing services, specify or discuss and agree with the patient, the fee or basis for determination of the fee to be charged.

(d) Charging an excessive fee in violation of (b) above shall constitute professional misconduct subjecting the licensee to disciplinary action by the Board of Medical Examiners.

Amended by R.1989 d.532, effective October 16, 1989.
See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).
(c)4 deleted, 5-8 recodified to 4-7.

Case Notes

Physician found guilty by New York Board of Regents properly had New Jersey medical license revoked. In the Matter of the Suspension or Revocation of the License of Del Gizzo, 94 N.J.A.R.2d (BDS) 1.

13:35-6.12 (Reserved)

Amended by R.1989 d.532, effective October 16, 1989.
See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).
Superfluous language deleted from (f).
Repealed by R.1994 d.522, effective October 17, 1994.
See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).
Section was "Excessive fee review committees".

13:35-6.13 Fee schedule

(a) The following fees shall be charged by the Board of Medical Examiners:

1. Medicine and Surgery (M.D. or D.O. license)
 - i. Initial application fee \$325.00
 - ii. Initial registration fee
 - (1) If paid during the first year of a biennial renewal period 580.00

	(2) If paid during the second year of a biennial renewal period	290.00
iii.	N.J.S.A. 45:9-21(n)—exemption	225.00
iv.	N.J.S.A. 45:9-21(b)—temporary license	50.00
v.	Endorsement	225.00
vi.	Biennial registration	580.00
vii.	Biennial license for licensee over 65 without health care facility or HMO affiliation	125.00
viii.	Permit	50.00
2.	Podiatry (license)	
i.	Application fee	125.00
ii.	Examination	150.00
iii.	Initial registration fee	
	(1) If paid during the first year of a biennial renewal period	410.00
	(2) If paid during the second year of a biennial renewal period	205.00
iv.	Endorsement	150.00
v.	Biennial registration	410.00
vi.	Biennial license for licensee over 65 without health care facility or HMO affiliation	85.00
vii.	Permit	50.00
3.	Bioanalytical laboratory directorship, plenary license	
i.	Application fee	125.00
ii.	Examination	350.00
iii.	Exemption	150.00
iv.	Initial registration fee	
	(1) If paid during the first year of a biennial renewal period	270.00
	(2) If paid during the second year of a biennial renewal period	135.00
v.	Biennial registration	270.00
4.	Midwifery (license)	
i.	Application fee	125.00
ii.	Examination	50.00
iii.	Endorsement	50.00
iv.	Initial registration fee	
	(1) If paid during the first year of a biennial renewal period	270.00
	(2) If paid during the second year of a biennial renewal period	135.00
v.	Biennial license	270.00
vi.	Biennial prescriptive authorization (Certified Nurse Midwife)	50.00
5.	Physician assistant (license)	
i.	Application fee	\$125.00
ii.	Temporary license fee	50.00
iii.	Initial license fee	
	(1) If paid during the first year of a biennial renewal period	220.00
	(2) If paid during the second year of a biennial renewal period	110.00
iv.	License renewal fee, biennial	220.00
v.	Late renewal fee	100.00
vi.	Reinstatement fee	175.00
vii.	Duplicate license fee	40.00
viii.	Duplicate wall certificate	50.00
6.	General	
i.	Recording of name change and issuance of replacement license	50.00
ii.	Replacement of lost engrossed copy/certified true copy/biennial registration certificate	50.00
iii.	Preparation of certification papers for applicants to other states	50.00
iv.	Late renewal fee	100.00
v.	Reinstatement fee	175.00
vi.	Inactive license fee	(to be determined by Director by regulation)

New Rule, R.1983 d.510, effective November 7, 1983.
See: 15 N.J.R. 784(a), 15 N.J.R. 1865(e).
Deleted old fee schedule and added new fee schedule.
Amended by R.1985 d.223, effective May 6, 1985.

See: 17 N.J.R. 562(a), 17 N.J.R. 1132(a).

Substantially amended.

Amended by R.1987 d.201, effective May 4, 1987.

See: 19 N.J.R. 353(a), 19 N.J.R. 772(a).

Both components raised from \$300.00 to \$425.00; Component I raised from \$200.00 to \$250.00 and Component II raised from \$225.00 to \$300.00.

Amended by R.1987 d.371, effective September 8, 1987.

See: 19 N.J.R. 1054(a), 19 N.J.R. 1648(a).

Increased the biennial registration fee.

Amended by R.1989 d.532, effective October 16, 1989.

See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).

Biennial registration fee decreased from \$120 to \$60 and endorsement fee set at \$60.

Amended by R.1990 d.525, effective November 5, 1990.

See: 22 N.J.R. 1988(a), 22 N.J.R. 3384(a).

Medicine and surgery examination fees increased.

Amended by R.1991 d.286, effective June 3, 1991.

See: 23 N.J.R. 833(a), 23 N.J.R. 1815(a).

Added (a)1viii and (a)2v.

Deleted (a)2 [Chiropractic (license)]; redesignated existing (a)3 through 11 as (a)2 through 10.

Changed fees in (a)1 through 8.

Amended by R.1993 d.91, effective February 16, 1993.

See: 24 N.J.R. 4011(a), 25 N.J.R. 708(a).

Revised (a)1 through 4.

Amended by R.1993 d.92, effective February 16, 1993.

See: 24 N.J.R. 4334(a), 25 N.J.R. 709(a).

Added new (a)10; redesignated old (a)10 to (a)11.

Amended by R.1993 d.260, effective June 7, 1993.

See: 25 N.J.R. 1058(a), 25 N.J.R. 2487(a).

Amended by R.1993 d.299, effective June 21, 1993.

See: 24 N.J.R. 4013(a), 25 N.J.R. 2689(c).

Amended by R.1994 d.170, effective April 4, 1994.

See: 25 N.J.R. 4583(a), 26 N.J.R. 1520(a).

Administrative Correction.

See: 26 N.J.R. 2589(b).

Amended by R.1994 d.522, effective October 17, 1994.

See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).

Amended by R.1995 d.330, effective June 19, 1995.

See: 27 N.J.R. 640(a) (see also, 27 N.J.R. 1746(a)), 27 N.J.R. 2410(a).

Increased some of the fees.

Amended by R.1995 d.423, effective August 7, 1995.

See: 27 N.J.R. 1526(a), 27 N.J.R. 2959(a).

Added Physician Assistant temporary license fee at (a)8.ii.

Administrative correction.

See: 33 N.J.R. 1411(a).

Amended by R.2005 d.120, effective April 18, 2005.

See: 36 N.J.R. 4633(a), 37 N.J.R. 1203(a).

Rewrote the section.

Amended by R.2005 d.175, effective June 6, 2005.

See: 37 N.J.R. 206(a), 37 N.J.R. 1203(a), 37 N.J.R. 2041(b).

In (a), increased the fees in 1ii(1), 1ii(2), 1vi, 2iii(1), 2iii(2), 2v, 3iv(1), 3iv(2), 3v, 5iv(1), 5iv(2) and 5v.

Case Notes

Degree designation on license. *Eatough v. Albano*, 673 F.2d 671 (1982) certiorari denied 102 S.Ct. 2931, 457 U.S. 1119, 73 L.Ed.2d 1331, see: dissenting opinion.

Preliminary injunction against rule. *Davis v. Board of Medical Examiners*, 497 F. Supp. 525 (1980).

13:35-6.14 Delegation of physical modalities to a licensed health care provider or an unlicensed physician aide

(a) "Physician," for the purpose of this section, shall mean a doctor of medicine (M.D.), a doctor of osteopathic medicine (D.O.) or a doctor of podiatric medicine (D.P.M.).

1. "Licensed health care provider," for the purpose of this section, shall mean an individual holding a current, valid license in this State as a physical therapist, registered nurse, licensed practical nurse, physician assistant, chiropractor or athletic trainer.

(b) A physician may direct his or her unlicensed employee to administer to the doctor's patients certain physical modalities in the limited circumstances set forth in this section, without being in violation of the pertinent professional practice act implemented by the Board, to the extent such conduct is permissible under any other pertinent law or rule administered by the Board or any other State agency.

(c) A physician may direct a licensed health care provider with training and experience to administer to the physician's patients physical modalities including ultraviolet (B and C bands) and electromagnetic rays including, but not limited to, deep heating agents, microwave diathermy, shotwave diathermy, ultrasound, and those modalities listed in (d) below. The physician shall retain responsibility for examining the patient, determining the appropriate modalities, assessing training and experience, as well as providing the appropriate level of supervision consistent with practice standards, applicable to the specific licensed health care provider.

(d) A physician may direct an unlicensed aide to administer the following physical modalities: hot packs, cold packs, paraffin baths, contrast baths, and whirlpool baths. The aide shall not be permitted to perform any rehabilitative exercise programs. No other modalities including T.E.N.S. or traction shall be performed by the unlicensed physician's aide.

(e) A physician may direct the administration of an appropriate physical modality by an unlicensed assistant only where the following conditions are satisfied:

1. The doctor shall examine the patient to ascertain the nature of the trauma or disease; to determine whether the application of a physical modality will encourage the alleviation of pain and promotion of healing; to assess the risks of the modality for a given patient and the diagnosed injury or disease and to decide that the anticipated benefits are likely to outweigh those risks.

2. The doctor shall determine all the components of the precise treatment to be given at the present therapy session, including the type of modality to be used, extent of area to which it shall be applied, the length of treatment, and any other factors peculiar to the risks of that modality such as strict avoidance of certain parts of the body. This information shall be written on the patient's chart and made available at all times to the assistant carrying out the instructions. The doctor shall assure that the aide administering the treatment is identified in the patient chart on each such occasion.

3. The doctor shall ascertain a satisfactory level of education, competence and comprehension of the particular assistant, who shall be at least 18 years of age, to whom instruction has been given by the doctor as to modalities used in that office. The doctor shall prepare and maintain a written document certifying as to the instructions given to each assistant, and both doctor and assistant shall sign it.

4. The doctor shall see the patient prior to any subsequent scheduled application of the modality to ascertain that continued treatment is appropriate and that no contraindications to treatment have become apparent.

5. The doctor shall remain on the premises at all times that treatment orders are being carried out by the assistant and shall be within reasonable proximity to the treatment room and available in the event of emergency.

(f) A physician shall have due regard for the specialized training and experience of registered physical therapists, and of physiatrists and orthopedists. Injuries or diseases requiring prolonged treatment, if not administered personally by the doctor, shall normally be referred to a licensed physical therapist, to a physiatrist, orthopedist or other appropriate health care provider.

(g) A bill rendered for the limited consultation set forth in (d)4 above shall not exceed a sum which reasonably reflects the actual level of service, supervision and responsibility personally rendered by the doctor, and consistent with the factors listed in the rule prohibiting excessive fees, N.J.A.C. 13:35-6.11(b) and (c).

(h) On a health insurance claim form pertaining to such service and requiring certification by the doctor, the doctor shall specify the modality applied and shall not generically identify physical therapy.

New Rule, R.1985 d.159, effective April 1, 1985.

See: 16 N.J.R. 2065(a), 17 N.J.R. 836(a).

Amended by R.1989 d.532, effective October 16, 1989.

See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).

Requirements added that aides be identified on the patient Chart and that the aides be at least 18 years of age.

Amended by R.1994 d.522, effective October 17, 1994.

See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).

Case Notes

Rule was not ultra vires as to the Board of Medical Examiners on theory that authority rested solely with the Board of Physical Therapists. Matter of Promulgation of N.J.A.C. 13:35-6.14, 205 N.J.Super. 492, 501 A.2d 547 (App.Div.1985).

13:35-6.15 Continuing medical education

(a) The following words and terms, when used in this section, shall have the following meanings, unless the context clearly indicates otherwise:

“Category I” and “Category II” mean the categories of medical education courses recognized by the American Medical Association as credited toward the Physician Recognition Award, and those categories of medical education courses recognized by the American Osteopathic Association or the American Podiatric Medical Association.

“Licensee” means a physician or podiatrist licensed and subject to regulation by the Board of Medical Examiners (the “Board”).

(b) Except as provided in (b)1 and 2 and (c) below, a licensee applying for a biennial license renewal shall complete, in each biennial renewal period commencing with the biennial renewal period beginning on July 1, 2003, 100 continuing medical education credits in Category I or Category II courses, of which at least 40 of such credits shall be in Category I.

1. A licensee shall be required to complete 50 continuing medical education credits for the biennial renewal period beginning on July 1, 2003, if this section becomes effective on or before July 1, 2004, of which at least 20 credits shall be in Category I courses.

i. A licensee who completes credits in excess of the 50 continuing medical education credits required pursuant to (b)1 above may apply no more than 25 of the excess credits to the continuing medical education requirements for the following biennial period only.

2. A licensee shall be exempt from the continuing medical education requirements for the biennial renewal period beginning on July 1, 2003, if this section becomes effective after July 1, 2004.

(c) An applicant for initial licensure who has completed an accredited graduate medical education program within 12 months prior to licensure shall be exempt from the continuing medical education requirements of this section for the initial biennial period of licensure. Notwithstanding such exemption from the continuing medical education requirements, the applicant, once licensed by the Board, shall complete, within 24 months of becoming licensed, an orientation course which is presented or approved by the Board.

(d) A licensee shall certify on the application for biennial licensure renewal that he or she has completed the required number of continuing medical education credits. The Board may conduct random audits to determine licensee compliance with the continuing medical education requirements of this section.

(e) A licensee who completes credits in excess of the 100 continuing medical education credits required pursuant to this section may apply no more than 25 of the excess credits to the continuing medical education requirements for the following biennial period only.

“Mechanical stimulation” means stimulation of a certain acupuncture point or points on or near the surface of the body by means of apparatus or instrument.

“Moxibustion” means the therapeutic use of thermal stimulus at acupuncture loci by burning artemisia alone or artemisia formulations.

“Sterilize” or “sterilization” means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

“Supervising acupuncturist” or “supervisor” means a certified acupuncturist who is approved by the Board to provide an acupuncture tutorial to a trainee.

“Surface stimulation” means the application of purposeful stimuli to the surface of the body.

“Training agreement” means the written tutorial agreement between the supervisor and the trainee.

“Training plan” means the written tutorial plan that is filed with and approved by the Board.

“Training program” means and encompasses the agreement and the plan.

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Rewrote the section.

13:35-9.3 Credentials required for certification

(a) At the time of application, an applicant shall provide the following credentials:

1. Proof of having attained the age of 21, in the form of a certified copy of birth record;

2. Affidavits from two persons, unrelated to the applicant, attesting to the applicant’s moral character. The signatures on any affidavits emanating from foreign jurisdictions shall be authenticated as required by (a)5i(2) below;

3. Proof of possession of a baccalaureate degree as established by (a)3i and ii below;

i. If the candidate has been awarded a baccalaureate degree from a college or university within the United States, a certified transcript shall be forwarded directly to the Board from the educational institution, which shall have been accredited by a regional accreditation agency recognized by the Commission on Recognition of Post-Secondary Accreditation or the United States Department of Education;

ii. If the candidate has been awarded a baccalaureate degree from a school located outside the United States, which is recognized by the World Health Organization or any similar credentialing organization, the applicant shall submit to the Board an original of the applicant’s

transcript showing that a degree was awarded, and an evaluation of credits earned as determined by a Board-approved credential evaluation service. A list of such credential evaluation services shall be provided by the Board to an applicant upon request;

4. Applicants presenting a baccalaureate degree shall also provide evidence of graduation from a course of study or program at a school of acupuncture accredited by the Accreditation Commission for Acupuncture and Oriental Medicine or by the Commission on Recognition of Post-Secondary Accreditation or the United States Department of Education. Evidence shall consist of a certified transcript from that school confirming that a diploma was awarded to the applicant. A list of approved acupuncture schools shall be maintained by the Board and provided to an applicant upon request.

5. As an alternative to (a)3 and 4 above, an applicant shall provide evidence of either successful completion of a tutorial program in acupuncture which meets the requirements set forth in N.J.A.C. 13:35-9.13 or experience as defined in N.J.A.C. 13:35-9.2 acquired prior to January 18, 1986.

i. Acceptable proof of experience shall include letters from past or present employers written to the Board on professional letterhead, which must be sent directly to the Board from the employer or the appropriate official at that office or institution. Such letters must clearly establish that the business existed and was offering acupuncture service during the period of time in question.

(1) When a letter from an employer, office or institution does not clearly and credibly indicate the required experience, the Board may at its discretion require that the applicant submit patient records of 750 treatment sessions or such other proof as the Board deems necessary.

(2) The signature(s) on letters of documentation emanating from foreign jurisdictions must be properly notarized and authenticated by an appropriate governmental official.

ii. If the applicant was self-employed, original patient records which clearly indicate the required 750 patient treatment sessions shall be submitted to the Board; such records shall be legible and well-organized. The Board may require records to be translated into English at the expense of the applicant; and

6. If the applicant is a physician or surgeon, the applicant shall submit, in addition to the documentation required by (a)1 and 2 above, proof that the applicant holds a current plenary license and registration to practice medicine or surgery.

(b) Any credentials required to be submitted pursuant to (a) above which are written in a language other than English

shall be accompanied by an English translation prepared by a Board-approved translation service at the applicant's expense. A list of such translation services shall be provided by the Board to an applicant upon request. Translations by any other services or persons shall not be accepted.

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Rewrote the section.

13:35-9.4 Examination requirements

(a) An applicant shall pass the comprehensive written examination (CWE) and the clean needle technique (CNT) examination, written in English, developed by the National Certification Commission for Acupuncture and Oriental Medicine ("NCCAOM").

(b) An applicant shall pass a practical examination administered by the Board.

(c) All applicants who have received their acupuncture education at a school taught in a language other than English shall pass a test of spoken English (TSE) examination administered by the Education Testing Service (ETS). The applicant shall attain a score of 50.

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Rewrote the section.

13:35-9.5 Prohibited titles

(a) A person who has not met the requirements of the Acupuncture Act, N.J.S.A. 45:2C et seq., or this subchapter shall not practice as, or hold himself or herself out as, an acupuncturist.

(b) Acupuncturists shall not use the designations "DOM" (doctor of Oriental medicine), "OMD" (Oriental medical doctor), or "DTCM" (Doctor of traditional Chinese medicine).

(c) Physicians, surgeons, or dentists approved for the practice of acupuncture pursuant to the Act and this subchapter shall not use the title "acupuncturist," "certified acupuncturist," or "CA."

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Rewrote the section.

13:35-9.6 Fee schedule; refunds

(a) The Board shall charge the following fees:

1. Application Fee	\$ 50.00
2. Examination, Oral/Practical	\$225.00
3. Examination, Written	\$350.00
4. Initial Registration Fee	
i. If paid during the first year of a biennial renewal period	\$270.00
ii. If paid during the second year of a biennial renewal period	\$135.00
5. Biennial Registration	\$270.00

6. Duplicate or replacement of biennial certificate	\$ 25.00
7. Late Fee (biennial certification)	\$ 50.00
8. Inactive Certificate Fee	(to be determined by Director by regulation)
9. Reinstatement Fee	\$150.00
10. Tutorials:	
i. Supervisor:	
(1) Application Fee	\$ 50.00
(2) Initial Registration	\$125.00
(3) Renewal, Annually	\$125.00
(4) Delinquency Fee	\$ 50.00
ii. Trainee:	
(1) Application Fee	\$ 25.00
(2) Initial Registration	\$ 60.00
11. Preparation of certification papers for applicants to other states	\$ 25.00

(b) The examination fee will be refunded only if the application is rejected by the Board or withdrawn by the candidate within 14 days of receipt of the application by the Board.

(c) After the 14-day period in (b) above, an applicant who fails to sit for an examination for which payment has been submitted may, one time only, have the fee credited toward the next scheduled examination. The fee will be entirely forfeited if the applicant fails to sit for the succeeding examination.

(d) The application fee is non-refundable.

Amended by R.1995 d.330, effective June 19, 1995.

See: 27 N.J.R. 640(a) (see also 27 N.J.R. 1746(a)), 27 N.J.R. 2410(a).

Increased some of the fees.

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

In (a), rewrote the introductory paragraph, and substituted a reference to late fees for a reference to delinquency fees in 7.

Amended by R.2005 d.120, effective April 18, 2005.

See: 36 N.J.R. 4633(a), 37 N.J.R. 1203(a).

Rewrote the section.

Amended by R.2005 d.175, effective June 6, 2005.

See: 37 N.J.R. 206(a), 37 N.J.R. 1203(a), 37 N.J.R. 2041(b).

In (a), increased the fees in 4 and 5.

13:35-9.7 Biennial certificate renewal; certificate suspension; reinstatement of suspended certificate; inactive status; return from inactive status; display of certificate

(a) All certificates to practice acupuncture issued by the Board shall be issued for a two-year biennial certification period. A certificate holder who seeks renewal of the certificate shall submit a renewal application and the renewal fee set forth in N.J.A.C. 13:35-9.6 prior to the expiration date of the certificate.

(b) The Board shall send a notice of renewal to each licensee at the address registered with the Board at least 60 days prior to the expiration of the license. If the notice to renew is not sent at least 60 days prior to the expiration date, no monetary penalties or fines shall apply to the holder for failure to renew.

(c) If a certificate holder does not renew the certificate prior to its expiration date, the certificate holder may renew the certificate within 30 days of its expiration by submitting a renewal application, a renewal fee and a late fee, as set

forth in N.J.A.C. 13:35-9.6. During this 30-day period, the certificate shall be valid, and the certificate holder shall not be deemed to be engaged in unauthorized practice.