J2 9lr2554

By: Delegates Morhaim and Hammen

Introduced and read first time: February 13, 2009 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

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Health Occupations - Licensure of Physician Assistants

FOR the purpose of requiring an individual to be licensed rather than certified by the State Board of Physicians before the individual may practice as a physician assistant; prohibiting a physician assistant from practicing within the scope of certain health occupations; altering the composition of the Physician Advisory Committee within the Board; repealing the authority of the Governor to remove a member of the Physician Advisory Committee under certain circumstances; authorizing the Executive Director of the Board and certain agents or investigators to enter certain premises under certain circumstances; authorizing the Board to impose certain monetary penalties; altering the distribution of certain fees; requiring a primary supervising physician to delegate certain medical acts to licensed physician assistants; prohibiting physicians from supervising physician assistants in the performance of delegated medical acts without submitting certain delegation agreements to the Board; authorizing physicians to delegate prescriptive authority to physician assistant students in training programs; altering requirements for the content, review, approval, and expiration of certain delegation agreements; repealing certain fees for the review and approval of certain agreements; authorizing designated alternate supervising physicians to assume certain duties; altering certain procedures for pending delegation agreements; repealing certain requirements for the Board to approve certain delegation agreements, including approval for writing medication orders; authorizing certain appeals to a certain hearing panel; repealing certain language relating to the Physician Assistant Rehabilitation Program; altering certain quorum requirements; altering certain hearing procedures; requiring the Board to suspend or order the revocation of certain licenses under certain circumstances; requiring certain organizations and employers to report to the Board certain actions that may be grounds for discipline of a physician assistant; making certain exceptions for alcohol- or drug-impaired physician assistants; making certain stylistic and technical changes; and generally relating to the licensure of physician assistants.



27, § 277 of the Code.

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1 BY repealing and reenacting, with amendments, 2 Article – Health Occupations 3 Section 15–101, 15–102, 15–202, 15–203, 15–205, 15–206, 15–301, 15–302, 4 15-302.1, 15-302.2, 15-302.3, 15-303, 15-304, 15-306, 15-307, 15-308, 15-309, 15-310, 15-311, 15-312, 15-314, 15-315, 15-401, 15-402, and 5 6 15-403 7 Annotated Code of Maryland (2005 Replacement Volume and 2008 Supplement) 8 9 BY repealing Article – Health Occupations 10 11 Section 15–305 and 15–313 Annotated Code of Maryland 12 (2005 Replacement Volume and 2008 Supplement) 13 14 BY adding to 15 Article – Health Occupations Section 15–302.4, 15–305, 15–315, 15–316, and 15–402.1 16 17 Annotated Code of Maryland 18 (2005 Replacement Volume and 2008 Supplement) 19 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 20 MARYLAND, That the Laws of Maryland read as follows: 21**Article - Health Occupations** 22 15–101. 23In this title the following words have the meanings indicated. (a) 24 (b) "Alternate supervising physician" means one or more physicians 25 designated by the PRIMARY supervising physician to provide supervision of a 26 physician assistant during the absence of the **PRIMARY** supervising physician and in 27accordance with the delegation agreement on file with the Board. 28 (c) "Board" means the State Board of Physicians, established under § 14–201 29 of this article. 30 "Certificate" means a certificate issued by the Board to a physician (\mathbf{d}) 31 assistant under this title.] 32 "Committee" means the Physician Assistant Advisory Committee. [(e)] (D) 33 [(f)] **(E)** "Controlled dangerous substances" has the meaning stated in Art.

1	[(g)] (F)	"Correctional facility" includes a State or local correctional facility.
2 3		"Delegated medical acts" means activities that constitute the ne delegated by a physician under Title 14 of this article.
4 5 6	PRIMARY superv	"Delegation agreement" means a document that is executed by a vising physician and a physician assistant containing the 15–302 of this title.
7 8 9	v	gnated pharmacy" means a pharmacy that has an agreement to as for a hospital, public health facility, correctional facility, or
10 11	(1) detention center d	The hospital, public health facility, correctional facility, or oes not have an on–site pharmacy; or
12 13 14	(2) correctional facili medication in stoc	The on-site pharmacy at the hospital, public health facility, ty, or detention center is closed or does not have a particular k.]
15	[(k)] (I)	"Hospital" means:
16 17	(1) Article;	A hospital as defined under § 19–301 of the Health – General
18	(2)	A comprehensive care facility that:
19 20	facility under fede	(i) Meets the requirements of a hospital-based skilled nursing ral law;
21		(ii) Offers acute care in the same building; and
22 23	physician assistan	(iii) Has the same protocols and degree of supervision of ts as it does in its acute care area; and
24	(3)	An emergency room that is physically connected to a hospital.
25 26	• •	ENSE" MEANS A LICENSE ISSUED BY THE BOARD TO A TANT UNDER THIS TITLE.
27 28 29	[(1)] (K) by a national orga certain level of tra	"National certifying examination" means an examination offered anization, which certifies physician assistants as having achieved a ining.

"Physician assistant" means an individual who is [certified] 30 31 LICENSED under this title to perform delegated medical acts under the supervision of a physician. 32

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[(s)] **(R)**

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assistants performing delegated medical acts.

$1\\2$	[(n)] (M) "Practice as a physician assistant" means the performance of medical acts that are:
3 4	(1) Delegated by a PRIMARY supervising physician to a physician assistant;
5	(2) Within the PRIMARY supervising physician's scope of practice; and
6 7	(3) Appropriate to the physician assistant's education, training, and experience.
8 9 10 11	[(o)] (N) "Prescriptive authority" means the authority delegated by a PRIMARY supervising physician to a physician assistant to prescribe and administer controlled dangerous substances, prescription drugs, medical devices, and the oral written, or electronic ordering of medications.
12 13 14 15	(O) "PRIMARY SUPERVISING PHYSICIAN" MEANS A PHYSICIAN WHO HAS DELEGATED MEDICAL ACTS TO ONE OR MORE PHYSICIAN ASSISTANTS BY COMPLETING A DELEGATION AGREEMENT THAT MEETS THE REQUIREMENTS UNDER § 15–302 OF THIS TITLE AND SUBMITTING A COPY TO THE BOARD.
16 17 18	(p) "Protocols" means written policies, bylaws, rules, or regulations established by a hospital, public health facility, correctional facility, or detention center that:
19 20	(1) Are established in consultation with and with the approval of its medical staff;
21 22	(2) Describe the delegated medical acts a physician assistant may execute; and
23	(3) Specify the minimum requirements for supervision by a physician.
24 25 26	(q) "Public health facility" means a [fixed] site where clinical public health services are rendered under the auspices of the Department, a local health department in a county, or the Baltimore City Health Department.
27 28	[(r) "Supervising physician" means a physician who has been approved by the Board to supervise one or more physician assistants.]

"Supervision" means the responsibility of a physician to

exercise on-site supervision or immediately available direction for physician

1 2 3 4 5	services and to the physi	care r cian a	"Supervision" includes THE PRIMARY SUPERVISING [physician] resight of and acceptance of direct responsibility for the patient rendered by a physician assistant, including continuous availability assistant in person, through written instructions, or by electronic gnation of one or more alternate supervising physicians.
6	15–102.		
7 8			sician assistant may not practice within the scope of practice of any alth occupations authorized under this article:
9		(1)	Nursing;
10		(2)	Optometry;
11		(3)	Physical therapy; [or]
12		(4)	Psychology; OR
13 14	RADIATION	(5) THER	RADIOGRAPHY, NUCLEAR MEDICINE TECHNOLOGY, APY, OR RADIOLOGY ASSISTANCE.
15 16	(b) occupation the		title does not limit the right of an individual to practice a health e individual is authorized to practice under this article.
17	15–202.		
18	(a)	(1)	The Committee shall consist of 7 members appointed by the Board.
19		(2)	Of the 7 Committee members:
20			(i) 3 shall be licensed physicians;
21			(ii) 3 shall be [certified] LICENSED physician assistants; and
22			(iii) 1 shall be a consumer.
23		(3)	Of the licensed physician members:
24 25	subspecialty	; [and]	(i) At least 1 shall specialize in general surgery or a surgical
26 27	practice, or a	a simila	(ii) At least 1 shall specialize in internal medicine, family ar primary care specialty; AND

(III) AT LEAST 1 SHALL BE A BOARD MEMBER.

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1	(4) The Board shall[:
2	(i) Appoint] APPOINT the physician assistant members from a list of names submitted by:
4 5	[1.] (I) The Maryland Academy of Physician Assistants; and
6 7	[2.] (II) The State institutions of higher education with approved physician assistant programs[;
8 9	(ii) Appoint the consumer member selected by the Secretary of the Department of Health and Mental Hygiene; and
10 11	(iii) Assign a physician member of the Board to serve as a voting Board representative at all meetings of the Advisory Committee].
12	(5) The consumer member:
13	(i) Shall be a member of the general public;
14 15	(ii) May not be a physician, former physician, physician assistant, or a person in training to become a physician or physician assistant;
16 17	(iii) May not have a household member who is a physician or physician assistant, or a person in training to become a physician assistant; and
18 19	(iv) May not have had within 2 years before appointment a substantial financial interest in a process regulated by the Board.
20	(6) Each member of the Committee shall be a resident of the State.
21 22 23	(b) Of the three physician members of the Committee, two shall be previously or currently serving as supervising physicians of a physician assistant under a Board–approved delegation agreement.
24 25	(c) The physician assistant members shall be [certified] LICENSED as a physician assistant under this title.
26 27 28	(d) The physician assistant members shall be currently practicing as a physician assistant or employed as a faculty member of an accredited physician assistant program.

AT LEAST ONE PHYSICIAN ASSISTANT MEMBER SHALL BE A

LICENSED PHYSICIAN ASSISTANT CURRENTLY PRACTICING IN A HOSPITAL; AND

1 2 3	(2) AT LEAST ONE PHYSICIAN ASSISTANT MEMBER SHALL BE A LICENSED PHYSICIAN ASSISTANT CURRENTLY PRACTICING IN A NONHOSPITAL SETTING.
4 5	[(e)] (F) A Committee chairperson and a secretary shall be selected every 2 years by a majority vote of the membership of the Committee.
6 7	[(f)] (G) The chairperson shall serve in an advisory capacity to the Board as a representative of the Committee.
8	15–203.
9	[(a)] The Board shall adopt regulations governing:
10	(1) The term of office for Committee members;
11	(2) The procedure for filling vacancies on the Committee;
12	(3) The removal of Committee members; and
13	(4) The duties of each officer.
14 15 16 17	[(b) In addition to the regulations on removal of members adopted by the Board, upon the recommendation of the Secretary the Governor may remove a member whom the Secretary finds to have been absent from 2 successive Committee meetings without adequate reason.]
18	15–205.
19 20	(a) In addition to the powers set forth elsewhere in this title, the Committee, on its initiative or on the Board's request, may:
21 22	(1) Recommend to the Board regulations for carrying out the provisions of this title;
$\begin{array}{c} 23 \\ 24 \end{array}$	(2) Recommend to the Board approval, modification, or disapproval of an application for certification or a delegation agreement;
25 26 27	(3) Report to the Board any conduct of a supervising physician or a physician assistant that may be cause for disciplinary action under this title or under § 14–404 of this article; and
28 29	(4) Report to the Board any alleged unauthorized practice of a physician assistant.

30 (b) (1) In addition to the duties set forth elsewhere in this title, the Board 31 shall adopt regulations to carry out the provisions of this title.

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1	(2)	The I	Board shall:
2		(i)	Consider all recommendations of the Committee; and
3 4	rejecting or modify	(ii) ving th	Provide a written explanation of the Board's reasons for e Committee's recommendations.
5	(3)	The H	Board may:
6 7	assistant;	(i)	Investigate any alleged unauthorized practice of a physician
8 9	action under this t	(ii) title; ar	Investigate any conduct that may be cause for disciplinary
10 11 12 13 14	inspection of the assistant in a h freestanding birth	office of ospital ing cen	On receipt of a written and signed complaint, including a nissioner of Labor and Industry, conduct an unannounced of a physician assistant, other than an office of a physician l, related institution, freestanding medical facility, or a nter, to determine compliance at that office with the Centers
15	for Disease Contro	l's gui	delines on universal precautions.
16 17 18 19 20 21 22 23 24	(4) THIS SUBTITLE, COMPLIANCE AS AN AUDIT TO DI WITH RESPECT DIRECTOR OF INVESTIGATOR M	IF TI INCI PROV ETERM TO THE	HE ENTRY IS NECESSARY TO CARRY OUT A DUTY UNDER LUDING AN INVESTIGATION OR DETERMINATION OF IDED UNDER PARAGRAPH (3) OF THIS SUBSECTION AND HINE COMPLIANCE WITH THE BOARD'S REQUIREMENTS PHYSICIAN ASSISTANT PRACTICE, THE EXECUTIVE BOARD OR OTHER DULY AUTHORIZED AGENT OR OTHER AT ANY REASONABLE HOUR A PLACE OF BUSINESS CIAN OR A LICENSED PHYSICIAN ASSISTANT OR PUBLIC
16 17 18 19 20 21 22 23	(4) THIS SUBTITLE, COMPLIANCE AS AN AUDIT TO DI WITH RESPECT DIRECTOR OF INVESTIGATOR M OF A LICENSED	IF TI INCI PROV ETERM TO THE IAY EN PHYSI	HE ENTRY IS NECESSARY TO CARRY OUT A DUTY UNDER LUDING AN INVESTIGATION OR DETERMINATION OF IDED UNDER PARAGRAPH (3) OF THIS SUBSECTION AND INE COMPLIANCE WITH THE BOARD'S REQUIREMENTS PHYSICIAN ASSISTANT PRACTICE, THE EXECUTIVE BOARD OR OTHER DULY AUTHORIZED AGENT OR OTHER AT ANY REASONABLE HOUR A PLACE OF BUSINESS CIAN OR A LICENSED PHYSICIAN ASSISTANT OR PUBLIC APPEASON MAY NOT DENY OR INTERFERE WITH AN
16 17 18 19 20 21 22 23 24	(4) THIS SUBTITLE, COMPLIANCE AS AN AUDIT TO DI WITH RESPECT DIRECTOR OF INVESTIGATOR M OF A LICENSED PREMISES. (5) ENTRY UNDER TE	IF TI INCI PROV ETERM TO THE IAY EN PHYSI (I) HIS SU	HE ENTRY IS NECESSARY TO CARRY OUT A DUTY UNDER LUDING AN INVESTIGATION OR DETERMINATION OF IDED UNDER PARAGRAPH (3) OF THIS SUBSECTION AND HINE COMPLIANCE WITH THE BOARD'S REQUIREMENTS PHYSICIAN ASSISTANT PRACTICE, THE EXECUTIVE BOARD OR OTHER DULY AUTHORIZED AGENT OR OTHER AT ANY REASONABLE HOUR A PLACE OF BUSINESS CIAN OR A LICENSED PHYSICIAN ASSISTANT OR PUBLIC A PERSON MAY NOT DENY OR INTERFERE WITH AN BSECTION. A PERSON WHO VIOLATES ANY PROVISION OF THIS Y OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT
16 17 18 19 20 21 22 23 24 25 26 27 28	(4) THIS SUBTITLE, COMPLIANCE AS AN AUDIT TO DE WITH RESPECT DIRECTOR OF INVESTIGATOR M OF A LICENSED PREMISES. (5) ENTRY UNDER TH	IF TI INCI PROV ETERM TO THE IAY EN PHYSI (I) HIS SU	HE ENTRY IS NECESSARY TO CARRY OUT A DUTY UNDER LUDING AN INVESTIGATION OR DETERMINATION OF IDED UNDER PARAGRAPH (3) OF THIS SUBSECTION AND HINE COMPLIANCE WITH THE BOARD'S REQUIREMENTS PHYSICIAN ASSISTANT PRACTICE, THE EXECUTIVE BOARD OR OTHER DULY AUTHORIZED AGENT OR OTHER AT ANY REASONABLE HOUR A PLACE OF BUSINESS CIAN OR A LICENSED PHYSICIAN ASSISTANT OR PUBLIC A PERSON MAY NOT DENY OR INTERFERE WITH AN BSECTION. A PERSON WHO VIOLATES ANY PROVISION OF THIS Y OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT

The issuance and renewal of [certificates] LICENSES; and

- 1 (2) The other services rendered by the Board in connection with 2 physician assistants.
- 3 (b) (1) The Board shall pay all fees collected under this title to the 4 Comptroller of the State.
- 5 (2) (i) If the Governor does not include in the State budget at least \$750,000 for the operation of the Health Personnel Shortage Incentive Grant Program under \$18–803 of the Education Article and the Janet L. Hoffman Loan Assistance Repayment Program for primary care services under \$18–1502(c) of the Education Article, as administered by the Maryland Higher Education Commission, the Comptroller shall distribute:
- 1. [Except as provided in subparagraph (ii) of this paragraph, 12] **TWELVE** percent of the fees received from the Board to the Office of Student Financial Assistance to be used as follows:
- A. One-half to make grants under the Health Personnel Shortage Incentive Grant Program under § 18–803 of the Education Article; and
- B. One-half to make grants under the Janet L. Hoffman Loan Assistance Repayment Program under § 18–1502(c) of the Education Article to physicians engaged in primary care or to medical residents specializing in primary care who agree to practice for at least 2 years as primary care physicians in a geographic area of the State that has been designated by the Secretary of Health and Mental Hygiene as being medically underserved; and
- 22 2. The balance of the fees to the Board of Physicians 23 Fund.
- 24 (ii) [For fiscal 2008, if the Governor does not include in the 25 State budget the funds specified under subparagraph (i) of this paragraph, the 26 Comptroller shall distribute 14 percent of the fees received from the Board to the 27 Office of Student Financial Assistance to be used as provided under subparagraph (i) of this paragraph.
- \$750,000 for the operation of the Health Personnel Shortage Incentive Grant Program under \$18–803 of the Education Article and the Janet L. Hoffman Loan Assistance Repayment Program for primary care services under \$18–1502(c) of the Education Article, as administered by the Maryland Higher Education Commission, the Comptroller shall distribute the fees to the Board of Physicians Fund.
- 35 15–301.
- Nothing in this title may be construed to authorize a physician assistant to practice independent of a supervising physician.

$\frac{1}{2}$	(b) physician a	_	ertificate LICENSE issued to a physician assistant shall limit the it's scope of practice to medical acts:
3		(1)	Delegated by the PRIMARY supervising physician;
4 5	physician a	(2) ssistan	Appropriate to the education, training, and experience of the at;
6 7	and	(3)	Customary to the practice of the PRIMARY supervising physician;
8		(4)	Consistent with the delegation agreement submitted to the Board.
9	(c)	Patie	ent services that may be provided by a physician assistant include:
10 11	and	(1)	(i) Taking complete, detailed, and accurate patient histories;
12 13	status repo	rts;	(ii) Reviewing patient records to develop comprehensive medical
14 15	patient data	(2) a;	Performing physical examinations and recording all pertinent
16 17 18	PRIMARY streatment of	_	Interpreting and evaluating patient data as authorized by the ising physician for the purpose of determining management and nts;
19 20	indicated by	(4) y perti	Initiating requests for or performing diagnostic procedures as nent data and as authorized by the PRIMARY supervising physician;
21 22	matters to p	(5) patient	Providing instructions and guidance regarding medical care s;
23 24 25			Assisting the PRIMARY supervising physician OR ALTERNATE IYSICIAN in the delivery of services to patients who require medical and in health care institutions, including:
26			(i) Recording patient progress notes;
27			(ii) Issuing diagnostic orders; and
28 29	the PRIMAI	RY sup	(iii) Transcribing or executing specific orders at the direction of ervising physician OR ALTERNATE SUPERVISING PHYSICIAN ; and

- 1 (7) Exercising prescriptive authority under [an approved] A delegation 2 agreement and in accordance with § 15–302.2 of this subtitle.
- 3 (d) (1) Except as otherwise provided in this title, an individual shall be 4 [certified] LICENSED by the Board before the individual may practice as a physician 5 assistant.
- 6 (2) Except as otherwise provided in this title, a physician may not supervise a physician assistant in the performance of delegated medical acts without [the approval of] SUBMITTING A COMPLETED DELEGATION AGREEMENT TO the Board.
- 10 (3) Except as otherwise provided in this title or in a medical emergency, a physician assistant may not perform any medical act for which:
- 12 (i) The individual has not been [certified] LICENSED; and
- 13 (ii) The medical acts have not been delegated by a **PRIMARY** 14 supervising physician.
- 15 (e) A physician assistant is the agent of the **PRIMARY** supervising physician 16 in the performance of all practice–related activities, including the oral, written, or 17 electronic ordering of diagnostic, therapeutic, and other medical services.
- 18 (f) Except as provided in subsection (g) of this section, the following 19 individuals may practice as a physician assistant without a [certificate] LICENSE:
- 20 (1) A physician assistant student in a physician assistant training 21 program that is accredited by the Commission on Allied Health Education Programs 22 and approved by the Board; or
- 23 (2) A physician assistant employed in the service of the federal government while performing duties incident to that employment.
- 25 (g) A physician may not delegate [the authority to write medication orders or 26 the ability to exercise] prescriptive authority to a physician assistant student in a 27 training program [approved by the Board].
- (h) (1) Except as prohibited by § 15–102(a) of this title, if a duty that is to be delegated under this section is a part of the practice of a health occupation that is regulated under this article by another board, any rule or regulation concerning that duty shall be adopted jointly by the Board of Physicians and the board that regulates the other health occupation.
- 33 (2) If the two boards cannot agree on a proposed rule or regulation, the proposal shall be submitted to the Secretary for a final decision.

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- (i) Notwithstanding the provisions of this section, a patient being treated regularly for a life—threatening, chronic, degenerative, or disabling condition shall be seen initially by the **PRIMARY** supervising physician and as frequently as the patient's condition requires, but no less than within every five appointments or within 180 days, whichever occurs first.
- 6 15–302.
- 7 (a) [Subject to the provisions of subsection (i) of this section, the Board may 8 authorize a] **A** physician [to] **MAY** delegate medical acts to a physician assistant only 9 after:
- 10 (1) A delegation agreement has been executed and submitted to the 11 [Committee for review to ensure the delegation agreement contains the requirements 12 of this subtitle] **BOARD**; and
- 13 (2) [Except as provided in § 15–302.1 of this subtitle, the Board has 14 reviewed and approved a favorable recommendation by the Committee that the 15 requirements of this subtitle have been met] ANY ADVANCED DUTIES HAVE BEEN 16 AUTHORIZED AS REQUIRED UNDER SUBSECTION (C) OF THIS SECTION.
 - (b) The delegation agreement shall contain:
- 18 (1) A description of the qualifications of the **PRIMARY** supervising physician and physician assistant;
- 20 (2) A description of the settings in which the physician assistant will practice;
- 22 (3) A description of the continuous physician supervision mechanisms 23 that are reasonable and appropriate to the practice setting;
- 24 (4) A description of the delegated medical acts that are within the 25 **PRIMARY** supervising physician's scope of practice and require specialized education 26 or training that is consistent with accepted medical practice;
- 27 (5) An attestation that all medical acts to be delegated to the physician assistant are within the scope of practice of the **PRIMARY** supervising physician and appropriate to the physician assistant's education, training, and level of competence;
 - (6) An attestation of continuous supervision of the physician assistant by the **PRIMARY** supervising physician through the mechanisms described in the delegation agreement;
- 34 (7) An attestation by the **PRIMARY** supervising physician of the 35 physician's acceptance of responsibility for any care given by the physician assistant;

- 1 (8) A description prepared by the **PRIMARY** supervising physician of the process by which the physician assistant's practice is reviewed appropriate to the practice setting and consistent with current standards of acceptable medical practice;
- 4 (9) An attestation by the **PRIMARY** supervising physician that the physician will respond in a timely manner when contacted by the physician assistant; and
- 7 (10) Any other information deemed necessary by the Board or 8 Committee to carry out the provisions of this subtitle.
- 9 (c) (1) [The delegation agreement shall be submitted with the application 10 fee established by the Board and the supervising physician and physician assistant 11 shall comply with all other requirements established by the Board in accordance with 12 this title.
- 13 (2) The Board shall set the application fee so as to produce funds to approximate the cost of reviewing and approving delegation agreements and any other related services provided] THE BOARD MAY NOT REQUIRE PRIOR APPROVAL OF A DELEGATION AGREEMENT THAT INCLUDES ADVANCED DUTIES, IF AN ADVANCED DUTY WILL BE PERFORMED IN A HOSPITAL OR AMBULATORY SURGICAL FACILITY ACCREDITED BY THE JOINT COMMISSION, PROVIDED THAT:
- 19 (I) A PHYSICIAN, WITH CREDENTIALS THAT HAVE BEEN 20 REVIEWED BY THE HOSPITAL OR AMBULATORY SURGICAL FACILITY AS A 21 CONDITION OF EMPLOYMENT, AS AN INDEPENDENT CONTRACTOR, OR AS A 22 MEMBER OF THE MEDICAL STAFF, SUPERVISES THE PHYSICIAN ASSISTANT;
- 23 (II) THE PHYSICIAN ASSISTANT HAS CREDENTIALS THAT
 24 HAVE BEEN REVIEWED BY THE HOSPITAL OR AMBULATORY SURGICAL FACILITY
 25 AS A CONDITION OF EMPLOYMENT, AS AN INDEPENDENT CONTRACTOR, OR AS A
 26 MEMBER OF THE MEDICAL STAFF; AND
- 27 (III) EACH ADVANCED DUTY TO BE DELEGATED TO THE
 28 PHYSICIAN ASSISTANT IS REVIEWED AND APPROVED WITHIN A PROCESS
 29 APPROVED BY THE GOVERNING BODY OF THE HEALTH CARE FACILITY BEFORE
 30 THE PHYSICIAN ASSISTANT PERFORMS THE ADVANCED DUTIES.
- 31 (2) In any setting that does not meet the requirements 32 of paragraph (1) of this subsection, a primary supervising physician 33 shall obtain the Board's approval of a delegation agreement, 34 including advanced duties, before the physician assistant performs 35 the advanced duties.

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- (d) [The] FOR A DELEGATION AGREEMENT CONTAINING ADVANCED DUTIES THAT REQUIRES BOARD APPROVAL, THE Committee shall review the delegation agreement and recommend to the Board that the delegation agreement be approved, rejected, or modified to ensure conformance with the requirements of this title.
- 6 (e) The Committee may conduct a personal interview of the **PRIMARY** 7 supervising physician and the physician assistant.
- 8 (f) On review of the Committee's recommendation regarding a **PRIMARY**9 supervising physician's request to delegate [medical acts] **ADVANCED DUTIES** as
 10 described in a delegation agreement, the Board:
- 11 (1) May approve the delegation agreement; or
- 12 (2) (i) If the physician assistant does not meet the applicable 13 education, training, and experience requirements to perform the specified delegated 14 acts, may modify or disapprove the delegation agreement; and
- 15 (ii) If the Board takes an action under item (i) of this item:
- 16 1. Shall notify the **PRIMARY** supervising physician and the physician assistant in writing of the particular elements of the proposed delegation agreement that were the cause for the modification or disapproval; and
- 19 2. May not restrict the submission of an amendment to 20 the delegation agreement.
 - (g) If the Board determines that a **PRIMARY OR ALTERNATE** supervising physician or physician assistant is practicing in a manner inconsistent with the requirements of this title or Title 14 of this article, the Board on its own initiative or on the recommendation of the Committee may demand modification of the practice, withdraw the approval of the delegation agreement, or take other disciplinary action under § 14–404 or [§ 15–314] § **15–313** of this article.
- 27 (h) [(1) A delegation agreement approved under this subtitle may be 28 reviewed as a component of the certificate renewal process established under § 15–307 of this subtitle.
- 30 (2) A delegation agreement shall expire when a physician assistant's 31 certificate expires.
 - (i) The Board] **A PRIMARY SUPERVISING PHYSICIAN** may not [authorize a physician to] delegate medical acts under a delegation agreement to more than two physician assistants at any one time, except in a hospital or in the following nonhospital settings:

1	(1) A	correctional facility;
2	(2) A	detention center; or
3	(3) A	public health facility.
4 5	[(j)] (I) A agreement under thi	person may not coerce another person to enter into a delegation subtitle.
6	[(k)] (J) A	physician may supervise a physician assistant:
7 8		[n] As a PRIMARY SUPERVISING PHYSICIAN IN accordance reement approved by the Board under this subtitle; or
9	(2) A	s an alternate supervising physician if:
10 11	(i accordance with a de) The alternate supervising physician supervises in legation agreement filed with the Board;
12 13 14	than four physician	i) The alternate supervising physician supervises no more assistants at any one time, except in a hospital, correctional nter, or public health facility;
15 16		ii) The alternate supervising physician's period of supervision, primary supervising physician, does not exceed:
17 18	agreement; and	1. The period of time specified in the delegation
19		2. A period of 45 consecutive days at any one time; and
20 21	that:	v) The physician assistant performs only those medical acts
22 23	filed with the Board;	1. Have been delegated under the delegation agreement and
24 25	PRIMARY SUPERVIS	2. Are within the scope of practice of BOTH THE SING PHYSICIAN AND the alternate supervising physician.
26 27 28 29	OF A PRIMARY SUPERVISING PHY	EVENT OF A SUDDEN DEPARTURE, INCAPACITY, OR DEATH SUPERVISING PHYSICIAN, A DESIGNATED ALTERNATE YSICIAN MAY ASSUME THE ROLE OF THE PRIMARY SICIAN BY SUBMITTING A NEW DELEGATION AGREEMENT TO

THE BOARD WITHIN 15 DAYS.

- 1 (l) Individual members of the Board are not civilly liable for actions 2 regarding the approval, modification, or disapproval of a delegation agreement 3 described in this section.
- 4 15–302.1.

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- 5 (a) If a delegation agreement does not include advanced 6 duties or the advanced duties have been approved under \$ 15–302(c)(1) of this subtitle, a physician assistant may assume the 6 duties under a delegation agreement on the date of receipt by the 7 Board of the delegation agreement.
- 10 **(B)** In this section, "pending" means that a delegation agreement **THAT**11 **INCLUDES DELEGATION OF ADVANCED DUTIES IN A SETTING THAT MEETS THE**12 **REQUIREMENTS UNDER § 15–302(C)(2) OF THIS SUBTITLE** has been executed and submitted to the [Committee] **BOARD** for [review] **ITS APPROVAL**, but:
- 14 (1) The Committee has not made a recommendation to the Board; or
- 15 (2) The Board has not made a final decision regarding the delegation 16 agreement.
- [(b)] (C) Subject to subsection [(c)] (D) of this section, if a delegation agreement is pending, on receipt of a temporary practice letter from the staff of the Board, a physician assistant may [practice in accordance with the pending delegation agreement] PERFORM THE ADVANCED DUTY if:
- 21 (1) The **PRIMARY** supervising physician has been previously approved 22 to supervise one or more physician assistants in the [proposed practice setting for the 23 same scope of practice] **PERFORMANCE OF THE ADVANCED DUTY**; and
 - (2) The physician assistant has been previously approved [for the same scope of practice in a different practice setting] BY THE BOARD TO PERFORM THE ADVANCED DUTY.
 - [(c)] (D) If the Committee recommends a denial of the pending delegation agreement or the Board denies the pending delegation agreement, on notice to the **PRIMARY SUPERVISING** physician and the physician assistant, the physician assistant may no longer [practice in accordance with the delegation agreement] **PERFORM THE ADVANCED DUTY THAT HAS NOT RECEIVED THE APPROVAL OF THE BOARD**.
- 33 (E) THE BOARD MAY DISAPPROVE ANY DELEGATION AGREEMENT IF IT 34 BELIEVES THAT:

- 1 **(1)** THE AGREEMENT DOES NOT MEET THE REQUIREMENTS OF 2 THIS SUBTITLE; OR 3 **(2)** THE PHYSICIAN ASSISTANT IS UNABLE TO PERFORM SAFELY 4 THE DELEGATED DUTIES. 5 IF THE BOARD DISAPPROVES A DELEGATION AGREEMENT OR THE (F) 6 DELEGATION OF ANY FUNCTION UNDER AN AGREEMENT, THE BOARD SHALL 7 PROVIDE THE PRIMARY SUPERVISING PHYSICIAN AND THE PHYSICIAN 8 ASSISTANT WITH WRITTEN NOTICE OF THE DISAPPROVAL. 9 (G) A PHYSICIAN ASSISTANT WHO RECEIVES NOTICE THAT THE BOARD 10 HAS DISAPPROVED A DELEGATION AGREEMENT OR AN ADVANCED FUNCTION 11 UNDER THE DELEGATION AGREEMENT SHALL IMMEDIATELY CEASE TO 12 PRACTICE UNDER THE AGREEMENT OR TO PERFORM THE DISAPPROVED 13 FUNCTION. 14 15–302.2. 15 A PRIMARY supervising physician may not delegate prescribing and administering of controlled dangerous substances, prescription drugs, or medical 16 17 devices unless the **PRIMARY** supervising physician and physician assistant include in the delegation agreement: 18 19 (1) A notice of intent to delegate prescribing of controlled dangerous 20 substances, prescription drugs, or medical devices; 21(2)An attestation that all prescribing activities of the physician 22assistant will comply with applicable federal and State regulations; 23 (3)An attestation that all medical charts or records will contain a notation of any prescriptions written by a physician assistant in accordance with this 24section; 2526 An attestation that all prescriptions written under this section will 27include the physician assistant's name and the PRIMARY supervising physician's name, business address, and business telephone number legibly written or printed; 28 29 (5)[Evidence demonstrating: 30 (i) Passage of AN ATTESTATION THAT THE PHYSICIAN 31**ASSISTANT:**
- 32 **(I) HAS PASSED** the physician assistant national certification 33 exam administered by the National Commission on the Certification of Physician 34 Assistants within the previous 2 years; or

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1 2 3	(ii) [Successful completion of] HAS SUCCESSFULLY COMPLETED 8 category 1 hours of pharmacology education within the previous 2 years; and
4 5	(6) [Evidence demonstrating:] AN ATTESTATION THAT THE PHYSICIAN ASSISTANT MEETS AT LEAST ONE OF THE FOLLOWING CRITERIA:
6	(i) A bachelor's degree or its equivalent; OR
7	(ii) 2 years of work experience as a physician assistant[; or
8 9	(iii) Prior approval by the Board of a delegation agreement, including approval for writing medication orders].
10 11 12	(b) (1) A PRIMARY supervising physician may not delegate the prescribing of substances that are identified as Schedule I controlled dangerous substances under § 5–402 of the Criminal Law Article.
13 14 15	(2) A PRIMARY supervising physician may not delegate the prescribing of controlled dangerous substances to a physician assistant unless the physician assistant has a valid:
16	(i) State controlled dangerous substance registration; and
17	(ii) Federal Drug Enforcement Agency (DEA) registration.
18	15–302.3.
19 20 21	(a) On a quarterly basis, the Board shall provide to the Board of Pharmacy a list of physician assistants whose delegation agreements include the delegation of [authority to exercise] prescriptive authority.
22 23 24	(b) The list required under subsection (a) of this section shall specify whether each physician assistant has been delegated the authority to prescribe controlled dangerous substances, prescription drugs, or medical devices.
25 26 27 28	(c) If a PRIMARY supervising physician who has delegated authority to exercise prescriptive authority to a physician assistant subsequently restricts or removes the delegation, the PRIMARY supervising physician shall notify the Board of the restriction or removal within 5 business days.
29	15–302.4.

(A) AFTER THE BOARD NOTIFIES A PRIMARY SUPERVISING PHYSICIAN

AND A PHYSICIAN ASSISTANT THAT THE BOARD HAS NOT APPROVED A

- 1 DELEGATION AGREEMENT OR ONE OR MORE ADVANCED DUTIES UNDER §
- 2 15-302.1(d) or (e) of this subtitle, the primary supervising physician
- 3 AND THE PHYSICIAN ASSISTANT MAY APPEAL THE DECISION TO A HEARING
- 4 PANEL APPOINTED BY THE BOARD.
- 5 (B) (1) THE PANEL SHALL CONSIST OF TWO PHYSICIANS LICENSED 6 UNDER TITLE 14 OF THIS ARTICLE AND A HEARING OFFICER.
- 7 (2) One of the physician panel members shall be from 8 the same specialty as the primary supervising physician.
- 9 (C) THE PANEL SHALL ACCEPT TESTIMONY ON:
- 10 (1) THE MEDICAL KNOWLEDGE, MEDICAL JUDGMENT, AND 11 TECHNICAL SKILLS NEEDED TO PERFORM THE ADVANCED DUTY; AND
- 12 (2) THE MEDICAL KNOWLEDGE, MEDICAL JUDGMENT, AND 13 TECHNICAL SKILLS OF THE PHYSICIAN ASSISTANT.
- 14 (D) THE PANEL SHALL MAKE RECOMMENDATIONS TO THE BOARD
- 15 REGARDING THE DELEGATION OF THE ADVANCED DUTY TO THE PHYSICIAN
- 16 ASSISTANT.
- 17 (E) THE BOARD SHALL HAVE FINAL AUTHORITY AND DISCRETION TO
- 18 APPROVE OR DISAPPROVE THE DELEGATION OF AN ADVANCED DUTY TO A
- 19 PHYSICIAN ASSISTANT AFTER THE HEARING REQUIRED UNDER THIS SECTION.
- 20 15–303.
- 21 (a) To qualify for a [certificate] LICENSE, an applicant shall [be]:
- 22 (1) [Of] **BE OF** good moral character;
- 23 (2) [Fluent in the English language] **DEMONSTRATE ORAL AND**
- 24 WRITTEN COMPETENCY IN THE ENGLISH LANGUAGE AS REQUIRED BY THE
- 25 **BOARD**;
- 26 (3) [At] **BE AT** least 18 years old; and
- 27 (4) (I) [A] **BE** A graduate of a physician assistant training program 28 approved by the Board; **OR**
- 29 (II) HAVE PASSED THE PHYSICIAN ASSISTANT NATIONAL
- 30 CERTIFYING EXAMINATION ADMINISTERED BY THE NATIONAL COMMISSION ON

(3)

1 2 3	CONTINUIN	NG EDU	OF PHYSICIAN ASSISTANTS PRIOR TO 1986, MAINTAINED ALL UCATION AND RECERTIFICATION REQUIREMENTS, AND BEEN IN ACTICE SINCE PASSAGE OF THE EXAMINATION.
4 5	(b) national cer	_	ot as otherwise provided in this title, the applicant shall pass a examination approved by the Board.
6 7	(c) after Octobe	-	oplicant who graduates from a physician assistant training program 003 shall have a bachelor's degree or its equivalent.
8 9	[(d) certificates		Board shall adopt regulations governing the issuance of temporary licants who:
10		(1)	Have met all other requirements of this section; but
11		(2)	Have not yet passed the national certifying examination.]
12	15–304.		
13	An a _l	pplican	t for a [certificate] LICENSE shall:
14 15	requires; an	(1) ad	Submit an application to the Board on the form that the Board
16		(2)	Pay to the Board the application fee set by the Board.
17	[15–305.		
18 19	(a) shall send t		applicant qualifies for a certificate under this subtitle, the Board licant a notice that specifies that:
20		(1)	The applicant has qualified for a certificate; and
21 22	issue a certi	(2)	On receipt of the certificate fee set by the Board, the Board will to the applicant.
23 24	(b) any applica	-	ayment of the certificate fee, the Board shall issue a certificate to meets the requirements of this subtitle.
25	(c)	The H	Board shall include on each certificate that the Board issues:
26		(1)	The full name of the certificate holder;
27 28	and	(2)	A serial number assigned by the Board to the certificate holder;

The signature of the Secretary under seal of the Board.]

1 **15–305.** $\mathbf{2}$ THE BOARD SHALL ISSUE A LICENSE TO AN APPLICANT WHO MEETS THE 3 REQUIREMENTS OF THIS TITLE. 4 15–306. 5 A [certificate] LICENSE authorizes the [certificate holder] LICENSEE to 6 practice as a physician assistant UNDER A DELEGATION AGREEMENT while the 7 [certificate] **LICENSE** is effective. 8 15–307. 9 Unless a [certificate] LICENSE is renewed for an additional term (a) (1) 10 as provided in this section, the [certificate] LICENSE expires on the date set by the Board. 11 12 (2)A [certificate] **LICENSE** may not be renewed for a term longer than 13 2 years. 14 At least 1 month before a [certificate] LICENSE expires, the Board shall 15 send to the [certificate holder] LICENSEE, by first-class mail to the last known 16 address of the [certificate holder] LICENSEE, a renewal notice that states: 17 **(1)** The date on which the current [certificate] **LICENSE** expires; (2)The date by which the Board must receive the renewal application 18 19 for the renewal to be issued and mailed before the [certificate] LICENSE expires; and 20 The amount of the renewal fee. (3)21 Before a [certificate] LICENSE expires, the [certificate holder] LICENSEE 22periodically may renew it for an additional 2-year term, if the [certificate holder] 23 LICENSEE: 24(1) Is otherwise entitled to be issued a [certificate] LICENSE; 25Pays to the Board the renewal fee, set by the Board; [and] (2)26 Submits to the Board: (3)27 (i) A renewal application on the form that the Board requires;

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and

$\begin{matrix} 1 \\ 2 \\ 3 \end{matrix}$	(ii) Satisfactory evidence of compliance with the continuing education requirements for [certificate] LICENSE renewal set by the Board under this section; AND
4 5	(4) MEETS ANY ADDITIONAL REQUIREMENTS SET BY THE BOARD FOR RENEWAL OF A LICENSE.
6 7 8	(d) (1) In addition to any other qualifications and requirements established by the Board, the Board shall establish continuing education requirements as a condition for the renewal of certificates under this section.
9 10 11 12	(2) In establishing the continuing education requirements under paragraph (1) of this subsection, the Board shall include a requirement for a course on the special care needs of terminally ill individuals and their families which shall include topics related to:
13	(i) Pain and symptom management;
14	(ii) The psycho-social dynamics of death;
15	(iii) Dying and bereavement; and
16	(iv) Hospice care.
17 18	(e) The Board shall renew the [certificate] LICENSE of each [certificate holder] LICENSEE who meets the requirements of this section.
19 20 21 22	(F) FOR THE FAILURE OF A LICENSEE TO OBTAIN CONTINUING MEDICAL EDUCATION CREDITS AS REQUIRED BY THE BOARD, THE BOARD MAY IMPOSE A CIVIL PENALTY NOT TO EXCEED \$100 FOR EACH MEDICAL EDUCATION CREDIT NOT OBTAINED BY THE LICENSEE.
23	15–308.
24 25 26	The Board, in accordance with its regulations, shall reinstate the [certificate] LICENSE of a physician assistant who has failed to renew the [certificate] LICENSE for any reason if the physician assistant:
27	(1) Meets the renewal requirements of § 15–307 of this subtitle;
28	(2) Pays to the Board the reinstatement fee set by the Board; [and]
29 30 31	(3) Submits to the Board satisfactory evidence of compliance with the qualifications and requirements established under this subtitle for [certificate] LICENSURE reinstatements; AND

- 1 (4) MEETS ANY ADDITIONAL REQUIREMENTS ESTABLISHED BY 2 THE BOARD FOR REINSTATEMENT.
- 3 15–309.
- 4 (a) Each [certificate holder] **LICENSEE** shall produce a valid [certificate] 5 **LICENSE** and delegation agreement when requested to do so by an existing or potential employer or client.
- 7 (b) (I) Each [certificate holder] LICENSEE shall give the Board written 8 notice of any change of address OR NAME WITHIN 60 DAYS OF THE CHANGE.
- 9 (II) A LICENSEE WHO FAILS TO COMPLY WITH THIS SUBSECTION 10 IS SUBJECT TO AN ADMINISTRATIVE PENALTY OF \$100.
- 11 15–310.
- 12 (a) In reviewing an application for [certification] LICENSURE or in investigating an allegation brought under [§ 15–314] § **15–313** of this subtitle, [the Committee may request the Board to direct, or] the Board [on its own initiative] may direct the physician assistant to submit to an appropriate examination.
- 16 (b) In return for the privilege given to the physician assistant to perform delegated medical acts in the State, the physician assistant is deemed to have:
- 18 (1) Consented to submit to an examination under this section, if 19 requested by the Board in writing; and
- 20 (2) Waived any claim of privilege as to the testimony or examination 21 reports.
- 22 (c) The unreasonable failure or refusal of the physician assistant to submit 23 to an examination is grounds for denial of the application or immediate suspension of 24 the [certification] **LICENSE**.
- 25 (d) The Board shall pay the costs of any examination made under this 26 section.
- 27 (e) [(1) (i)] The Board shall assess each applicant for a [certificate] 28 **LICENSE** or the renewal of a [certificate] **LICENSE** to practice as a physician assistant, a fee set by the Board[.
- 30 (ii) The fee shall be] sufficient to fund the activities of the 31 [entity or entities with whom the Board contracts under § 14–401(e)] **BOARD'S** 32 **REHABILITATION PROGRAM UNDER § 14–401(G)** of this article in conducting a physician assistant rehabilitation program.

- [(iii) The fee shall be set by the Secretary each year after the submission by the entity or entities with whom the Board contracts under § 14–401(e) of this article to the Board of the annual budget for the Physician Assistant Rehabilitation Program.
- 5 (2) As provided under § 2–1220 of the State Government Article, the 6 Legislative Auditor, every 2 years, shall audit the accounts and transactions of the 7 entity or entities with whom the Board contracts under § 14–401(e) of this article in 8 conducting the Physician Assistant Rehabilitation Program.]
- 9 15–311.
- Subject to the hearing provisions of [§ 15–313] § **15–314** of this subtitle, the Board, on the affirmative vote of a majority of [its members then serving] **A QUORUM**, may deny a [certificate] **LICENSE** to any applicant for[:
- 13 (1) Failure to meet the qualifications for certification; or
- 14 (2) Any] **ANY** of the reasons that are grounds for disciplinary action under [§ 15–314] § **15–313** of this subtitle.
- 16 15–312.
- 17 (a) Unless the Board agrees to accept the surrender of a [certification]
 18 **LICENSE** of **A** physician assistant, the physician assistant may not surrender the
 19 [certification] **LICENSE** nor may the [certification] **LICENSURE** lapse by operation of
 20 law while the physician assistant is under investigation or while charges are pending.
- 21 (b) The Board may set conditions on its agreement to accept surrender of a 22 [certification] **LICENSE**.
- 23 [15–313.
- 24 (a) (1) Except as otherwise provided under § 10–226 of the State Government Article, before the Board takes any action to deny a certificate or to reject or modify a delegation agreement, the Board shall give the applicant or certificate holder the opportunity for a hearing before the Board.
- 28 (2) The Board shall give notice and hold the hearing under Title 10, 29 Subtitle 2 of the State Government Article.
- 30 (3) The Board may administer oaths in connection with any 31 proceeding under this section.
- 32 (4) At least 14 days before the hearing, the hearing notice shall be 33 sent to the last known address of the applicant or certificate holder.

- Any applicant aggrieved under this subtitle by a final decision of the 1 (b) 2 Board denying a certificate or denying or modifying a delegation agreement may: 3 (1) Appeal that decision to the Board of Review; and 4 (2)Then take any further appeal allowed under Title 10, Subtitle 2 of 5 the State Government Article.] 6 [15–314.] **15–313.** 7 (A) Subject to the hearing provisions of [§ 15–315] § **15–314** of this subtitle, 8 the Board, on the affirmative vote of a majority of [its members then serving] A 9 QUORUM, may reprimand any [certificate holder] LICENSEE or suspend or revoke a 10 [certificate] **LICENSE** if the [certificate holder] **LICENSEE**: Fraudulently or deceptively obtains or attempts to obtain a 11 12[certificate] LICENSE for the applicant or [certificate holder] LICENSEE or for another 13 individual; 14 (2)Fraudulently or deceptively uses a [certificate] LICENSE; Violates any provision of this title or any regulations adopted 15 (3)16 under this title or commits any act [which] THAT could serve as the basis for disciplinary action against a physician under § 14–404 of this article; 17 18 Performs delegated medical acts beyond the scope of [the (4) 19 certificate] OR not within a delegation agreement [approved by] SUBMITTED TO the 20 Board: 21 Performs delegated medical acts without the supervision of a (5)22physician; 23 Refuses, withholds from, denies, or discriminates against an 24individual with regard to the provision of professional services for which the 25[certificate holder] **LICENSEE** is [certified] **LICENSED** and qualified to render because the individual is HIV positive; 26 27 Except in an emergency life-threatening situation where it is not 28 feasible or practicable, fails to comply with the Centers for Disease Control's
 - (8) Is in breach of a service obligation resulting from the applicant's or [certificate holder's] **LICENSEE'S** receipt of State or federal funding for the applicant's or [certificate holder's] **LICENSEE'S** physician assistant education.

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guidelines on universal precautions; or

- 1 (B) (1) ON THE FILING OF CERTIFIED DOCKET ENTRIES WITH THE
 2 BOARD BY THE OFFICE OF THE ATTORNEY GENERAL, THE BOARD SHALL
 3 ORDER THE SUSPENSION OF A LICENSE IF THE LICENSEE IS CONVICTED OF OR
 4 PLEADS GUILTY OR NOLO CONTENDERE WITH RESPECT TO A CRIME INVOLVING
 5 MORAL TURPITUDE, WHETHER OR NOT ANY APPEAL OR OTHER PROCEEDING IS
 6 PENDING TO HAVE THE CONVICTION OR PLEA SET ASIDE.
- 7 (2) AFTER COMPLETION OF THE APPELLATE PROCESS IF THE 8 CONVICTION HAS NOT BEEN REVERSED OR THE PLEA HAS NOT BEEN SET ASIDE 9 WITH RESPECT TO A CRIME INVOLVING MORAL TURPITUDE, THE BOARD SHALL 10 ORDER THE REVOCATION OF A LICENSE ON THE CERTIFICATION BY THE OFFICE 11 OF THE ATTORNEY GENERAL.
- 12 [15–315.] **15–314.**

- 13 (a) (1) Except as otherwise provided under § 10–226 of the State Government Article, before the Board takes any action under [§ 15–314] § 15–313 of this subtitle, the Board shall give the individual against whom the action is contemplated an opportunity for a hearing before a hearing officer OR A SUBCOMMITTEE OF THE BOARD.
- 18 (2) The hearing officer shall give notice and hold the hearing in accordance with Title 10, Subtitle 2 of the State Government Article.
- 20 (3) The Board may administer oaths in connection with any 21 proceeding under this section.
- 22 (4) At least 14 days before the hearing, the hearing notice required 23 under this subtitle shall be sent by certified mail to the last known address of the 24 individual.
- 25 (b) (1) Any [certificate holder] **LICENSEE** who is aggrieved by a final decision of the Board **IN A CONTESTED CASE** under this subtitle may not appeal to the Board of Review but may take a direct judicial appeal.
- 28 (2) The appeal shall be as provided for judicial review of the final decision in Title 10, Subtitle 2 of the State Government Article.
- 30 (c) An order of the Board under this subtitle may not be stayed pending 31 review.
- 32 (D) THE BOARD MAY APPEAL FROM ANY DECISION THAT REVERSES OR 33 MODIFIES ITS ORDER.
 - [(d)] **(E)** All of the findings and orders of the Board that relate to physician assistants are subject to the provisions of Title 14, Subtitle 4 of this article.

- 1 **[15–316.]** 15–315.
- 2 (A) IF AFTER A HEARING UNDER § 15–314 OF THIS SUBTITLE, THE
- 3 BOARD FINDS THAT THERE ARE GROUNDS FOR DISCIPLINE UNDER § 15–313 OF
- 4 THIS SUBTITLE TO SUSPEND OR REVOKE A LICENSE OF A PHYSICIAN ASSISTANT
- 5 OR TO DENY A LICENSE TO AN APPLICANT OR TO REPRIMAND A LICENSED
- 6 PHYSICIAN ASSISTANT, THE BOARD MAY IMPOSE A FINE SUBJECT TO THE
- 7 BOARD'S REGULATIONS INSTEAD OF OR IN ADDITION TO SUSPENDING OR
- 8 REVOKING THE LICENSE OR REPRIMANDING THE LICENSEE.
- 9 (B) THE BOARD SHALL PAY ANY FINES COLLECTED UNDER THIS 10 SECTION INTO THE GENERAL FUND OF THE STATE.
- 11 **15–316.**
- 12 (A) EXCEPT AS OTHERWISE PROVIDED UNDER SUBSECTIONS (B) AND
- 13 (C) OF THIS SUBSECTION, HOSPITALS, RELATED INSTITUTIONS, ALTERNATIVE
- 14 HEALTH CARE SYSTEMS AS DEFINED UNDER § 1-401 OF THIS ARTICLE, AND
- 15 EMPLOYERS SHALL FILE WITH THE BOARD A REPORT THAT THE HOSPITAL,
- 16 RELATED INSTITUTION, ALTERNATIVE HEALTH CARE SYSTEM, OR EMPLOYER
- 17 LIMITED, REDUCED, OTHERWISE CHANGED, OR TERMINATED ANY LICENSED
- 18 PHYSICIAN ASSISTANT FOR ANY REASON THAT MIGHT BE GROUNDS FOR
- 19 DISCIPLINARY ACTION UNDER § 15–313 OF THIS SUBTITLE.
- 20 (B) A HOSPITAL, RELATED INSTITUTION, ALTERNATIVE HEALTH CARE
- 21 SYSTEM, OR EMPLOYER THAT HAS REASON TO KNOW THAT A LICENSED
- 22 PHYSICIAN ASSISTANT HAS COMMITTED AN ACTION OR HAS A CONDITION THAT
- 23 MIGHT BE GROUNDS FOR REPRIMAND OR PROBATION OF THE LICENSED
- 24 PHYSICIAN ASSISTANT OR SUSPENSION OR REVOCATION OF THE LICENSE
- 25 BECAUSE THE LICENSED PHYSICIAN ASSISTANT IS ALCOHOL- OR
- 26 DRUG-IMPAIRED IS NOT REQUIRED TO REPORT THE PHYSICIAN ASSISTANT TO
- 27 THE BOARD IF:
- 28 (1) THE HOSPITAL, RELATED INSTITUTION, ALTERNATIVE
- 29 HEALTH CARE SYSTEM, OR EMPLOYER KNOWS THAT THE LICENSED PHYSICIAN
- 30 ASSISTANT IS:
- 31 (I) IN AN ALCOHOL OR DRUG TREATMENT PROGRAM THAT
- 32 IS ACCREDITED BY THE JOINT COMMISSION OR IS CERTIFIED BY THE
- 33 **DEPARTMENT; OR**

- 1 (II) UNDER THE CARE OF A HEALTH CARE PRACTITIONER
 2 WHO IS COMPETENT AND CAPABLE OF DEALING WITH ALCOHOLISM AND DRUG
 3 ABUSE;
- 4 (2) THE HOSPITAL, RELATED INSTITUTION, ALTERNATIVE 5 HEALTH CARE SYSTEM, OR EMPLOYER IS ABLE TO VERIFY THAT THE LICENSED 6 PHYSICIAN ASSISTANT REMAINS IN THE TREATMENT PROGRAM UNTIL 7 DISCHARGE; AND
- 8 (3) THE ACTION OR CONDITION OF THE LICENSED PHYSICIAN
 9 ASSISTANT HAS NOT CAUSED INJURY TO ANY PERSON WHILE THE PHYSICIAN
 10 ASSISTANT IS PRACTICING AS A LICENSED PHYSICIAN ASSISTANT.
- 11 (C) (1) If the licensed physician assistant enters, or is 12 considering entering, an alcohol or drug treatment program that 13 is accredited by The Joint Commission or that is certified by the 14 Department, the licensed physician assistant shall notify the 15 Hospital, related institution, alternative health care system, or 16 Employer of the licensed physician assistant's decision to enter the 17 Treatment program.
- 18 **(2)** IF THE LICENSED PHYSICIAN ASSISTANT FAILS TO PROVIDE 19 THE NOTICE REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION, AND THE 20 HOSPITAL, RELATED INSTITUTION, ALTERNATIVE HEALTH CARE SYSTEM, OR 21EMPLOYER LEARNS THAT THE LICENSED PHYSICIAN ASSISTANT HAS ENTERED A 22 TREATMENT PROGRAM, THE HOSPITAL, RELATED INSTITUTION, ALTERNATIVE 23 HEALTH CARE SYSTEM, OR EMPLOYER SHALL REPORT TO THE BOARD THAT THE 24 LICENSED PHYSICIAN ASSISTANT HAS ENTERED A TREATMENT PROGRAM AND 25 HAS FAILED TO PROVIDE THE REQUIRED NOTICE.
- 26 IF THE LICENSED PHYSICIAN ASSISTANT IS FOUND TO BE **(3)** 27NONCOMPLIANT WITH THE TREATMENT PROGRAM'S POLICIES 28 PROCEDURES WHILE IN THE TREATMENT PROGRAM, THE TREATMENT 29 PROGRAM SHALL NOTIFY THE HOSPITAL, RELATED INSTITUTION, ALTERNATIVE 30 HEALTH CARE SYSTEM, OR EMPLOYER OF THE LICENSED PHYSICIAN 31 ASSISTANT'S NONCOMPLIANCE.
- 32 (4) ON RECEIPT OF THE NOTIFICATION REQUIRED UNDER 33 PARAGRAPH (3) OF THIS SUBSECTION, THE HOSPITAL, RELATED INSTITUTION, 34 ALTERNATIVE HEALTH CARE SYSTEM, OR EMPLOYER OF THE LICENSED 35 PHYSICIAN ASSISTANT SHALL REPORT THE LICENSED PHYSICIAN ASSISTANT'S 36 NONCOMPLIANCE TO THE BOARD.

- 1 (D) A PERSON IS NOT REQUIRED UNDER THIS SECTION TO MAKE ANY
 2 REPORT THAT WOULD BE IN VIOLATION OF ANY FEDERAL OR STATE LAW, RULE,
 3 OR REGULATION CONCERNING THE CONFIDENTIALITY OF ALCOHOL AND DRUG
 4 ABUSE PATIENT RECORDS.
- 5 (E) THE HOSPITAL, RELATED INSTITUTION, ALTERNATIVE HEALTH 6 CARE SYSTEM, OR EMPLOYER SHALL SUBMIT THE REPORT WITHIN 10 DAYS OF ANY ACTION DESCRIBED IN THIS SECTION.
- 8 (F) A REPORT MADE UNDER THIS SECTION IS NOT SUBJECT TO SUBPOENA OR DISCOVERY IN ANY CIVIL ACTION OTHER THAN A PROCEEDING ARISING OUT OF A HEARING AND DECISION OF THE BOARD UNDER THIS TITLE.
- 11 (G) (1) THE BOARD MAY IMPOSE A CIVIL PENALTY OF UP TO \$1,000 12 FOR FAILURE TO REPORT UNDER THIS SECTION.
- 13 (2) THE BOARD SHALL REMIT ANY PENALTY COLLECTED UNDER 14 THIS SUBSECTION INTO THE GENERAL FUND OF THE STATE.
- 15 15-401.
- 16 (a) Except as otherwise provided in this title, a person may not practice, attempt to practice, or offer to practice as a physician assistant in the State unless the person has a [certificate] LICENSE issued by the Board.
- 19 (b) Except as otherwise provided in this title, a person may not perform, 20 attempt to perform, or offer to perform any delegated medical act beyond the scope of 21 the [certificate] LICENSE and which is consistent with a delegation agreement 22 [approved by] SUBMITTED TO the Board.
- 23 15–402.
- 24 (a) Except as otherwise provided under this title, a person may not represent 25 or imply to the public by use of the title "[certified] **LICENSED** physician assistant", by 26 other title, by description of services, methods, or procedures that the person is 27 [certified] **LICENSED** to practice as a physician assistant in the State.
- Unless [certified] **LICENSED** to practice as a physician assistant under this title, a person may not use the words or terms "physician assistant", "[certified] **LICENSED** physician assistant", or "P.A.".
- 31 **15–402.1.**

- 1 (A) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, A LICENSED 2 PHYSICIAN MAY NOT EMPLOY OR SUPERVISE AN INDIVIDUAL PRACTICING AS A 3 PHYSICIAN ASSISTANT WHO DOES NOT HAVE A LICENSE.
- 4 (B) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, A HOSPITAL,
 5 RELATED INSTITUTION, ALTERNATIVE HEALTH CARE SYSTEM, OR EMPLOYER
 6 MAY NOT EMPLOY AN INDIVIDUAL PRACTICING AS A PHYSICIAN ASSISTANT WHO
 7 DOES NOT HAVE A LICENSE.
- 8 (C) THE BOARD MAY IMPOSE A CIVIL PENALTY IN AN AMOUNT NOT 9 EXCEEDING \$1,000 FOR A VIOLATION OF THIS SECTION.
- 10 (D) THE BOARD SHALL REMIT ANY PENALTY COLLECTED UNDER THIS 11 SUBSECTION INTO THE BOARD OF PHYSICIANS FUND.
- 12 15–403.
- 13 (a) A person who violates § 15–401 or § 15–402 of this subtitle:
- 14 (1) Is guilty of a misdemeanor and on conviction is subject to a fine not exceeding \$5,000 or imprisonment not exceeding 5 years or both; and
- 16 (2) Shall lose [certification] **LICENSURE** as a physician assistant 17 under this title.
- 18 (b) (1) In addition to the penalties under subsection (a) of this section, a 19 person who violates § 15–401 of this subtitle may be subject to a civil penalty assessed 20 by the Board in an amount not exceeding \$5,000.
- 21 (2) The Board shall pay any civil penalty collected under this 22 subsection into the Board of Physicians Fund.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009.