

**Department of Legislative Services**  
Maryland General Assembly  
2008 Session

**FISCAL AND POLICY NOTE**

Senate Bill 857 (Senator Lenett)  
Education, Health, and Environmental Affairs

---

**Uniform Emergency Volunteer Health Practitioners Act**

---

This bill codifies a system for recognizing other states' licenses for health practitioners who volunteer professional services during an emergency requiring significant health care assistance.

---

**Fiscal Summary**

**State Effect:** State expenditures could increase in FY 2009 and future years due to a possible increase in workers' compensation claims and administrative costs related to the volunteer registry in the event of an emergency.

**Local Effect:** None.

**Small Business Effect:** None.

---

**Analysis**

**Bill Summary:** A "host entity" means an entity operating in the State that uses volunteer health practitioners to respond to an emergency.

While an emergency declaration is in effect, the Maryland Emergency Management Agency, Office of Preparedness and Response, or a host entity can confirm whether volunteer health practitioners are registered with the system. A volunteer health practitioner has to adhere to the scope of practice for a similarly licensed practitioner established by the licensing provisions, practice acts, or other laws of Maryland. A host

entity can restrict the health or veterinary services that a volunteer health practitioner can provide.

A licensing board or other disciplinary authority has to report any administrative sanctions imposed on a practitioner licensed in another state to the appropriate licensing board or authority in any other state in which the practitioner is known to be licensed.

A volunteer health practitioner who provides health or veterinary services is not liable for civil damages while providing services under this system. However, liability is not limited for a volunteer health practitioner in the case of • willful misconduct or wanton, grossly negligent, reckless, or criminal conduct; • intentional tort; • breach of contract; • a claim asserted by a host entity or by an entity located in the State or another state that employs or uses the services of the practitioner; or • an act or omission relating to the operation of a motor vehicle, vessel, aircraft, or other vehicle.

In addition, the bill allows volunteer health professionals who die or are injured while providing services under this system to access State workers' compensation benefits if • the practitioner is not otherwise eligible for benefits in Maryland or another state; and • the practitioner, or in the case of death, the practitioner's personal representative, files the appropriate compensation claim. The Maryland Workers' Compensation Commission has to consult with and consider the practices for filing, processing, and paying claims by agencies with similar authority in other states.

**Current Law:** Under the Maryland Workers' Compensation Law, regularly enrolled volunteer members or trainees of the Maryland Emergency Management Agency, established under the Maryland Emergency Management Agency Act, are entitled to workers' compensation benefits through the State. Volunteer members or trainees in Allegany, Carroll, Cecil, Charles, Frederick, Garrett, Queen Anne's, St. Mary's, Somerset, Washington, or Worcester counties are not covered, however. Volunteer fire and rescue personnel are entitled to coverage either by the local government for which they volunteer or by the volunteer company.

In addition, a civil defense volunteer is a covered employee of the State if the individual sustains an injury while providing services at the request of the State during an emergency or during scheduled emergency training.

Members of local volunteer fire or rescue companies are generally covered; in a few counties, the board of county commissioners or the county council has to first approve coverage.

An individual who is licensed by the State to provide medical care is not civilly liable for any act or omission in giving any assistance or medical care if • the act or omission is not grossly negligent; • the assistance or medical care is provided without fee or other compensation; and • the assistance or medical care is provided at the scene of an emergency, in transit to a medical facility, or through communications with personnel providing emergency assistance.

**Background:** By law, Maryland is a member of the Emergency Management Assistance Compact that provides for mutual aid among states for disaster assistance. All 50 states belong to this compact. Under the terms of the compact, which was ratified by the U.S. Congress in 1996, each state must provide workers' compensation benefits, including death benefits, to its volunteers who provide aid under the compact. The state that requested aid must then reimburse the state that sent volunteers. However, the workers' compensation provided under the compact only applies to volunteers who are otherwise entitled under State law to receive those benefits.

In 2003, the Department of Health and Mental Hygiene created the Maryland Professional Volunteer Corps to ensure preparedness in case of a disaster such as the September 11 terrorist attack or a bioterrorism attack. The volunteers are recruited and trained by several licensing boards that operate under DHMH (the boards of Physicians, Nursing, Social Work Examiners, Professional Counselors and Therapists, Psychologists, Dental Examiners, and Pharmacy), as well as the Board of Veterinary Medical Examiners (under the Maryland Department of Agriculture).

DHMH raised the issue of coverage with the Workers' Compensation Insurance Oversight Committee following the Hurricane Katrina disaster. Over 70 MPVC members, including doctors, medical technicians, and nurses, flew to the Gulf area to assist victims of the hurricane under the auspices of EMAC and had to be sworn in as part of the Maryland Defense Force to be eligible for workers' compensation.

The Uniform Emergency Volunteer Health Practitioner Act was promulgated at the national level by the Uniform Law Commission. Colorado, Kentucky, and Tennessee have enacted UEVHPA laws, and eight states (including Maryland) have introduced UEVHPA legislation during the 2008 legislative session. UEVHPA establishes a system that allows health professionals to register either in advance of or during an emergency to provide volunteer health services in an enacting state. Health care facilities and disaster relief organizations in affected states can confirm that registrants are appropriately licensed and in good standing and recognize registered volunteer licenses for the duration of an emergency. Volunteers can register in any state using existing government registration systems, Medical Reserve Corps programs, disaster relief organizations, licensing boards, or other multistate systems.

**State Fiscal Effect:** It is difficult to determine the impact on workers' compensation claims that would result from an emergency event in the State. Workers' compensation payout would depend on the number of out-of-state health practitioners deployed to Maryland, the extent of any injuries suffered, and whether or not the volunteers are already covered by workers' compensation insurance. However, if an emergency requiring many out-of-state volunteer health practitioners does occur and many volunteers experience severe injuries while serving in Maryland, State expenditures could increase significantly.

Approximately 5,413 Maryland volunteer health practitioners are currently registered with the Maryland Professional Volunteer Corps. The DHMH Office of Preparedness and Response employs one full-time administrator who manages the registration system of 5,413 volunteers. If an emergency event occurred in Maryland, DHMH may need to hire a contractual employee or pay overtime to its current employee to process additional volunteer applications. General fund expenditures could therefore increase.

---

### **Additional Information**

**Prior Introductions:** None.

**Cross File:** HB 666 (Delegates Reznik and Hammen) – Health and Government Operations.

**Information Source(s):** Judiciary (Administrative Office of the Courts), Department of Health and Mental Hygiene, Department of Public Safety and Correctional Services, National Conference of Commissioners on Uniform State Laws, Department of Legislative Services

**Fiscal Note History:** First Reader - February 25, 2008  
mll/ljm

---

Analysis by: Sarah K. Harvey

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