HOUSE BILL 576

By: Delegates K. Young, Bagnall, Boyce, Chisholm, Cullison, Kerr, Kipke, Krebs, Lehman, Metzgar, Moon, Reilly, Saab, Solomon, Szelig, Terrasa, and Wilson

Introduced and read first time: January 27, 2020
Assigned to: Health and Government Operations

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 11, 2020

CHAPTER ______

AN ACT concerning

Health Occupations – Athletic Training – Revisions

FOR the purpose of altering the definition of “practice athletic training”; requiring a licensed athletic trainer to practice athletic training in accordance with standards of practice established by certain organizations; repealing certain provisions of law requiring an athletic trainer to practice in a certain setting; altering the information that is required to be included in an evaluation and treatment protocol; authorizing an athletic trainer to provide treatment for not more than a certain number of days to a certain athletic individual except under certain circumstances; providing that preventive care is not considered treatment for a certain purpose; repealing certain definitions; defining a certain term; repealing certain obsolete provisions; making conforming changes; and generally relating to the Maryland Athletic Trainers Act.

BY repealing and reenacting, with amendments,
  Article – Health Occupations
  Section 14–5D–01, 14–5D–05, 14–5D–07(a), 14–5D–10, and 14–5D–11
  Annotated Code of Maryland
  (2014 Replacement Volume and 2019 Supplement)

BY repealing and reenacting, without amendments,
  Article – Health Occupations
  Section 14–5D–04
  Annotated Code of Maryland

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
Underlining indicates amendments to bill.
Strike-out indicates matter stricken from the bill by amendment or deleted from the law by amendment.
 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

 Article – Health Occupations

14–5D–01.

(a) In this subtitle the following words have the meanings indicated.

(b) “Alternate supervising physician” means one or more physicians designated
by the supervising physician to provide supervision of an athletic trainer:

(1) During the absence of the supervising physician; and

(2) In accordance with the evaluation and treatment protocol on file with
the Board.

(c) “Athlete” means an individual who participates in an athletic activity.

(d) “Athletic activity” means exercise, recreation, sport, competition, or game
that:

(1) Requires physical strength, range of motion, flexibility, control, speed,
stamina, or agility; and

(2) Is associated with a setting as defined under this section, an
educational institution, or a professional, amateur, or recreational sports club or athletic
organization.

(e) “Athletic injury” means an injury that affects an athlete’s participation or
performance in an athletic activity.

(f) “Athletic individual” means an individual who participates in
an athletic activity, a job function, or a job–related activity that
requires physical strength, range of motion, flexibility, control, speed,
stamina, or agility.

(g) “Board” means the State Board of Physicians.

(h) “Committee” means the Athletic Trainer Advisory Committee
established under § 14–5D–04 of this subtitle.

(i) “Educational institution” includes:
(1) The schools in the public elementary and secondary education system of the State;

(2) A noncollegiate educational institution governed under § 2–206 of the Education Article; and

(3) An institution of higher education as defined in § 10–101 of the Education Article.

[i] (E) (F) “Evaluation and treatment protocol” means a document that is executed by a physician and an athletic trainer that meets the requirements of § 14–5D–11 of this subtitle.

[j] (E) (G) “License” means a license issued by the Board to practice athletic training.

[k] (E) (H) “Licensed athletic trainer” means an individual who is licensed by the Board to practice athletic training.

[l] (E) (I) “Licensed health care practitioner” means an individual licensed, certified, or otherwise authorized to practice a health occupation under this article.

[m] (E) (J) “National certifying board” means the National Athletic Trainers’ Association Board of Certification, Inc., or its successor organization.

[n] (E) (K) “Nonsupervising physician” means a physician licensed by the Board who is not the supervising physician of the licensed athletic trainer.

[o] (E) (L) “Outside referral” means a request for treatment from a nonsupervising physician or licensed health care practitioner.

[p] (E) (M) (1) “Practice athletic training” means application of the following principles and methods for managing [athletic] injuries for [athletes ATHLETIC INDIVIDUALS in good overall health] INDIVIDUALS under the supervision of a licensed physician:

(i) Prevention AND WELLNESS PROMOTION;

(ii) Clinical evaluation, EXAMINATION, DIAGNOSIS, and assessment, AND DETERMINATION OF A PLAN OF CARE, INCLUDING APPROPRIATE REFERRALS;

(iii) Immediate care AND EMERGENCY CARE; and

(iv) Treatment, rehabilitation, and reconditioning.
(2) “Practice athletic training” includes:

(i) Organization and administration of an athletic training program; [and]

(ii) Instruction to coaches, athletes, parents, medical personnel, and community members regarding the care and prevention of athletic injuries; AND

(iii) Making clinical decisions to determine whether a consultation or referral is necessary recognition and management of a concussion, including management of an athletic individual’s progressive return to activity.

(3) “Practice athletic training” does not include:

(i) The practice of:

1. Chiropractic, including adjustments, manipulation, or high velocity mobilizations of the spine or extremities;

2. Massage therapy;

3. Medicine;

4. Occupational therapy;

5. Physical therapy; or

6. Podiatry;

(ii) The reconditioning of systemic neurologic injuries, conditions, or disease; or

(iii) Except for the conditioning of an athletic individual under the supervision of a treating physician, the treatment, rehabilitation, or reconditioning of nonathletic injuries or the treatment of disease.

[q] “Setting” means a:

(1) Location where an athletic activity, as defined in subsection (d) of this section, is being held;

(2) Health or fitness club;

(3) Clinic or hospital;
(4) Corporation; or

(5) Government agency.

“Supervising physician” means a physician who has been approved by the Board to supervise one or more athletic trainers.

“Supervision” means the responsibility of a physician to provide ongoing and immediately available instruction, in person, by telephone, or by other electronic means, that is adequate to ensure the safety and welfare of a patient and is appropriate to the setting.

14–5D–04.

There is an Athletic Trainer Advisory Committee within the Board.

14–5D–05.

(a) The Committee consists of 11 members appointed by the Board as follows:

(1) On or before September 30, 2011, three athletic trainers who:

   1. Are certified by a national certifying board; and

   2. Have a minimum of 5 years of clinical experience; and

   (ii) On or after October 1, 2011, three licensed athletic trainers who:

   [1.] Are certified by a national certifying board; and

   [2.] Have a minimum of 5 years of clinical experience;

(2) Three licensed physicians:

   (i) At least one of whom is a specialist in orthopedic or sports medicine; and

   (ii) Two of whom previously or currently have partnered with or directed an athletic trainer;

(3) One licensed chiropractor who has sports medicine experience;

(4) One licensed physical therapist;

(5) One licensed occupational therapist; and
Two consumer members.

(b) (1) The athletic trainer members may be appointed by the Board from a list of qualified individuals submitted to the Board by the Maryland Athletic Trainers Association, Inc.

(2) The Board may request an additional list of nominees for each vacancy.

(c) The consumer member of the Committee:

(1) Shall be a member of the general public;

(2) May not be or ever have been:

(i) An athletic trainer;

(ii) A health care professional; or

(iii) In training to be an athletic trainer or other health professional;

and

(3) May not:

(i) Participate or ever have participated in a commercial or professional field related to athletic training;

(ii) Have had within 2 years before appointment a financial interest in a person regulated by the Board; or

(iii) Have had within 2 years before appointment a financial interest in the provision of goods or services to athletic trainers or to the field of athletic training.

(d) (1) The term of a member is 3 years.

(2) The terms of members are staggered as required by the terms provided for members of the Committee on October 1, 2009.

(3) At the end of a term, a member continues to serve until a successor is appointed.

(4) A member who is appointed after a term has begun serves only for the rest of the term and until a successor is appointed.

(e) (1) From among its members, the Committee shall elect a chair every 2 years.
(2) The chair shall serve in an advisory capacity to the Board as a representative of the Committee.

14–5D–07.

(a) Except as otherwise provided in this subtitle, [on or after October 1, 2011.] an individual shall be licensed by the Board before the individual may practice athletic training in the State.


(a) An athletic trainer license authorizes the licensee to practice athletic training services [in an approved setting] while the license is effective.

(b) A licensed athletic trainer shall practice athletic training in accordance with the evaluation:

(1) Evaluation and treatment protocol between the athletic trainer and a licensed physician; and

(2) Standards of practice established by:

   (i) The National Athletic Trainers’ Association;

   (ii) The Board of Certification for the Athletic Trainer; or

   (iii) Any other national certifying organization approved by the Board.

14–5D–11.

(a) Nothing in this title may be construed to authorize an athletic trainer to practice except under the supervision of a licensed physician [and in an approved setting].

(b) Before an athletic trainer may practice athletic training, the athletic trainer shall:

(1) Obtain a license under this subtitle;

(2) Enter into a written evaluation and treatment protocol with a licensed physician; and

(3) Except as provided in § 14–5D–11.3(a) of this subtitle, obtain Board approval of the evaluation and treatment protocol.
An evaluation and treatment protocol shall:

(1) Describe the qualifications of the licensed physician and licensed athletic trainer;

[(2) Describe the settings where the athletic trainer may practice;]

[(3)] (2) Describe the physician supervision mechanisms that the physician will use to give direction to the athletic trainer;

[(4)] (3) Specify the treatment procedures the athletic trainer may perform;

[(5)] (4) Describe tasks the athletic trainer may not perform;

[(6)] (5) Describe specialized tasks the supervising physician is delegating to the athletic trainer to perform with documentation of competencies, certification, credentials, or any other requirements established by the Board to support the delegation of the specialized tasks;

[(7)] (6) Indicate whether the athletic trainer may accept outside referrals from nonsupervising physicians and other licensed health care practitioners;

[(8)] (7) Designate an alternate supervising physician, if appropriate or necessary; and

[(9)] (8) Contain an attestation that states the supervising physician will be responsible for providing ongoing and immediately available instruction that is adequate to ensure the safety and welfare of a patient and is appropriate to the setting.

An athletic trainer may accept an outside referral from a nonsupervising physician or licensed health care practitioner if:

(1) The supervising physician specifies in the evaluation and treatment protocol that the athletic trainer may accept referrals from a nonsupervising physician or licensed health care practitioner;

(2) The nonsupervising physician or licensed health care practitioner has seen the [athlete] ATHLETIC INDIVIDUAL and has written an order for the care of the [athlete] ATHLETIC INDIVIDUAL; and

(3) The treatment procedures to be used by the athletic trainer are:

(i) Within the scope of practice of an athletic trainer; and
(ii) Included in the evaluation and treatment protocol that the athletic trainer has entered into with the supervising physician.

(E) (1) AN ATHLETIC TRAINER MAY PROVIDE TREATMENT FOR NOT MORE THAN 14 DAYS TO AN ATHLETIC INDIVIDUAL WITH AN INJURY THAT AFFECTS JOB FUNCTION OR JOB-RELATED ACTIVITY UNLESS THE ATHLETIC TRAINER HAS RECEIVED A REFERRAL FROM A HEALTH CARE PROVIDER LICENSED UNDER THIS ARTICLE OTHER THAN UNDER THIS SUBTITLE TO TREAT THE INDIVIDUAL.

(2) FOR THE PURPOSE OF PARAGRAPH (1) OF THIS SUBSECTION, PREVENTIVE CARE IS NOT CONSIDERED TREATMENT.

(F) In the event of a sudden departure, incapacity, or death of a supervising physician, a designated alternate supervising physician may assume the role of the supervising physician by submitting an evaluation and treatment protocol to the Board within 15 days of the event.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2020.

Approved:

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Governor.

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Speaker of the House of Delegates.

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President of the Senate.