By: Senator Conway

Introduced and read first time: February 3, 2012 Assigned to: Education, Health, and Environmental Affairs

## A BILL ENTITLED

### 1 AN ACT concerning

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# Health Occupations Boards - Regulations - Scope of Practice Advisory Committees

4 FOR the purpose of authorizing the Secretary of Health and Mental Hygiene to adopt  $\mathbf{5}$ regulations governing the practices of certain health occupations boards and 6 commissions under certain circumstances; authorizing the Secretary to convene 7 certain advisory committees for certain purposes; requiring the Secretary to 8 notify certain committees of the General Assembly of certain appointments; 9 requiring certain advisory committees to consist of certain members with certain expertise; requiring certain advisory committees to take into account 10 certain considerations when reviewing scope of practice disputes; requiring 11 12certain advisory committees to complete their work within a certain time; 13 specifying that certain advisory committees are subject to certain provisions of 14law relating to meetings; requiring certain advisory committees to report their 15findings to the Secretary; requiring the Secretary to issue a certain report to the 16 General Assembly within a certain time of receiving certain reports from certain 17advisory committees; defining a certain term; and generally relating to health 18 occupations boards, regulations, and scope of practice advisory committees.

- 19 BY repealing and reenacting, with amendments,
- 20 Article Health Occupations
- 21 Section 1–203
- 22 Annotated Code of Maryland
- 23 (2009 Replacement Volume and 2011 Supplement)

24 BY adding to

- 25 Article Health Occupations
- 26Section 1–701 through 1–705 to be under the new subtitle "Subtitle 7. Scope of27Practice Advisory Committees"
- 28 Annotated Code of Maryland
- 29 (2009 Replacement Volume and 2011 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 2 MARYLAND, That the Laws of Maryland read as follows:

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### **Article – Health Occupations**

4 1-203.

5 (a) The power of the Secretary over plans, proposals, and projects of units in 6 the Department does not include the power to disapprove or modify any decision or 7 determination that a board or commission established under this article makes under 8 authority specifically delegated by law to the board or commission.

9 (b) The power of the Secretary to transfer staff or functions of units in the 10 Department does not apply to any staff of a board or commission, established under 11 this article, or to any functions that pertain to licensing, disciplinary, or enforcement 12 authority, or to any other authority specifically delegated by law to a board or 13 commission.

14 (C) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (A) OF THIS 15 SECTION, THE SECRETARY MAY ADOPT REGULATIONS AFFECTING THE SCOPE 16 OF PRACTICE OF A HEALTH OCCUPATION OR PROFESSION REGULATED UNDER 17 THIS ARTICLE IF:

18(1) AGREEMENT IS REQUIRED BY MORE THAN ONE BOARD OR19COMMISSION ESTABLISHED UNDER THIS ARTICLE TO ADOPT THE REGULATIONS;

(2) THE BOARDS OR COMMISSIONS HAVE NOT ADOPTED THE
 REGULATIONS WITHIN 6 MONTHS OF THE DATE THAT THE REGULATIONS WERE
 REQUIRED UNDER LAW TO HAVE BEEN ADOPTED, OR EARLIER IF THE GENERAL
 ASSEMBLY AUTHORIZES THE SECRETARY TO ADOPT THE REGULATIONS; AND

(3) THE SECRETARY HAS APPOINTED A SCOPE OF PRACTICE
ADVISORY COMMITTEE UNDER SUBTITLE 7 OF THIS TITLE TO REVIEW THE
TOPIC OF THE REGULATIONS AND THE SECRETARY HAS REVIEWED THE
RECOMMENDATIONS OF THE COMMITTEE.

- 28 SUBTITLE 7. SCOPE OF PRACTICE ADVISORY COMMITTEES.
- 29 **1–701.**

30 (A) IN THIS SUBTITLE, "SCOPE OF PRACTICE DISPUTE" MEANS A
 31 DISPUTE OVER WHETHER A HEALTH CARE SERVICE MAY BE PROVIDED BY
 32 PRACTITIONERS OF A PARTICULAR HEALTH OCCUPATION OR PROFESSION
 33 REGULATED UNDER THIS ARTICLE.

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1 (B) "SCOPE OF PRACTICE DISPUTE" INCLUDES A DISAGREEMENT 2 BETWEEN BOARDS OR COMMISSIONS OVER THE ADOPTION OF REGULATIONS 3 RELATED TO SCOPE OF PRACTICE.

4 **1–702.** 

5 (A) THE SECRETARY MAY APPOINT A SCOPE OF PRACTICE ADVISORY 6 COMMITTEE TO:

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(1) **EXAMINE A SCOPE OF PRACTICE DISPUTE; AND** 

8 (2) PROVIDE RECOMMENDATIONS ON THE RESOLUTION OF THE 9 SCOPE OF PRACTICE DISPUTE TO THE SECRETARY.

10 **(B)** IF THE SECRETARY APPOINTS A SCOPE OF PRACTICE ADVISORY 11 COMMITTEE, THE SECRETARY SHALL PROMPTLY NOTIFY THE APPROPRIATE 12 COMMITTEES OF THE GENERAL ASSEMBLY OF THE APPOINTMENT.

13 **1–703.** 

(A) A SCOPE OF PRACTICE ADVISORY COMMITTEE ESTABLISHED UNDER
 THIS SUBTITLE SHALL CONSIST OF BETWEEN FIVE AND NINE MEMBERS,
 INCLUDING AT LEAST ONE MEMBER FROM EACH OF THE HEALTH OCCUPATIONS
 OR PROFESSIONS INVOLVED IN THE SCOPE OF PRACTICE DISPUTE.

18 **(B)** IF THE SCOPE OF PRACTICE DISPUTE IS BETWEEN TWO OR MORE 19 BOARDS OR COMMISSIONS, THE SECRETARY SHALL INVITE AT LEAST ONE 20 MEMBER FROM EACH OF THE BOARDS OR COMMISSIONS INVOLVED IN THE 21 SCOPE OF PRACTICE DISPUTE TO SERVE ON THE ADVISORY COMMITTEE.

22 (C) EACH MEMBER OF A SCOPE OF PRACTICE ADVISORY COMMITTEE 23 ESTABLISHED UNDER THIS SUBTITLE SHALL HAVE EXPERTISE IN:

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(1) THE SCOPE OF PRACTICE DISPUTE AT ISSUE; AND

- 25 (2) EVIDENCE–BASED HEALTH CARE PRACTICE.
- 26 **1–704.**

27 (A) IN REVIEWING A SCOPE OF PRACTICE DISPUTE, AN ADVISORY 28 COMMITTEE ESTABLISHED UNDER THIS SUBTITLE:

	4 SENATE BILL 866
1	(1) SHALL CONSIDER:
$2 \\ 3 \\ 4 \\ 5$	(I) WHETHER THE HEALTH OCCUPATION OR PROFESSION AT ISSUE HAS EVOLVED TOWARD THE ADDITION OF THE NEW SERVICE AND ANY EVIDENCE CONCERNING PRIOR CHANGES IN THE SCOPE OF PRACTICE OF THE OCCUPATION OR PROFESSION;
6 7 8	(II) WHETHER TRAINING FOR PRACTITIONERS OF THE HEALTH OCCUPATION OR PROFESSION AT ISSUE IS ADEQUATE FOR THE NEW SERVICE TO BE PERFORMED SAFELY AND EFFECTIVELY;
9 10 11	(III) WHETHER THERE IS EVIDENCE THAT THE NEW SERVICE, AS PERFORMED BY PRACTITIONERS OF THE HEALTH OCCUPATION OR PROFESSION AT ISSUE, WILL PROMOTE ACCESS TO QUALITY HEALTH CARE;
$\begin{array}{c} 12\\ 13 \end{array}$	(IV) WHAT RESOLUTION OF THE DISPUTE WOULD BE IN THE BEST HEALTH AND SAFETY INTEREST OF PATIENTS; AND
$\begin{array}{c} 14 \\ 15 \end{array}$	(V) OTHER FACTORS IDENTIFIED BY THE SECRETARY OR THE ADVISORY COMMITTEE; AND
16 17 18	(2) MAY CONSULT WITH RELEVANT STATE ENTITIES, TASK FORCES, COMMISSIONS, WORKGROUPS, OR PERSONS WHO HAVE EXPERTISE IN THE SCOPE OF PRACTICE DISPUTE AT ISSUE.
19 20	(B) AN ADVISORY COMMITTEE ESTABLISHED UNDER THIS SUBTITLE SHALL:
21 22	(1) COMPLETE ITS WORK WITHIN 6 MONTHS OF BEING CONVENED; AND
23	(2) ISSUE A REPORT ON ITS FINDINGS TO THE SECRETARY.
24 25 26	(C) MEETINGS OF AN ADVISORY COMMITTEE ESTABLISHED UNDER THIS SUBTITLE ARE SUBJECT TO THE MEETING PROVISIONS OF TITLE 10, SUBTITLE 5 OF THE STATE GOVERNMENT ARTICLE.
27	1-705.
28 29 30	(A) THE SECRETARY SHALL REPORT TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2–1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY ON THE FINDINGS AND RECOMMENDATIONS OF ANY

SCOPE OF PRACTICE ADVISORY COMMITTEE WITHIN 60 DAYS OF RECEIVING THE
 REPORT OF THE ADVISORY COMMITTEE.

3 (B) THE REPORT REQUIRED UNDER THIS SECTION SHALL INCLUDE 4 PLANS FOR REGULATORY ACTION OR LEGISLATIVE RECOMMENDATIONS, AS 5 APPROPRIATE.

6 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 7 July 1, 2012.