

MARYLAND PSYCHIATRIC SOCIETY



January 30, 2026

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The Honorable Pamela Beidle
Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Oppose: Senate Bill 326: Physician Assistants - Parity With Other Health Care Practitioners

Dear Chairwoman Beidle & Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS/WPS represent over 1200 psychiatrists and physicians currently in psychiatric training.

MPS/WPS strongly oppose Senate Bill 326. Psychiatrists undergo extensive medical training, including medical school and residency specifically focused on psychiatry. They have in-depth knowledge of mental health conditions, pharmacology, psychotherapy techniques, and the management of psychiatric disorders. Physician assistants (PAs), while also trained in medical evaluation and treatment, have a different educational path that typically involves a master's degree from an accredited PA program. While PAs receive general medical training, it may not be as specialized in psychiatry or mental health as that of psychiatrists. In the mental health space, educational nuance matters. The chart below illustrates the gap in education between psychiatrists and PAs.

	Psychiatrist	Physician Assistant
Length of Graduate-Level Education	4 years	2 years – 2.5 years
Years of Residency/Fellowship Training	4 years – 6 years	None
Total Patient Care Hours Required through Training	12,000 hours – 16,000 hours	2,000 hours

Patient safety is paramount in healthcare. Allowing PAs to have the same authority as psychiatrists could raise concerns about whether they have the necessary expertise to diagnose and treat complex psychiatric conditions safely. Psychiatrists undergo rigorous training to develop the skills needed to assess and manage such conditions, and it's essential to ensure that patients receive appropriate care from qualified providers. This training does not simply apply to prescription medications. Training in therapy is equally as important in mental health treatment, and the educational path for PAs simply lacks that requisite training as well. We are strongly oppose giving PAs involuntary commitment authority, which are currently limited to physicians and those with mental health-specific licensure. As PAs lack mental health-specific licensure, they lack the critical training and experience needed to commit someone based on their independent assessment.

While PAs should not have the same authority as psychiatrists, they can still play a valuable role in mental healthcare as part of a collaborative team, and we are happy to see that approach in this bill. Collaborative care models involve multiple healthcare professionals working together to provide comprehensive care to patients. In these models, PAs can work alongside psychiatrists and other mental health professionals to deliver high-quality care, utilizing their skills and knowledge within their scope of practice.

If you have any questions regarding this testimony, please contact MPS lobbyist, Lisa Harris Jones at lisa.jones@mdlobbyist.com.

Respectfully Submitted,
The Maryland Psychiatric Society & Washington Psychiatric Society
Legislative Action Committee