

HEALTH CARE PROVIDER	ACTION NEEDED – FACILITY	ACTION NEEDED - TELEHEALTH	ACTION - OTHER SITE
<b>CURRENTLY LICENSED IN VT</b>	None	None	None
<b>STUDENT IN VT WHO COMPLETED STUDY BUT UNABLE TO TAKE EXAM DUE TO COVID-19</b>	Apply for temporary license through Board or OPR	Same	Same
<b>RETIRED WITHIN LAST 3 YEARS AND HAD VERMONT LICENSE IN GOOD STATNDING AT TIME OF RETIREMENT</b>	Deemed if working at facility—send name, contact info, locations of practice to Board or OPR	Deemed for telehealth - send name, contact info, locations of practice to Board or OPR	Apply for temporary license through Board or OPR
<b>RETIRED MORE THAN 3-10 YEARS AGO AND HAD VERMONT LICENSE IN GOOD STATNDING AT TIME OF RETIREMENT</b>	Apply for temporary license through Board or OPR	Same	Same
<b>CURRENTLY LICENSED OUT-OF-STATE (INCLUDING RESIDENT TRAINEE PHYSICIANS)</b>	Deemed if working at facility—send name, contact info, locations of practice to Board or OPR	Deemed licensed – no further action needed	Apply for temporary license through Board or OPR
<b>OUT-OF-STATE AND RETIRED WITHIN LAST THREE YEARS</b>	Not eligible	Same	Same
<b>OUT-OF-STATE AND RETIRED MORE THAN 3-10 YEARS AGO</b>	Not eligible	Same	Same
<b>PHYSICIAN ASSISTANT</b>	Board can waive supervision & scope of practice requirements including supervisory agreement	Same	Same
<b>APRN</b>	OPR can waive transition to practice requirement	Same	Same