

Department of Legislative Services
Maryland General Assembly
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FISCAL AND POLICY NOTE

House Bill 1339 (Delegate Stein)
Environmental Matters

Drivers' Licenses - Disorder, Disease, or Physical Disability - Defining and Reporting

This bill repeals the authorization for a “physician and any other person authorized to diagnose, detect, or treat disorders” to report to the Medical Advisory Board within the Motor Vehicle Administration (MVA) and specifies that this authorization applies to any “health care professional,” which is defined by the bill with reference to nine types of health care professionals. The bill also repeals the general prohibition on reporting information derived from a medical diagnosis or treatment subject to a confidential or privileged relationship, and instead limits this prohibition to reports made by psychiatrists, licensed psychologists, or psychiatric-mental health nursing specialists that are subject to specified provisions of law. Finally, the bill requires the Department of Health and Mental Hygiene (DHMH), together with the Medical and Chirurgical Faculty and the State Board of Examiners in Optometry, to define any diseases or physical disabilities that may render an individual unable to exercise reasonable control over a motor vehicle.

Fiscal Summary

State Effect: Transportation Trust Fund (TTF) revenues decrease to the extent that additional drivers become ineligible for a license as a result of greater reporting of conditions that disqualify individuals for licensure and to the extent that additional disqualifying conditions become listed; it is unclear when and to what extent TTF revenues decrease. Expenditures are not affected, as both MVA and DHMH can implement the bill with existing budgeted resources.

Local Effect: The bill is not anticipated to directly affect local operations or finances.

Small Business Effect: Minimal.

Analysis

Bill Summary: The bill defines a “health care professional” as a physician, physician assistant, nurse, nurse practitioner, licensed certified social worker (as defined under a specified law), licensed psychologist (as defined under a specified law), psychiatrist (as defined under a specified law), psychiatric-mental health nursing specialist (as defined under a specified law), or paramedic.

Current Law: Any physician or other person authorized to diagnose, detect, or treat disorders characterized by lapses of consciousness or disorders that result in a corrected visual acuity that fails to comply with the vision requirements of the Motor Vehicle Law may report individuals with such disorders who are age 15 and older to the board. DHMH, together with the Medical and Chirurgical Faculty and the State Board of Examiners in Optometry, is required to define these disorders. On receipt of a report, MVA is required to arrange for the examination of the reported individual as soon as practicable and, if the individual fails to meet the requirements for a driver’s license, cancel the license.

No report to the board may be made in violation of a confidential or privileged relationship conferred by law. Unless a confidential or privileged relationship is violated, no legal action may be taken against a person who makes a report, and no report may be used as evidence in any civil or criminal trial.

Background: Appointed by the Motor Vehicle Administrator, the Medical Advisory Board consists of qualified physicians of various specialties who advise the administrator on medical aspects of driver licensing. The Medical Advisory Board currently lists 20 disorders that require further medical review before board approval may be granted to license or reinstate an applicant. When examining an individual who has one of these disorders, the board examiners take many factors into consideration before determining whether to approve the individual for licensure.

The physical and mental fitness to drive, particularly of older individuals, has become a significant issue for state legislatures and departments of motor vehicles. According to the National Conference of State Legislatures (NCSL), people age 65 or older comprise 12% of the population of the United States as of February 2013, and this share is expected to double by 2030. NCSL also reports that, in 2013, 18 states considered 40 bills on issues related to driving by older individuals; it is unknown how many bills regarding driving by individuals with other medical conditions were considered. According to the Insurance Institute for Highway Safety (IIHS), drivers age 70 and older have higher crash rates per mile traveled than middle-aged drivers, although rates are not as high as for young drivers; IIHS also notes that the number of older drivers involved in fatal collisions has decreased.

The National Highway Traffic Safety Administration has issued guidelines for medical advisory boards regarding driver's licensing review. Among many recommendations, the guidelines recommend that statutes should not be written to define or limit the medical specialties or types of professionals who comprise a medical advisory board; departments of motor vehicles should consider physicians, other medical specialists, and law enforcement as expert sources; reports from nonexpert sources should remain confidential; and a department of motor vehicles should be exempt from open records laws in states.

State Revenues: As noted, the bill may result in the disqualification of additional drivers from licensure and the ability to operate a motor vehicle, which, consequently, results in fewer revenues associated with the operation of motor vehicles. A reliable estimate of any decrease in TTF revenues cannot be made due to considerable uncertainty regarding future decisions of the Medical Advisory Board, DHMH, the Medical and Chirurgical Faculty, and the State Board of Examiners in Optometry, as well as the effect of the bill on the reporting of diseases, disorders, and physical disabilities to the Medical Advisory Board. However, according to MVA data, each driver paid, on average, about \$165 in fiscal 2013 in driver's licensing, vehicle registration, and other charges unrelated to the purchase of a vehicle to MVA for distribution to TTF. Including revenues associated with the purchase of a vehicle, MVA collected about \$355 per driver in fiscal 2013. Thus, TTF revenues decrease significantly to the extent that the bill results in the cancellation of a significant number of driver's licenses. For example, if the bill results in the cancellation of driving privileges for at least 300 individuals each year, then TTF revenues (based on fiscal 2013 data of all motor vehicle-related charges collected) may decrease by more than \$100,000 annually.

General fund revenues may also increase as a result of any additional penalties imposed for driving without a license. Any such increase is expected to be minimal.

Additional Information

Prior Introductions: None.

Cross File: Although designated as a cross file, SB 807 (Senator Raskin - Judicial Proceedings), is different.

Information Source(s): Department of Health and Mental Hygiene, Maryland Department of Transportation, National Conference of State Legislatures, Insurance Institute for Highway Safety, National Highway Traffic Safety Administration, Department of Legislative Services

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Analysis by: Evan M. Isaacson

Direct Inquiries to:
(410) 946-5510
(301) 970-5510