

Department of Fiscal Services
Maryland General Assembly

FISCAL NOTE
Revised

Senate Bill 356 (Senator Teitelbaum, *et al.*)

Economic and Environmental Affairs

Referred to Environmental Matters

Health Occupation Boards - Sexual Misconduct

This amended bill requires each health occupation board to adopt regulations that provide for the discipline of a licensee or certificate holder for sexual misconduct. Each health occupation board must provide guidance to licensees or certificate holders concerning interactions with clients to avoid any sexual misconduct. Each board must report to the Secretary of Health and Mental Hygiene once a year on the number of complaints and the resolution of each complaint. The Secretary must report the information received from the health occupation boards to the General Assembly by December 31 each year.

Fiscal Summary

State Effect: The bill's requirements could be handled with existing resources.

Local Effect: None.

Small Business Effect: Potential minimal effect on small businesses depending on the guidelines on appropriate interactions between a health care provider and a client established by each health occupation board.

Fiscal Analysis

State Effect: Under current law, each health occupation board can discipline licensees or certificate holders for immoral or unprofessional conduct. As such, the boards conduct hearings on charges of sexual misconduct against a licensee or certificate holder. The Board of Nursing and the Board of Physician Quality Assurance have between five and ten charges brought against its licensees each year. It is assumed that the other health occupation boards have an equivalent number of charges filed against their licensees or certificate holders. Adopting and enforcing regulations regarding the sexual misconduct of licensees or

certificate holders could be absorbed within the existing budgeted resources of each board.

The bill also requires each health occupation board to provide guidance to licensees and certificate holders regarding appropriate interactions with clients. This could be handled with existing resources.

Information Source(s): Department of Health and Mental Hygiene (Boards and Commissions, Board of Nursing, Board of Physician Quality Assurance); Department of Fiscal Services

Fiscal Note History: First Reader - February 24, 1997

brd Revised - Senate Third Reader - March 19, 1997

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