

**CERTIFICATION OF EMERGENCY RULES
FILED WITH THE
LEGISLATIVE SERVICES AGENCY
OTHNI LATHRAM, DIRECTOR**

Pursuant to Code of Alabama 1975, §§41 22 5(b) and 41 22 6(c) (2)a. and b.

I certify that the attached emergency amendment is a correct copy as promulgated and adopted on Friday, May 23, 2025.

AGENCY NAME:	Alabama Board of Nursing
RULE NO. AND TITLE:	610-X-8-.11 Reinstatement Of A Revoked License, Multistate Licensure Privilege, Permit, Certificate Or Approval
EXPIRATION DATE OF RULE:	Saturday, September 20, 2025
NATURE OF EMERGENCY:	The emergency rule is needed to rapidly amend existing rules to remove barriers to return to practice for nurses who have substantially met requirements which might be imposed by the board following revocation of the license.
STATUTORY AUTHORITY:	34-21-25(j)
SUBJECT OF RULE TO BE ADOPTED ON A PERMANENT BASIS:	Yes
NAME, ADDRESS, AND TELEPHONE NUMBER OF PERSON TO CONTACT FOR COPY OF RULE:	Honor Ingels honor.ingels@abn.alabama.gov (334) 293-5200

Peggy Benson

Peggy Benson, AL

Signature of officer authorized
to promulgate and adopt rules and
regulations or his or her deputy

REC'D & FILED

MAY 23, 2025

LEGISLATIVE SVC AGENCY

**Reinstatement Of A Revoked License, Multistate
Licensure Privilege, Permit, Certificate Or
Approval.**

(1) Application for reinstatement of a revoked license, permit, approval, or certificate may be made twelve (12) months after the effective date of the revocation unless otherwise specified in the Order ~~or Agreement~~.

(2) Applications for reinstatement of a revoked license, permit, certificate, , or ~~approval~~ approval shall include:

(a) The non-refundable application fee.

(b) Detailed letter of explanation regarding the circumstances that resulted in the revocation of the license, permit, certificate, , or approval and actions the applicant has taken to address the issue.

(c) Documented evidence of continuing education requirements for reinstatement of a lapsed license, permit, certificate, , or approval.

(d) Verification of the status of all ~~heath~~ health-care related licenses, permits, ~~certificate~~ certificates, approvals, and registrations from each jurisdiction/entity where a license, permit, certificate, approval, , or registration has ever been issued and certified copies of any disciplinary order(s) issued by any jurisdiction/entity where a license, permit, certificate, approval, , or registration has ever been issued.

(e) ~~Five (5)~~ Three (3) affidavits from persons who are not related to the applicant and who have direct knowledge of the circumstances surrounding the revocation of the license, permit, certificate or approval and the actions the applicant has taken to address the issue.

(f) If the applicant's license, permit, certificate, , or approval was revoked while the applicant's license, permit, certificate, , or approval was on probation or ~~was~~ suspended, the applicant shall provide documented evidence regarding efforts to comply with any previously stipulated terms of a Board Order ~~or agreement~~. Any unpaid fine, pursuant to a previous Order of the Alabama Board of Nursing, must be paid prior to approval of the application by the Board.

(g) If the circumstances that resulted in the revocation of the license, permit, certificate, or approval involved allegations of substance abuse, , substance dependence, or drug diversion, or if the license was revoked while encumbered by an order ~~requiring a~~

~~program of random drug screening~~ or agreement containing substance use disorder stipulations (i.e. evaluation, treatment, aftercare, etc.), the applicant shall provide:

1. ~~Documented~~ Complete results of drug screens obtained from participation in a Board-recognized program of random drug testing for a minimum of six (6) months immediately prior to the date of the application and documented evidence of a comprehensive substance use disorder evaluation and fitness to return to the practice of nursing conducted by a Board-recognized treatment provider whose program includes a health care ~~professionals tract~~ professionals' track and completed no more than twelve (12) months prior to the date of the application. The provider must indicate support for the applicant's return to the practice of nursing.

~~42. Evidence of compliance with all treatment provider recommendations~~ If the applicant meets the criteria established in paragraph (g), but the applicant has been monitored by another nursing regulatory authority for conduct that is the same, or significantly similar to, the conduct resulting in the applicant's revocation of their Alabama license, permit, certificate, or approval, and the applicant successfully completed all requirements of said monitoring program, the applicant may:

a) submit a copy of the Order from the other nursing regulatory authority and official notification of successful completion.

~~3. Complete~~ (i) Upon review, the Alabama Board of Nursing may deem the application complete without the requirement of paragraph (g) (1) above.

(h) If the circumstances that resulted in the revocation of the license, permit, certificate, or approval do not meet the requirements of (g), but the license, permit, certificate or approval was revoked while encumbered by an order requiring a program of random drug screening, the applicant shall provide complete results of drug screens obtained from participation in a Board-recognized program of random drug testing for a minimum of ~~twelve (12)~~ three (3) months immediately prior to the date of the application.

~~(h)~~ (i) If the circumstances that resulted in the revocation of the license, permit, certificate, or approval involved allegations of physical or mental impairment, the applicant shall provide:

1. Documented evidence of current neuropsychological and physiological evaluations.

2. Compliance with all treatment provider recommendations.
3. A statement from the evaluators that the individual is fit to return to the practice of nursing.

~~(i)~~ (j) Executed releases authorizing the sharing of information between and communication with all necessary mental health providers, substance use disorder treatment providers, healthcare providers, and Board staff.

~~(j)~~ (k) Submission of results of all required evaluations conducted by a Board acceptable licensed healthcare provider in consultation with Board staff.

~~(k)~~ (l) If the applicant has any arrest(s) that resulted in pending misdemeanor or felony charges, the applicant shall provide:

1. A detailed letter of explanation regarding the circumstances surrounding the charges.
2. The nature of the charges.
3. The case number.
4. The jurisdiction in which the charges are pending.

~~(l)~~ (m) If the applicant has any misdemeanor or felony conviction(s) or has (regardless of court disposition) entered a plea of guilt, nolo contendere, no contest, not guilty by reason of insanity, ~~or~~

other similar plea, or stipulated to a prima facie case, the applicant shall provide:

1. Certified copies of court records including the Case Action Summary showing the final disposition of the charges.
2. Any written Plea Agreement or Deferred Prosecution Agreement.
3. Documentation of compliance with conditions imposed by the Court.

~~(m)~~ (n) If the applicant has been administratively discharged from any branch of the armed services with any characterization besides "Honorable" or has been court-martialed, the applicant shall provide a detailed letter of explanation and official documentation of discharge (typically, a DD214 Members 4 copy).

~~(n)~~(o) For every period of employment since revocation of the applicant's Alabama license, permit, certificate, or approval, the applicant shall provide:

1. The name, address, and telephone number of any employer.
2. The name of any supervisor.
3. The dates of employment.
4. Job title.
5. Description of job duties.
6. Reason for leaving said employment.

(3) Applications for reinstatement of a revoked license, permit, certificate, or approval are incomplete until all of the information required to be provided pursuant to this rule has been submitted. The Board ~~may~~shall not consider incomplete applications.

(4) Applications for reinstatement of a revoked license, permit, certificate, or approval may be resolved ~~either informally~~through informal disposition or through the administrative hearing process.

(5) In considering reinstatement of a revoked license, permit, certificate, or approval, the Board may evaluate factors that include, but are not limited to:

- (a) Severity of the act(s) that resulted in revocation of the license.
- (b) Conduct of the applicant subsequent to the revocation of license.
- (c) Lapse of time since revocation.
- (d) Compliance with all reinstatement requirements stipulated by the Board.
- (e) Rehabilitation attained by the applicant as evidenced by statements or evaluations provided directly to the Board from qualified individuals ~~who have professional knowledge of the applicant~~.
- (f) Whether the applicant is in violation of any applicable statute or rule.

(6) Any applicant for reinstatement of a revoked multistate licensure privilege must first demonstrate an active, unencumbered license in his or her home state. The Board may, in its discretion, require the applicant for reinstatement of a revoked multistate licensure privilege, to comply with the requirements of this section.

Author: Alabama Board of Nursing

Statutory Authority: Code of Ala. 1975, §34-21-25(j).

History: Filed September 29, 1982. **Repealed and New Rule:** Filed January 29, 2002; effective March 5, 2002. **Amended:** Filed July 22, 2005; effective August 26, 2005. **Repealed and New Rule:** Filed May 21, 2010; effective June 25, 2010. **Amended:** Filed June 24, 2014; effective July 29, 2014. **Amended:** Filed July 26, 2019; effective September 9, 2019; operative January 1, 2020. **Amended:** Published July 31, 2024; effective September 14, 2024. **Amended (ER):** Filed May 23, 2025; effective May 23, 2025; expires 120 days, September 20, 2025.