

State of Maine
BOARD OF OSTEOPATHIC LICENSURE
State House Station #142
Augusta, Maine 04333
Tel: (207) 287-2480

Applying for a Permanent License to Practice Osteopathic Medicine in Maine

The Maine Board of Osteopathic Licensure is responsible for ensuring the health and safety of the public of this State. Through the licensing process, the Board provides assurance that each physician has received his/her degree from an accredited college of osteopathic medicine, has received the appropriate level of training and that no cause exists that would be a basis for disciplinary action of a licensed physician.

Your application must be submitted no less than 90 days prior to the Board meeting at which you would like it to be considered. The Board meets on the second Thursday of each month. See the left sidebar at <http://www.maine.gov/osteo/administrative/> for a list of meeting dates.

Your licensure application packet must include the following:

- Completed Uniform Application and addendum.
- Check or money order only (made payable to Maine Board of Osteopathic Licensure) in the amount of \$350 (non-refundable). Do not send cash. Credit cards are not currently accepted.
- Any other necessary documentation.

Incomplete applications or those without the fee or required documents will not be processed. Applications will not be reviewed by the Board until such time as a minimum of 2 references (obtained independently, by the Board) have been received.

Please do not contact the Board office for an application update for at least 30 days. After the 30 days, update requests should be submitted via e-mail to osteo.pfr@maine.gov

The Federation Credentials Verification Service (FCVS)

The Federation of State Medical Boards (FSMB) is a national non-profit organization representing the 70 medical and osteopathic boards of the United States and its territories. Two of the services provided are the Uniform Application for Physician State Licensure (UA) and the Federation Credentials Verification Service (FCVS).

FCVS staff verifies primary source documents related to your identity, education, training, and more, creating a personalized profile that eliminates the re-verification of items that never change. Your profile can be updated and sent to additional boards as needed.

We recommend that you use FCVS for credentials verification but it is not required for licensure. If you do not use FCVS, you must provide your credentials directly to the board for verification. If you use FCVS, you will still need to complete the UA, but you will not need to complete several of the UA verification forms.

To work on the initial FCVS application for creating a profile or the subsequent credentials application for updating an existing profile, visit <http://www.fsmb.org/> and select "FCVS" in the Sign In menu, then sign in as directed. For assistance, use the messaging tool within FCVS or call 888-275-3287 with your FCVS ID number between 8am and 5pm CT Monday through Friday.

The Uniform Application for Physician State Licensure (UA)

We are pleased to offer the UA as an option for physicians seeking licensure. After completing the UA for the first time, your application is securely stored and can be sent to another participating board as long as the forms and state-specific requirements are also completed for each board. Updates to the UA can be made as needed.

To work on the Uniform Application, visit <http://www.fsmb.org/> and select “Uniform Application (UA)” in the Sign In menu, then sign in as directed.

If you use FCVS, you can pre-populate most of your UA with data from your FCVS profile by selecting option 2 on the Recommended Path to Licensure page. If option 2 is not there and you have submitted a new FCVS application, wait several days for data processing, then go to the Navigation Options menu in the upper right corner of the UA and select “UA Main.” Reselect the Board on the map page, then select option 2 and continue.

For assistance with the UA, visit the FAQ at <http://www.fsmb.org/licensure/uniform-application/faq>. If your issue is not listed, contact UA customer service at 800-793-7939 or ua@fsmb.org with your username and FCVS ID if you are using FCVS.

Completing the Uniform Application

Please read the following information carefully before completing and submitting your application. You will be asked to provide your licensure and employment history, account for all time since medical school graduation, and provide any information on medical malpractice claims. We recommend having this information on hand before you begin working on your UA.

Note the information and instructions appearing in light blue at the beginning of each section; this information will instruct you on how to complete each page as well as list any documentation that will need to be submitted to the Board. Also utilize the checklist at the end of these instructions to ensure that you have submitted all necessary documentation. Failure to submit all required information and documentation will result in delays.

Any changes to fields shaded in gray must happen in FCVS. Complete a subsequent credentials application with FCVS and make sure the Board has been designated to receive your FCVS profile.

Full Name; Alternate Names; Address/Phone; Identification

- If you are using FCVS, you may need to enter a home email address. You will need to enter all 9 digits of your social security number as FCVS transfers only the last 4 digits.
- If you indicate on the UA that you have ever used an alternate name or your name is not the same on all of your submitted documents, you must submit a certified copy of your marriage certificate, divorce decree, court order, or other document that indicates your legal name change. If you are using FCVS, they will verify your alternate name and forward documentation to the board on your behalf.

Medical School, Fifth Pathway, Postgraduate Training

- If you are not using FCVS, you must complete the Medical School Verification form, the Fifth Pathway Verification form (if applicable), and the Postgraduate Training Verification form (Forms 2-4 in the Forms & Affidavits section later in the UA).
- You may leave the Fifth Pathway page blank if you did not go through a Fifth Pathway program.

Examination History

- This page can be pre-populated with your FCVS information. Contact FCVS to make changes to any grayed out field. The updated information will transfer into the UA the next time you log into the UA.

- If you are using FCVS, they will obtain your exam score transcripts and forward them to the board on your behalf. If you are not using FCVS, you will need to contact the appropriate examination entity to have a certified transcript of your scores sent directly to the Board.
 - USMLE/FLEX/SPEX: Request transcripts at <http://www.fsmb.org/> by selecting “USMLE Transcripts” in the Sign In menu, then signing in as directed. For questions or assistance, email usmle@fsmb.org or call 817-868-4041. Applicants who took the FLEX exam may be required to take an exam in Osteopathic Practices & Principles. Contact the Board office at 207-287-2480 or osteop.pfr@maine.gov for more information.
 - NBOME/COMLEX-USA: Request that a certified copy of your official transcript be sent directly to this office at <http://www.nbome.org/transcript-request.asp?m-can>. For questions or assistance, call 773-714-0622 or email transcripts@nbome.org.
 - State Board Exam: Request certified scores directly from the state board. There may be a fee. A directory of state boards is located at <http://www.fsmb.org/policy/contacts>.

Educational Commission for Foreign Medical Graduates (ECFMG)

- Please skip this page.

State or Professional Licensure

- List all other professional licenses you have held (nurse, EMT, etc.) in the U.S. or Canada, whether active or inactive. Send the Licensure Verification Form #1 to these boards as well.
- If you are applying for a special or temporary license and hold licenses in countries outside the U.S. or Canada, please provide that information on this page. Enter the name of the country in the “Specify if Other” box.

Chronology of Activities

- If the Type of Activity you choose is a non-working activity (Health Activity, Military Service, Seeking Employment, or Vacation), you must fill out the next field, otherwise there will be a blank area in your UA. Instead of typing in a Practice/Employment Name, describe the non-working time as indicated by your selection (for example, enter “vacation” if you selected “Vacation”).

Malpractice Liability Claims Information

- Indicate in the “specifics” section whether each claim or suit involved the death of a patient, wrong sided surgery or loss of limb/major organ.
- You must also provide a copy of the documents related to each claim or suit. Submit these with the addendums.
- If the status of a suit is pending, submit a copy of courts’ Complaint and a letter from your attorney indicating the status of the case. If the status of a suit is dismissed, submit a copy of the courts’ Dismissal Order. If the status of a suit is settled, submit a copy of courts’ Complaint, Final Disposition, and Settlement/Release.

Forms & Affidavit Section

Print the forms listed in this section and follow the instructions for each form. Each form must be returned to the Maine Board of Osteopathic Licensure. Do not return any forms to the Federation of State Medical Boards. Doing so will cause a delay in your application process.

- Affidavit and Authorization for Release of Information: Please read this form carefully. Attach a recent (less than 6 months old) two inch by two inch (2” x 2”) passport quality, color photograph of yourself (head and shoulders only) in the space provided. Proof photos, negatives, and digital photos are not acceptable. This form must be notarized and returned to the Maine Board of Osteopathic Licensure.

- Form #1: Licensure Verification Form: Refer to the Licensure Verification Information resource at <http://www.fsmb.org/licensure/uniform-application/> to determine fees and preferred verification method of each verifying board. UA Form #1 should be used for boards needing written requests. You may use VeriDoc (<https://www.veridoc.org/>) or a board's preferred electronic verification method in lieu of Form #1.

If you are using FCVS, you will not need to complete the remaining forms. FCVS will obtain this information and forward it on your behalf.

- Form #2: Medical School Verification: If you are not using FCVS, complete this form as instructed on the form. If transcripts are not in English, an original, certified and official English translation is required.
- Form #3: Postgraduate Training Verification: If you are not using FCVS, complete this form as instructed on the form.
- Form #4: Fifth Pathway Verification: This form is not needed by the Maine Board of Osteopathic Licensure.
- State Addendum: Complete as instructed.

Review & Submit

- Please review all of your entries before submitting. We strongly advise that you print a copy for your records. Any formatting errors will be listed in a red-outlined box with a link to the page that needs to be corrected. You will need to make the corrections before submitting your UA.
- To submit your UA, read and accept the Terms and Conditions, then click on "Submit Application" at the bottom of the screen. Once you submit your UA, no changes can be made to that particular application.
- To make changes to an already submitted application, click on the "Start New/Edit" in the yellow box at the top of the screen. If the box is not there, go to the Navigation Options drop down list in the upper right corner and select "UA Main." Reselect the Board from the map, make changes as needed, and resubmit your UA.
- First time UA users will be required to pay a one-time service charge of \$50. This is a separate fee from FCVS. An itemized receipt will be in the Navigation Options drop down list in the upper right corner.

After completing the online application, you are responsible for submitting certain documents. Please use the checklist at the end of these instructions that applies to you.

Other Licensure Requirements

National Practitioner Data Bank Self Query

- Visit <https://www.npdb.hrsa.gov/ext/selfquery/SQHome.jsp> and begin the process for the Self-Query. Follow all instructions given. After your Self-Query has been processed by the NPDB, they will send the Self Query report directly to you. You must first open this report to make sure that the results were not rejected and all information submitted is correct. Forward all parts of this report directly to our office for final review. For questions or assistance, call 800-767-6732 or email help@npdb.hrsa.gov.

Physician Profile Data Report from AOA

- Request the AOA Official Osteopathic Physician Profile Report at <https://www.doprofiles.org>. For questions or assistance, email credentials@osteopathic.org.

Uniform Application for Physician State Licensure Checklist

After completing the online application, you are responsible for submitting certain documents. Please use the checklist that applies to you (not using or using FCVS to verify credentials).

	Not Using FCVS	Using FCVS
Completed online Uniform Application and state addendum.	<input type="checkbox"/>	<input type="checkbox"/>
Sent addendum, application fee, and any other required documentation to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	<input type="checkbox"/>
Sent notarized Affidavit and Authorization for Release of Information form to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	<input type="checkbox"/>
Completed licensure verification with each state board with which you have ever held any healthcare license.	<input type="checkbox"/>	<input type="checkbox"/>
FLEX exam takers only: Contacted the Maine Board of Osteopathic Licensure about the exam in Osteopathic Practices & Principles.	<input type="checkbox"/>	<input type="checkbox"/>
Sent National Practitioner Data Bank report to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	<input type="checkbox"/>
Sent Physician Profile Data Report from the American Osteopathic Association (AOA) to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	<input type="checkbox"/>
Sent notarized copy of birth certificate or current, valid passport to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	Completed via FCVS
Sent supporting documentation of any legal name change to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	Completed via FCVS
Sent Medical School Verification form (Form #2) and a copy of your diploma to each medical school attended.	<input type="checkbox"/>	Completed via FCVS
Sent Postgraduate Training Verification form (Form #3) to all training programs attended.	<input type="checkbox"/>	Completed via FCVS
Sent a copy of your postgraduate training certificate(s) to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	Completed via FCVS
Sent all examination transcripts to the Maine Board of Osteopathic Licensure.	<input type="checkbox"/>	Completed via FCVS