

HOUSE BILL 576

J2

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CF SB 732

By: Delegates K. Young, Bagnall, Boyce, Chisholm, Cullison, Kerr, Kipke, Krebs,
Lehman, Metzgar, Moon, Reilly, Saab, Solomon, Szeliga, Terrasa, ~~and~~
~~Wilson~~ Wilson, and Hill

Introduced and read first time: January 27, 2020
Assigned to: Health and Government Operations

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 11, 2020

CHAPTER _____

1 AN ACT concerning

2 **Health Occupations – Athletic Training – Revisions**

3 FOR the purpose of altering the definition of “practice athletic training”; ~~requiring a~~
4 ~~licensed athletic trainer to practice athletic training in accordance with standards of~~
5 ~~practice established by certain organizations~~; repealing certain provisions of law
6 requiring an athletic trainer to practice in a certain setting; altering the information
7 that is required to be included in an evaluation and treatment protocol; authorizing
8 an athletic trainer to provide treatment for not more than a certain number of days
9 to a certain athletic individual except under certain circumstances; providing that
10 preventive care is not considered treatment for a certain purpose; repealing certain
11 definitions; defining a certain term; repealing certain obsolete provisions; making
12 conforming changes; and generally relating to the Maryland Athletic Trainers Act.

13 BY repealing and reenacting, with amendments,
14 Article – Health Occupations
15 Section 14–5D–01, 14–5D–05, 14–5D–07(a), 14–5D–10, and 14–5D–11
16 Annotated Code of Maryland
17 (2014 Replacement Volume and 2019 Supplement)

18 BY repealing and reenacting, without amendments,
19 Article – Health Occupations
20 Section 14–5D–04
21 Annotated Code of Maryland

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



(2014 Replacement Volume and 2019 Supplement)

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

Article – Health Occupations

14–5D–01.

(a) In this subtitle the following words have the meanings indicated.

(b) “Alternate supervising physician” means one or more physicians designated by the supervising physician to provide supervision of an athletic trainer:

(1) During the absence of the supervising physician; and

(2) In accordance with the evaluation and treatment protocol on file with the Board.

[(c) “Athlete” means an individual who participates in an athletic activity.]

(d) “Athletic activity” means exercise, recreation, sport, competition, or game that:

(1) Requires physical strength, range of motion, flexibility, control, speed, stamina, or agility; and

(2) Is associated with a setting as defined under this section, an educational institution, or a professional, amateur, or recreational sports club or athletic organization.

(e) “Athletic injury” means an injury that affects an athlete’s participation or performance in an athletic activity.]

(C) “ATHLETIC INDIVIDUAL” MEANS AN INDIVIDUAL WHO PARTICIPATES IN AN ATHLETIC ACTIVITY, A JOB FUNCTION, OR A JOB-RELATED ACTIVITY THAT REQUIRES PHYSICAL STRENGTH, RANGE OF MOTION, FLEXIBILITY, CONTROL, SPEED, STAMINA, OR AGILITY.

[(f) ~~(E)~~ (D) “Board” means the State Board of Physicians.]

[(g) ~~(D)~~ (E) “Committee” means the Athletic Trainer Advisory Committee established under § 14–5D–04 of this subtitle.]

[(h) “Educational institution” includes:

1 (1) The schools in the public elementary and secondary education system
2 of the State;

3 (2) A noncollegiate educational institution governed under § 2–206 of the
4 Education Article; and

5 (3) An institution of higher education as defined in § 10–101 of the
6 Education Article.]

7 [(i)] ~~(F)~~ **(F)** “Evaluation and treatment protocol” means a document that is
8 executed by a physician and an athletic trainer that meets the requirements of §
9 14–5D–11 of this subtitle.

10 [(j)] ~~(F)~~ **(G)** “License” means a license issued by the Board to practice athletic
11 training.

12 [(k)] ~~(G)~~ **(H)** “Licensed athletic trainer” means an individual who is licensed by the
13 Board to practice athletic training.

14 [(l)] ~~(H)~~ **(I)** “Licensed health care practitioner” means an individual licensed,
15 certified, or otherwise authorized to practice a health occupation under this article.

16 [(m)] ~~(I)~~ **(J)** “National certifying board” means the National Athletic Trainers’
17 Association Board of Certification, Inc., or its successor organization.

18 [(n)] ~~(J)~~ **(K)** “Nonsupervising physician” means a physician licensed by the Board
19 who is not the supervising physician of the licensed athletic trainer.

20 [(o)] ~~(K)~~ **(L)** “Outside referral” means a request for treatment from a nonsupervising
21 physician or licensed health care practitioner.

22 [(p)] ~~(L)~~ **(M)** (1) “Practice athletic training” means application of the following
23 principles and methods for managing [athletic] injuries for ~~athletes~~ **ATHLETIC**
24 **INDIVIDUALS** in good overall health; ~~INDIVIDUALS~~ under the supervision of a licensed
25 physician:

26 (i) Prevention **AND WELLNESS PROMOTION**;

27 (ii) Clinical evaluation, **EXAMINATION, ~~DIAGNOSIS, and~~**
28 **assessment, AND DETERMINATION OF A PLAN OF CARE, INCLUDING APPROPRIATE**
29 **REFERRALS**;

30 (iii) Immediate care **AND EMERGENCY CARE**; and

31 (iv) Treatment, rehabilitation, and reconditioning.

1 (2) “Practice athletic training” includes:

2 (i) Organization and administration of an athletic training
3 program; [and]

4 (ii) Instruction to coaches, athletes, parents, medical personnel, and
5 community members regarding the care and prevention of [athletic] injuries; AND

6 (iii) ~~MAKING CLINICAL DECISIONS TO DETERMINE WHETHER A~~
7 ~~CONSULTATION OR REFERRAL IS NECESSARY~~ RECOGNITION AND MANAGEMENT OF
8 A CONCUSSION, INCLUDING MANAGEMENT OF AN ATHLETIC INDIVIDUAL’S
9 PROGRESSIVE RETURN TO ACTIVITY.

10 (3) “Practice athletic training” does not include:

11 (i) The practice of:

12 1. Chiropractic, including adjustments, manipulation, or
13 high velocity mobilizations of the spine or extremities;

14 2. Massage therapy;

15 3. Medicine;

16 4. Occupational therapy;

17 5. Physical therapy; or

18 6. Podiatry;

19 (ii) The reconditioning of systemic neurologic injuries, conditions, or
20 disease; or

21 (iii) ~~Except for the conditioning of an [athlete] INDIVIDUAL under~~
22 ~~the supervision of a treating physician, the treatment, rehabilitation, or reconditioning of~~
23 ~~[nonathletic] injuries or~~ THE TREATMENT OF disease.

24 [(q) “Setting” means a:

25 (1) Location where an athletic activity, as defined in subsection (d) of this
26 section, is being held;

27 (2) Health or fitness club;

28 (3) Clinic or hospital;

1 (4) Corporation; or

2 (5) Government agency.]

3 [(r)] ~~(M)~~ (N) “Supervising physician” means a physician who has been approved by
4 the Board to supervise one or more athletic trainers.

5 [(s)] ~~(N)~~ (O) “Supervision” means the responsibility of a physician to provide
6 ongoing and immediately available instruction, in person, by telephone, or by other
7 electronic means, that is adequate to ensure the safety and welfare of a patient and is
8 appropriate to the setting.

9 14–5D–04.

10 There is an Athletic Trainer Advisory Committee within the Board.

11 14–5D–05.

12 (a) The Committee consists of 11 members appointed by the Board as follows:

13 (1) [(i)] On or before September 30, 2011, three athletic trainers who:

14 1. Are certified by a national certifying board; and

15 2. Have a minimum of 5 years of clinical experience; and

16 (ii) On or after October 1, 2011, three] **THREE** licensed athletic
17 trainers who:

18 [1.] (I) Are certified by a national certifying board; and

19 [2.] (II) Have a minimum of 5 years of clinical experience;

20 (2) Three licensed physicians:

21 (i) At least one of whom is a specialist in orthopedic or sports
22 medicine; and

23 (ii) Two of whom previously or currently have partnered with or
24 directed an athletic trainer;

25 (3) One licensed chiropractor who has sports medicine experience;

26 (4) One licensed physical therapist;

27 (5) One licensed occupational therapist; and

1 (6) Two consumer members.

2 (b) (1) The athletic trainer members may be appointed by the Board from a
3 list of qualified individuals submitted to the Board by the Maryland Athletic Trainers
4 Association, Inc.

5 (2) The Board may request an additional list of nominees for each vacancy.

6 (c) The consumer member of the Committee:

7 (1) Shall be a member of the general public;

8 (2) May not be or ever have been:

9 (i) An athletic trainer;

10 (ii) A health care professional; or

11 (iii) In training to be an athletic trainer or other health professional;

12 and

13 (3) May not:

14 (i) Participate or ever have participated in a commercial or
15 professional field related to athletic training;

16 (ii) Have had within 2 years before appointment a financial interest
17 in a person regulated by the Board; or

18 (iii) Have had within 2 years before appointment a financial interest
19 in the provision of goods or services to athletic trainers or to the field of athletic training.

20 (d) (1) The term of a member is 3 years.

21 (2) The terms of members are staggered as required by the terms provided
22 for members of the Committee on October 1, 2009.

23 (3) At the end of a term, a member continues to serve until a successor is
24 appointed.

25 (4) A member who is appointed after a term has begun serves only for the
26 rest of the term and until a successor is appointed.

27 (e) (1) From among its members, the Committee shall elect a chair every 2
28 years.

1 (2) The chair shall serve in an advisory capacity to the Board as a
2 representative of the Committee.

3 14-5D-07.

4 (a) Except as otherwise provided in this subtitle, [on or after October 1, 2011,] an
5 individual shall be licensed by the Board before the individual may practice athletic
6 training in the State.

7 14-5D-10.

8 (a) An athletic trainer license authorizes the licensee to practice athletic training
9 services [in an approved setting] while the license is effective.

10 (b) A licensed athletic trainer shall practice athletic training in accordance with
11 the ~~evaluation~~:

12 ~~(1) EVALUATION~~ and treatment protocol between the athletic trainer and
13 a licensed physician; ~~AND~~

14 ~~(2) STANDARDS OF PRACTICE ESTABLISHED BY:~~

15 ~~(i) THE NATIONAL ATHLETIC TRAINERS' ASSOCIATION;~~

16 ~~(ii) THE BOARD OF CERTIFICATION FOR THE ATHLETIC~~
17 ~~TRAINER; OR~~

18 ~~(iii) ANY OTHER NATIONAL CERTIFYING ORGANIZATION~~
19 ~~APPROVED BY THE BOARD.~~

20 14-5D-11.

21 (a) Nothing in this title may be construed to authorize an athletic trainer to
22 practice except under the supervision of a licensed physician [and in an approved setting].

23 (b) Before an athletic trainer may practice athletic training, the athletic trainer
24 shall:

25 (1) Obtain a license under this subtitle;

26 (2) Enter into a written evaluation and treatment protocol with a licensed
27 physician; and

28 (3) Except as provided in § 14-5D-11.3(a) of this subtitle, obtain Board
29 approval of the evaluation and treatment protocol.

1 (c) An evaluation and treatment protocol shall:

2 (1) Describe the qualifications of the licensed physician and licensed
3 athletic trainer;

4 [(2) Describe the settings where the athletic trainer may practice;]

5 [(3) (2) Describe the physician supervision mechanisms that the
6 physician will use to give direction to the athletic trainer;

7 [(4) (3) [Specify] **DESCRIBE** the treatment procedures the athletic
8 trainer may perform;

9 [(5) (4) Describe tasks the athletic trainer may not perform;

10 [(6) (5) Describe specialized tasks the supervising physician is
11 delegating to the athletic trainer to perform with documentation of competencies,
12 certification, credentials, or any other requirements established by the Board to support
13 the delegation of the specialized tasks;

14 [(7) (6) Indicate whether the athletic trainer may accept outside
15 referrals from nonsupervising physicians and other licensed health care practitioners;

16 [(8) (7) Designate an alternate supervising physician, if appropriate or
17 necessary; and

18 [(9) (8) Contain an attestation that states the supervising physician will
19 be responsible for providing ongoing and immediately available instruction that is adequate
20 to ensure the safety and welfare of a patient and is appropriate to the setting.

21 (d) An athletic trainer may accept an outside referral from a nonsupervising
22 physician or licensed health care practitioner if:

23 (1) The supervising physician specifies in the evaluation and treatment
24 protocol that the athletic trainer may accept referrals from a nonsupervising physician or
25 licensed health care practitioner;

26 (2) The nonsupervising physician or licensed health care practitioner has
27 seen the [athlete] **ATHLETIC INDIVIDUAL** and has written an order for the care of the
28 [athlete] **ATHLETIC INDIVIDUAL**; and

29 (3) The treatment procedures to be used by the athletic trainer are:

30 (i) Within the scope of practice of an athletic trainer; and

1 (ii) Included in the evaluation and treatment protocol that the
2 athletic trainer has entered into with the supervising physician.

3 **(E) (1) AN ATHLETIC TRAINER MAY PROVIDE TREATMENT FOR NOT MORE**
4 **THAN 14 DAYS TO AN ATHLETIC INDIVIDUAL WITH AN INJURY THAT AFFECTS JOB**
5 **FUNCTION OR JOB-RELATED ACTIVITY UNLESS THE ATHLETIC TRAINER HAS**
6 **RECEIVED A REFERRAL FROM A HEALTH CARE PROVIDER LICENSED UNDER THIS**
7 **ARTICLE OTHER THAN UNDER THIS SUBTITLE TO TREAT THE INDIVIDUAL.**

8 **(2) FOR THE PURPOSE OF PARAGRAPH (1) OF THIS SUBSECTION,**
9 **PREVENTIVE CARE IS NOT CONSIDERED TREATMENT.**

10 ~~(E)~~ **(F)** In the event of a sudden departure, incapacity, or death of a supervising
11 physician, a designated alternate supervising physician may assume the role of the
12 supervising physician by submitting an evaluation and treatment protocol to the Board
13 within 15 days of the event.

14 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
15 October 1, 2020.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.