

# HOUSE BILL 1252

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CF SB 972

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By: **Delegate Belcastro**

Introduced and read first time: February 11, 2022

Assigned to: Health and Government Operations

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Committee Report: Favorable

House action: Adopted

Read second time: March 11, 2022

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## CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Physicians and Allied Health Professions – Reorganization and Revisions**

3 FOR the purpose of repealing obsolete and redundant language in, clarifying language in,  
4 and reorganizing certain provisions of law governing the State Board of Physicians  
5 and the regulation of physicians, physician assistants, and allied health  
6 professionals; authorizing the Board to regulate the allied health committees;  
7 repealing the requirement that the Board provide a certain data sheet; and generally  
8 relating to the State Board of Physicians and the regulation of physicians, physician  
9 assistants, and allied health professionals.

10 BY repealing

11 Article – Health Occupations

12 Section 14-101(n), 14-401.1(b) through (d), 14-405(f), 14-5A-02 through 14-5A-04,  
13 14-5A-10, 14-5A-11, 14-5A-13, 14-5A-14, 14-5A-16, 14-5A-17.1,  
14 14-5A-18.1, 14-5A-19, 14-5B-02 through 14-5B-04, 14-5B-10, 14-5B-12,  
15 14-5B-12.1, 14-5B-13, 14-5B-14.1, 14-5B-15.1, 14-5B-16, 14-5C-02  
16 through 14-5C-04, 14-5C-11, 14-5C-12, 14-5C-14, 14-5C-14.1, 14-5C-16,  
17 14-5C-18.1, 14-5C-19, 14-5D-02, 14-5D-03, 14-5D-09, 14-5D-12,  
18 14-5D-12.1, 14-5D-13, 14-5D-15, 14-5D-16, 14-5D-16.1, 14-5E-02  
19 through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1, 14-5E-19,  
20 14-5F-04, 14-5F-05, 14-5F-13, 14-5F-15.1, 14-5F-17, 14-5F-23,  
21 14-5G-02 through 14-5G-04, 14-5G-10, 14-5G-11, 14-5G-13, 14-5G-15,  
22 14-5G-16, 14-5G-19, 14-5G-21, 14-5G-22, 15-203, 15-204, 15-206,  
23 15-304, 15-305, 15-307, 15-308, 15-310 through 15-312, and 15-315  
24 through 15-316.1

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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.



1 Annotated Code of Maryland  
2 (2021 Replacement Volume)

3 BY renumbering

4 Article – Health Occupations

5 Section 14–206, 14–206.1, 14–301, 14–302, 14–306, 14–307, 14–308, 14–308.1,  
6 14–309, 14–311, 14–312, 14–313, 14–313.1, 14–314, 14–315, 14–316, 14–317,  
7 14–318 through 14–320, 14–322, 14–404, 14–413 through 14–415, 14–502,  
8 14–503, 14–504, 14–505, 14–506, 14–507, 14–508, 14–509, 14–601, 14–602,  
9 14–603, 14–605, 14–607, 15–101 through 15–103, 15–201, 15–202, 15–205,  
10 15–301, 15–302, 15–302.1 through 15–302.3, 15–303, 15–306, 15–309, 15–313,  
11 15–314, 15–317, 15–401, 15–402, 15–402.1, 15–403, 15–501, and 15–502,  
12 respectively

13 to be Section 14–401.2, 14–401.3, 14–501, 14–502, 14–503, 14–301, 14–505,  
14 14–302, 14–303, 14–506, 14–507, 14–304, 14–529, 14–305, 14–508, 14–306,  
15 14–307, 14–509 through 14–511, 14–512, 14–515, 14–517 through 14–519,  
16 14–414, 14–513, 14–526, 14–525, 14–415, 14–523, 14–520, 14–522, 14–527,  
17 14–528, 14–413, 14–521, 14–524, 14–5H–01 through 14–5H–03, 14–5H–04,  
18 14–5H–05, 14–5H–06, 14–5H–07, 14–5H–08, 14–5H–09 through 14–5H–11,  
19 14–5H–12, 14–5H–13, 14–5H–14, 14–5H–15, 14–5H–16, 14–5H–17,  
20 14–5H–18, 14–5H–19, 14–5H–20, 14–5H–21, 14–5H–22, and 14–5H–23,  
21 respectively

22 Annotated Code of Maryland  
23 (2021 Replacement Volume)

24 BY repealing and reenacting, with amendments,

25 Article – Correctional Services

26 Section 9–603(d)(2)

27 Annotated Code of Maryland

28 (2017 Replacement Volume and 2021 Supplement)

29 BY repealing and reenacting, with amendments,

30 Article – Courts and Judicial Proceedings

31 Section 5–106(r), 5–715(d), and 10–205(b)

32 Annotated Code of Maryland

33 (2020 Replacement Volume and 2021 Supplement)

34 BY repealing and reenacting, without amendments,

35 Article – Health – General

36 Section 4–201(a), 5–601(a), and 13–3301(a)

37 Annotated Code of Maryland

38 (2019 Replacement Volume and 2021 Supplement)

39 BY repealing and reenacting, with amendments,

40 Article – Health – General

41 Section 4–201(s), 5–601(v), 13–3301(d), and 18–214.1(b)

42 Annotated Code of Maryland

1 (2019 Replacement Volume and 2021 Supplement)

2 BY repealing and reenacting, with amendments,

3 Article – Health Occupations

4 Section 1–302(g), 1–306(e), 8–205(a)(3), 11–404.2(h), 12–102(c)(2),  
5 14–101(a–1), (g), (i), and (o), 14–102(a), 14–205, 14–207(b) through (d) and (f),  
6 14–3A–01 Section 5(b)(3)(i), 14–401.1(a)(5) and (e) through (k), 14–402(a), (c),  
7 (e), and (f), 14–405(a) and (g), 14–406, 14–409(a) and (c), 14–411(d), (g), (h),  
8 (j), (k), and (p), 14–411.1(b) through (d), 14–416(a), 14–5A–01(c), 14–5A–05,  
9 14–5A–09, 14–5A–17(a), 14–5B–07(a)(2), 14–5B–09, 14–5B–11, 14–5B–14(a),  
10 14–5C–01(c), 14–5C–05, 14–5C–08(b), 14–5C–09, 14–5C–10, 14–5C–17(a),  
11 14–5D–07(b), 14–5D–08, 14–5D–10(a), 14–5D–14(a), 14–5E–01(g),  
12 14–5E–08(b), 14–5E–09, 14–5E–10(a), 14–5E–13, 14–5E–14, 14–5E–16(a),  
13 14–5F–11, 14–5F–12, 14–5F–15, 14–5F–16, 14–5F–18(a), 14–5F–21,  
14 14–5F–24(c), 14–5G–09, 14–5G–14(h), 14–5G–17, and 14–5G–18(a)

15 Annotated Code of Maryland

16 (2021 Replacement Volume)

17 BY repealing and reenacting, without amendments,

18 Article – Health Occupations

19 Section 14–101(a), 14–5A–01(a), 14–5C–01(a), and 14–5E–01(a)

20 Annotated Code of Maryland

21 (2021 Replacement Volume)

22 BY adding to

23 Article – Health Occupations

24 Section 14–101(a–2), (n), and (q), 14–404, 14–417, 14–504, 14–514, 14–516,  
25 14–5A–06(e), 14–5B–05(f), 14–5C–06(e), 14–5D–05(f), 14–5E–06(e), and  
26 14–5F–07(g)

27 Annotated Code of Maryland

28 (2021 Replacement Volume)

29 BY repealing and reenacting, with amendments,

30 Article – Health Occupations

31 Section 14–301, 14–303, 14–304(b), 14–305, 14–306, 14–307, 14–401.2(e), and  
32 14–413; 14–503(c) and (e), 14–505(b), 14–506(a), 14–510(a), 14–511(b),  
33 14–515(a), 14–517(a)(1), 14–518(a)(1), 14–524(b) and (c), 14–527, and  
34 14–528(c) to be under the amended subtitle “Subtitle 5. Physicians”; and  
35 14–5H–01(e) through (i) and (j) through (u), 14–5H–02, 14–5H–03(c), (d), and  
36 (e)(1), 14–5H–06(a), 14–5H–07(c), 14–5H–08(c)(2)(ii)1., (g), (k), (l)(2), and (m),  
37 14–5H–09(a) and (b), 14–5H–10(e), 14–5H–12(a), 14–5H–14, 14–5H–15,  
38 14–5H–16(a), and 14–5H–21 through 14–5H–23

39 Annotated Code of Maryland

40 (2021 Replacement Volume)

41 (As enacted by Section 2 of this Act)

42 BY adding to

- 1 Article – Health Occupations  
2 Section 14–513(c) and (d), 14–521(c), 14–524(b), 14–525(d), and 14–528(d); and  
3 14–5H–16(c) through (e) to be under the new subtitle “Subtitle 5H. Physician  
4 Assistants”  
5 Annotated Code of Maryland  
6 (2021 Replacement Volume)  
7 (As enacted by Section 2 of this Act)
- 8 BY repealing and reenacting, without amendments,  
9 Article – Health Occupations  
10 Section 14–5H–01(a)  
11 Annotated Code of Maryland  
12 (2021 Replacement Volume)  
13 (As enacted by Section 2 of this Act)
- 14 BY repealing  
15 Article – Health Occupations  
16 Section 14–5H–01(d) and (i–1)  
17 Annotated Code of Maryland  
18 (2021 Replacement Volume)  
19 (As enacted by Section 2 of this Act)
- 20 BY repealing and reenacting, without amendments,  
21 Article – Transportation  
22 Section 13–616(a)(1)  
23 Annotated Code of Maryland  
24 (2020 Replacement Volume and 2021 Supplement)
- 25 BY repealing and reenacting, with amendments,  
26 Article – Transportation  
27 Section 13–616(a)(7)  
28 Annotated Code of Maryland  
29 (2020 Replacement Volume and 2021 Supplement)
- 30 BY repealing and reenacting, without amendments,  
31 Article – Tax – General  
32 Section 10–752(a)(1)  
33 Annotated Code of Maryland  
34 (2016 Replacement Volume and 2021 Supplement)
- 35 BY repealing and reenacting, with amendments,  
36 Article – Tax – General  
37 Section 10–752(a)(3) and (d)(7)  
38 Annotated Code of Maryland  
39 (2016 Replacement Volume and 2021 Supplement)

1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,  
2 That Section(s) 14-101(n), 14-401.1(b) through (d), 14-405(f), 14-5A-02 through  
3 14-5A-04, 14-5A-10, 14-5A-11, 14-5A-13, 14-5A-14, 14-5A-16, 14-5A-17.1,  
4 14-5A-18.1, 14-5A-19, 14-5B-02 through 14-5B-04, 14-5B-10, 14-5B-12, 14-5B-12.1,  
5 14-5B-13, 14-5B-14.1, 14-5B-15.1, 14-5B-16, 14-5C-02 through 14-5C-04, 14-5C-11,  
6 14-5C-12, 14-5C-14, 14-5C-14.1, 14-5C-16, 14-5C-18.1, 14-5C-19, 14-5D-02,  
7 14-5D-03, 14-5D-09, 14-5D-12, 14-5D-12.1, 14-5D-13, 14-5D-15, 14-5D-16,  
8 14-5D-16.1, 14-5E-02 through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1,  
9 14-5E-19, 14-5F-04, 14-5F-05, 14-5F-13, 14-5F-15.1, 14-5F-17, 14-5F-23, 14-5G-02  
10 through 14-5G-04, 14-5G-10, 14-5G-11, 14-5G-13, 14-5G-15, 14-5G-16, 14-5G-19,  
11 14-5G-21, 14-5G-22, 15-203, 15-204, 15-206, 15-304, 15-305, 15-307,  
12 15-308, 15-310 through 15-312, and 15-315 through 15-316.1 of Article – Health  
13 Occupations of the Annotated Code of Maryland be repealed.

14 SECTION 2. AND BE IT FURTHER ENACTED, That Section(s) 14-206, 14-206.1,  
15 14-301, 14-302, 14-306, 14-307, 14-308, 14-308.1, 14-309, 14-311, 14-312, 14-313,  
16 14-313.1, 14-314, 14-315, 14-316, 14-317, 14-318 through 14-320, 14-322, 14-404,  
17 14-413 through 14-415, 14-502, 14-503, 14-504, 14-505, 14-506, 14-507, 14-508,  
18 14-509, 14-601, 14-602, 14-603, 14-605, 14-607, 15-101 through 15-103, 15-201,  
19 15-202, 15-205, 15-301, 15-302, 15-302.1 through 15-302.3, 15-303, 15-306, 15-309,  
20 15-313, 15-314, 15-317, 15-401, 15-402, 15-402.1, 15-403, 15-501, and 15-502,  
21 respectively, of Article – Health Occupations of the Annotated Code of Maryland be  
22 renumbered to be Section(s) 14-401.2, 14-401.3, 14-501, 14-502, 14-503, 14-301, 14-505,  
23 14-302, 14-303, 14-506, 14-507, 14-304, 14-529, 14-305, 14-508, 14-306, 14-307,  
24 14-509 through 14-511, 14-512, 14-515, 14-517 through 14-519, 14-414, 14-513, 14-526,  
25 14-525, 14-415, 14-523, 14-520, 14-522, 14-527, 14-528, 14-413, 14-521, 14-524,  
26 14-5H-01 through 14-5H-03, 14-5H-04, 14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08,  
27 14-5H-09 through 14-5H-11, 14-5H-12, 14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16,  
28 14-5H-17, 14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23,  
29 respectively.

30 SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read  
31 as follows:

32 **Article – Correctional Services**

33 9-603.

34 (d) (2) If an assessment conducted under paragraph (1) of this subsection  
35 indicates opioid use disorder, an evaluation of the inmate shall be conducted by a health  
36 care practitioner with prescriptive authority authorized under Title 8[,] OR Title 14[, or  
37 Title 15] of the Health Occupations Article.

38 **Article – Courts and Judicial Proceedings**

39 5-106.

1 (r) A prosecution for an offense under [§ 14-601] § 14-527 of the Health  
2 Occupations Article of practicing, attempting to practice, or offering to practice medicine  
3 without a license shall be instituted within 3 years after the offense was committed.

4 5-715.

5 (d) Any person who acts in good faith is not civilly liable for giving any of the  
6 information required under [§ 14-413 or § 14-414] § 14-517 OR § 14-518 of the Health  
7 Occupations Article.

8 10-205.

9 (b) Records, reports, statements, notes, or information assembled or obtained by  
10 the Maryland Department of Health, the Maryland Commission to Study Problems of Drug  
11 Addiction, the Medical and Chirurgical Faculty or its allied medical societies, the Maryland  
12 Institute for Emergency Medical Services Systems, an in-hospital staff committee, or a  
13 national organized medical society or research group that are declared confidential by §  
14 4-102 of the Health – General Article or [§ 14-506] § 14-415 of the Health Occupations  
15 Article, are not admissible in evidence in any proceeding.

#### 16 Article – Health – General

17 4-201.

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

19 (s) “Physician assistant” means an individual who is licensed under Title [15] 14,  
20 **SUBTITLE 5H** of the Health Occupations Article to practice medicine with physician  
21 supervision.

22 5-601.

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

24 (v) “Physician assistant” means an individual who is licensed under Title [15] 14,  
25 **SUBTITLE 5H** of the Health Occupations Article to practice medicine with physician  
26 supervision.

27 13-3301.

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

29 (d) “Certifying provider” means an individual who:

1                   (1)   (i)   1.    Has an active, unrestricted license to practice medicine  
2 that was issued by the State Board of Physicians under Title 14 of the Health Occupations  
3 Article; and

4                                   2.    Is in good standing with the State Board of Physicians;

5                                   (ii) 1.    Has an active, unrestricted license to practice dentistry  
6 that was issued by the State Board of Dental Examiners under Title 4 of the Health  
7 Occupations Article; and

8                                   2.    Is in good standing with the State Board of Dental  
9 Examiners;

10                                  (iii) 1.    Has an active, unrestricted license to practice podiatry  
11 that was issued by the State Board of Podiatric Medical Examiners under Title 16 of the  
12 Health Occupations Article; and

13                                   2.    Is in good standing with the State Board of Podiatric  
14 Medical Examiners;

15                                  (iv) 1.    Has an active, unrestricted license to practice registered  
16 nursing and has an active, unrestricted certification to practice as a nurse practitioner or  
17 a nurse midwife that were issued by the State Board of Nursing under Title 8 of the Health  
18 Occupations Article; and

19                                   2.    Is in good standing with the State Board of Nursing; or

20                                  (v) 1.    Has an active, unrestricted license to practice as a  
21 physician assistant issued by the State Board of Physicians under Title [15] 14, **SUBTITLE**  
22 **5H** of the Health Occupations Article;

23                                   2.    Has an active delegation agreement with a primary  
24 supervising physician who is a certifying provider; and

25                                   3.    Is in good standing with the State Board of Physicians;

26                   (2)    Has a State controlled dangerous substances registration; and

27                   (3)    Is registered with the Commission to make cannabis available to  
28 patients for medical use in accordance with regulations adopted by the Commission.

29 18–214.1.

30           (b)   Notwithstanding any other provision of law, the following health care  
31 providers may prescribe, dispense, or otherwise provide antibiotic therapy to any sexual  
32 partner of a patient diagnosed with chlamydia, gonorrhea, or trichomoniasis without  
33 making a personal physical assessment of the patient's partner:

1 (1) A physician licensed under Title 14 of the Health Occupations Article;

2 (2) An advanced practice registered nurse with prescriptive authority  
3 licensed under Title 8 of the Health Occupations Article acting in accordance with § 8–508  
4 of the Health Occupations Article;

5 (3) An authorized physician assistant licensed under Title [15] 14,  
6 **SUBTITLE 5H** of the Health Occupations Article acting in accordance with [§ 15–302.2]  
7 **14–5H–10** of the Health Occupations Article; and

8 (4) A registered nurse employed by a local health department who complies  
9 with:

10 (i) The formulary developed and approved under § 3–403(b) of this  
11 article; and

12 (ii) The requirements established under § 8–512 of the Health  
13 Occupations Article.

#### 14 **Article – Health Occupations**

15 1–302.

16 (g) Subsection (d)(12) of this section may not be construed to:

17 (1) Permit an individual or entity to engage in the insurance business, as  
18 defined in § 1–101 of the Insurance Article, without obtaining a certificate of authority from  
19 the Maryland Insurance Commissioner and satisfying all other applicable requirements of  
20 the Insurance Article;

21 (2) (i) Impose additional obligations on a carrier providing  
22 incentive–based compensation to a health care practitioner under § 15–113 of the Insurance  
23 Article; or

24 (ii) Require the disclosure of information regarding the  
25 incentive–based compensation, except as required under § 15–113 of the Insurance Article;

26 (3) Authorize a health care entity to knowingly make a direct or indirect  
27 payment to a health care practitioner as an inducement to reduce or limit medically  
28 necessary services to individuals who are under the direct care of the health care  
29 practitioner;

30 (4) Permit an arrangement that violates:

31 (i) [§ 14–404(a)(15)] **§ 14–515(A)(15)** of this article; or



1 (ii) § 8–508, § 8–511, § 8–512, § 8–516, or § 8–517 of the Criminal  
2 Law Article;

3 (5) Narrow, expand, or otherwise modify:

4 (i) Any definition in § 1–301 of this subtitle, including the definition  
5 of “in–office ancillary services”; or

6 (ii) Any exception in subsection (d)(4) of this section including the  
7 exception for referrals for in–office ancillary services or tests; or

8 (6) Require a compensation arrangement to comply with the provisions of  
9 subsection (d)(12) of this section if the compensation arrangement is exempt under any  
10 other provision of subsection (d) of this section.

11 1–306.

12 (e) This section does not prohibit:

13 (1) A referring laboratory from billing for anatomic pathology services or  
14 histologic processing if the referring laboratory must send a specimen to another clinical  
15 laboratory for histologic processing or anatomic pathology consultation; and

16 (2) A health care practitioner who takes a Pap test specimen from a patient  
17 and who orders but does not supervise or perform an anatomic pathology service on the  
18 specimen, from billing a patient or payor for the service, provided the health care  
19 practitioner complies with:

20 (i) The disclosure requirements of **[§ 14–404(a)(16)] §**  
21 **14–515(A)(16)** of this article; and

22 (ii) The ethics policies of the American Medical Association that  
23 relate to referring physician billing for laboratory services.

24 8–205.

25 (a) In addition to the powers and duties set forth elsewhere in this title, the Board  
26 has the following powers and duties:

27 (3) To adopt rules and regulations for the performance of delegated medical  
28 functions that are recognized jointly by the State Board of Physicians and the State Board  
29 of Nursing, under **[§ 14–306(d)] § 14–503(D)** of this article;

30 11–404.2.

31 (h) A therapeutically certified optometrist shall be:

1 (1) Held to the same standard of care as an ophthalmologist who is licensed  
2 under Title 14 of this article and who is providing similar services; and

3 (2) Required to comply with the notice requirement under [§ 14-508] §  
4 **14-520** of this article.

5 12-102.

6 (c) (2) This title does not prohibit:

7 (i) A licensed veterinarian from:

8 1. Personally preparing and dispensing the veterinarian's  
9 prescriptions; or

10 2. Dispensing, in accordance with § 2-313(c) of the  
11 Agriculture Article, compounded nonsterile preparations or compounded sterile  
12 preparations provided by a pharmacy;

13 (ii) A licensed dentist, physician, or podiatrist from personally  
14 preparing and dispensing the dentist's, physician's, or podiatrist's prescriptions when:

15 1. The dentist, physician, or podiatrist:

16 A. Has applied to the board of licensure in this State which  
17 licensed the dentist, physician, or podiatrist;

18 B. Has demonstrated to the satisfaction of that board that the  
19 dispensing of prescription drugs or devices by the dentist, physician, or podiatrist is in the  
20 public interest;

21 C. Has received a written permit from that board to dispense  
22 prescription drugs or devices except that a written permit is not required in order to  
23 dispense starter dosages or samples without charge; and

24 D. Posts a sign conspicuously positioned and readable  
25 regarding the process for resolving incorrectly filled prescriptions or includes written  
26 information regarding the process with each prescription dispensed;

27 2. The person for whom the drugs or devices are prescribed  
28 is a patient of the prescribing dentist, physician, or podiatrist;

29 3. The dentist, physician, or podiatrist does not have a  
30 substantial financial interest in a pharmacy; and

31 4. The dentist, physician, or podiatrist:

- 1                   A.     Complies with the dispensing and labeling requirements  
2 of this title;
- 3                   B.     Records the dispensing of the prescription drug or device  
4 on the patient's chart;
- 5                   C.     Allows the Office of Controlled Substances Administration  
6 to enter and inspect the dentist's, physician's, or podiatrist's office at all reasonable hours  
7 and in accordance with § 12-102.1 of this subtitle;
- 8                   D.     On inspection by the Office of Controlled Substances  
9 Administration, signs and dates an acknowledgment form provided by the Office of  
10 Controlled Substances Administration relating to the requirements of this section;
- 11                  E.     Except for starter dosages or samples without charge,  
12 provides the patient with a written prescription, maintains prescription files in accordance  
13 with § 12-403(c)(13) of this title, and maintains a separate file for Schedule II prescriptions;
- 14                  F.     Does not direct patients to a single pharmacist or  
15 pharmacy in accordance with § 12-403(c)(8) of this title;
- 16                  G.     Does not receive remuneration for referring patients to a  
17 pharmacist or pharmacy;
- 18                  H.     Complies with the child resistant packaging requirements  
19 regarding prescription drugs under Title 22, Subtitle 3 of the Health – General Article;
- 20                  I.     Complies with drug recalls;
- 21                  J.     Maintains biennial inventories and complies with any  
22 other federal and State record-keeping requirements relating to controlled dangerous  
23 substances;
- 24                  K.     Purchases prescription drugs from a pharmacy or  
25 wholesale distributor who holds a permit issued by the Board of Pharmacy, as verified by  
26 the Board of Pharmacy;
- 27                  L.     Annually reports to the respective board of licensure  
28 whether the dentist, physician, or podiatrist has personally prepared and dispensed  
29 prescription drugs within the previous year; and
- 30                  M.     Completes ten continuing education credits over a 5-year  
31 period relating to the preparing and dispensing of prescription drugs, offered by the  
32 Accreditation Council for Pharmacy Education (ACPE) or as approved by the Secretary, in  
33 consultation with each respective board of licensure, as a condition of permit renewal;

1 (iii) A licensed physician from dispensing a topical medication  
 2 without obtaining the permit required under item (ii)1C of this paragraph or completing  
 3 the continuing education required under item (ii)4M of this paragraph when the physician:

4 1. Otherwise complies with item (ii) of this paragraph; and

5 2. Has obtained a special written permit under [§ 14–509] §  
 6 **14–522** of this article;

7 (iv) A licensed physician who complies with the requirements of item  
 8 (ii) of this paragraph from personally preparing and dispensing a prescription written by:

9 1. A physician assistant in accordance with a delegation  
 10 agreement that complies with Title [15] **14**, Subtitle [3] **5H** of this article; or

11 2. A nurse practitioner who is authorized to practice under  
 12 Title 8, Subtitle 3 of this article and is working with the physician in the same office setting;  
 13 or

14 (v) A hospital–based clinic from dispensing prescriptions to its  
 15 patients.

16 14–101.

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

18 (a–1) “Allied health professional” means an individual licensed by the Board under  
 19 Subtitle 5A, 5B, 5C, 5D, 5E, [or] 5F, **5G**, **OR 5H** of this title [or Title 15 of this article].

20 **(A–2) “APPLICANT” MEANS AN INDIVIDUAL APPLYING FOR INITIAL**  
 21 **LICENSURE AS A PHYSICIAN OR ALLIED HEALTH PROFESSIONAL IN THE STATE.**

22 (g) “License” means, unless the context requires otherwise, a license issued by the  
 23 Board to practice medicine **OR AN ALLIED HEALTH PROFESSION REGULATED BY THE**  
 24 **BOARD.**

25 (i) “Licensee” means an individual to whom **THE BOARD ISSUES** a license [is  
 26 issued], including an individual practicing medicine within or as a professional corporation  
 27 or professional association.

28 **(N) “PHYSICIAN ASSISTANT” MEANS AN INDIVIDUAL WHO IS LICENSED**  
 29 **UNDER SUBTITLE 5H OF THIS TITLE TO PRACTICE MEDICINE WITH PHYSICIAN**  
 30 **SUPERVISION.**

31 (o) (1) “Practice medicine” means to engage, with or without compensation, in  
 32 medical:

- 1 (i) Diagnosis;
- 2 (ii) Healing;
- 3 (iii) Treatment; or
- 4 (iv) Surgery.

5 (2) "Practice medicine" includes doing, undertaking, professing to do, and  
6 attempting any of the following:

7 (i) Diagnosing, healing, treating, preventing, prescribing for, or  
8 removing any physical, mental, or emotional ailment or supposed ailment of an individual:

9 1. By physical, mental, emotional, or other process that is  
10 exercised or invoked by the practitioner, the patient, or both; or

11 2. By appliance, test, drug, operation, or treatment;

12 (ii) Ending of a human pregnancy; and

13 (iii) Performing acupuncture as provided under [§ 14-504] § 14-526  
14 of this title.

15 (3) "Practice medicine" does not include:

16 (i) Selling any nonprescription drug or medicine;

17 (ii) Practicing as an optician; or

18 (iii) Performing a massage or other manipulation by hand, but by no  
19 other means.

20 **(Q) "REHABILITATION PROGRAM" MEANS THE PROGRAM OF THE BOARD**  
21 **OR THE NONPROFIT ENTITY WITH WHICH THE BOARD CONTRACTS UNDER §**  
22 **14-401.1(D) OF THIS TITLE THAT EVALUATES AND PROVIDES ASSISTANCE TO**  
23 **IMPAIRED PHYSICIANS AND OTHER HEALTH PROFESSIONALS REGULATED BY THE**  
24 **BOARD WHO ARE DIRECTED BY THE BOARD TO RECEIVE TREATMENT AND**  
25 **REHABILITATION FOR ALCOHOLISM, CHEMICAL DEPENDENCY, OR OTHER**  
26 **PHYSICAL, EMOTIONAL, OR MENTAL CONDITIONS.**

27 14-102.

28 (a) This title does not limit the right of:

1 (1) An individual to practice a health occupation that the individual is  
2 authorized to practice under this article; [or]

3 (2) A Christian Science practitioner, who is accredited by the First Church  
4 of Christ, Scientist, in Boston, Massachusetts, from:

5 (i) Dealing with human ills in accordance with the tenets of  
6 Christian Science; and

7 (ii) Charging for services[.];

8 **(3) A LICENSED HOME MEDICAL EQUIPMENT PROVIDER TO PROVIDE**  
9 **HOME MEDICAL EQUIPMENT SERVICES AS DEFINED UNDER TITLE 19, SUBTITLE 4A**  
10 **OF THE HEALTH – GENERAL ARTICLE; OR**

11 **(4) A LICENSED RESPIRATORY CARE PRACTITIONER TO PRACTICE**  
12 **RESPIRATORY CARE WITHIN THE SCOPE OF PRACTICE OF THE RESPIRATORY CARE**  
13 **PRACTITIONER’S LICENSE, INCLUDING PRACTICING RESPIRATORY CARE IN A SLEEP**  
14 **LABORATORY.**

15 14–205.

16 (a) In addition to the powers and duties set forth in this title [and in Title 15 of  
17 this article], the Board shall:

18 (1) Enforce this title [and Title 15 of this article];

19 (2) Adopt regulations to carry out the provisions of this title [and Title 15  
20 of this article];

21 (3) Establish policies for Board operations;

22 (4) Maintain the rules, regulations, and policies of the Board so that the  
23 rules, regulations, and policies reflect the current practices of the Board;

24 (5) Oversee:

25 (i) The licensing requirements for physicians and the allied health  
26 professionals; and

27 (ii) The issuance and renewal of licenses;

28 (6) Maintain secure and complete records;

- 1 (7) Review and preliminarily investigate complaints, including  
2 acknowledging receipt of complaints and informing complainants of the final disposition of  
3 complaints;
- 4 (8) Develop and implement methods to:
- 5 (i) Assess and improve licensee practices; and
- 6 (ii) Ensure the ongoing competence of licensees;
- 7 (9) Ensure that an opportunity for a hearing is provided to an individual,  
8 in accordance with law, before any action is taken against the individual;
- 9 (10) Adjudicate nondisciplinary matters within the Board's jurisdiction;
- 10 (11) Report on all disciplinary actions, license denials, and license  
11 surrenders;
- 12 (12) Establish appropriate fees that are adequate to fund the effective  
13 regulation of physicians and allied health professionals;
- 14 (13) Make recommendations that benefit the health, safety, and welfare of  
15 the public;
- 16 (14) Provide ongoing education and training for Board members to ensure  
17 that the Board members can competently discharge their duties;
- 18 (15) Direct educational outreach to and communicate with licensees and the  
19 public;
- 20 (16) Develop and adopt a budget that reflects revenues and supports the  
21 costs associated with each allied health profession regulated by the Board;
- 22 (17) Develop and approve an annual report and other required reports for  
23 submission to the Secretary, the Governor, the General Assembly, and the public;
- 24 (18) Approve contracts as needed and within budgetary limits;
- 25 (19) Appoint standing and ad hoc committees from among Board members  
26 as necessary;
- 27 (20) Delegate to the executive director of the Board the authority to  
28 discharge Board or disciplinary panel duties, as deemed appropriate and necessary by the  
29 Board or disciplinary panel, and hold the executive director accountable to the Board; and
- 30 (21) Appoint members of the disciplinary panels.

1 (b) (1) In addition to the powers set forth elsewhere in this title, the Board  
2 may:

3 (i) Adopt regulations to regulate the performance of acupuncture,  
4 but only to the extent authorized by [§ 14–504] § 14–526 of this title;

5 (ii) After consulting with the State Board of Pharmacy, adopt rules  
6 and regulations regarding the dispensing of prescription drugs by a licensed physician;

7 (iii) On receipt of a written and signed complaint, including a referral  
8 from the Commissioner of Labor and Industry, conduct an unannounced inspection of the  
9 office of a physician or acupuncturist, other than an office of a physician or acupuncturist  
10 in a hospital, related institution, freestanding medical facility, or a freestanding birthing  
11 center, to determine compliance at that office with the Centers for Disease Control and  
12 Prevention’s guidelines on universal precautions; and

13 (iv) Contract with others for the purchase of administrative and  
14 examination services to carry out the provisions of this title.

15 (2) The Board or a disciplinary panel may investigate an alleged violation  
16 of this title.

17 [(3) Subject to the Administrative Procedure Act and the hearing provisions  
18 of § 14–405 of this title, a disciplinary panel may deny a license to an applicant or, if an  
19 applicant has failed to renew the applicant’s license, refuse to renew or reinstate an  
20 applicant’s license for:

21 (i) Any of the reasons that are grounds for action under § 14–404, §  
22 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, or § 14–5F–18 of this title,  
23 as applicable; or

24 (ii) Failure to complete a criminal history records check in  
25 accordance with § 14–308.1 of this title.]

26 (c) (1) In addition to the duties set forth elsewhere in this title, the Board  
27 shall:

28 (i) Issue, for use in other jurisdictions, a certificate of professional  
29 standing to any [licensed physician] LICENSEE; and

30 (ii) Keep a list of all PENDING license applicants.

31 (2) (i) The Board shall keep a list of all [physicians] LICENSEES who  
32 are currently licensed.



1 (ii) The list shall include each [physician's] LICENSEE'S designated  
2 public address.

3 (iii) A [physician's] LICENSEE'S designated public address may be a  
4 post office box only if the [physician] LICENSEE provides to the Board a nonpublic address,  
5 under paragraph (3) of this subsection, that is not a post office box.

6 (iv) Each list prepared under this paragraph shall be kept as a  
7 permanent record of the Board.

8 (v) The list of [currently licensed physicians] CURRENT  
9 LICENSEES is a public record.

10 (3) (i) The Board shall maintain on file a [physician's] LICENSEE'S  
11 designated nonpublic address, if provided by the [physician] LICENSEE, to facilitate  
12 communication between the [physician] LICENSEE and the Board.

13 (ii) The Board shall offer a [physician] LICENSEE the opportunity to  
14 designate a nonpublic address, in addition to the [physician's] LICENSEE'S public address,  
15 at the time of initial licensure and license renewal.

16 (iii) A [physician] LICENSEE shall designate an address where the  
17 Board may send the [physician] LICENSEE mail.

18 (iv) A [physician's] LICENSEE'S designated nonpublic address is not  
19 a public record and may not be released by the Board.

20 **(D) THE BOARD MAY NOT RELEASE A LIST OF APPLICANTS FOR LICENSURE.**

21 **(E) THE BOARD MAY ADOPT REGULATIONS REGARDING COMMITTEES**  
22 **ESTABLISHED UNDER THIS TITLE GOVERNING:**

23 **(1) THE TERM OF OFFICE FOR MEMBERS;**

24 **(2) THE PROCEDURE FOR FILLING VACANCIES ON A COMMITTEE;**

25 **(3) THE REMOVAL OF MEMBERS; AND**

26 **(4) THE DUTIES OF EACH OFFICER.**

27 14-207.

28 (b) (1) The Board [may] SHALL set reasonable fees for the issuance and  
29 renewal of licenses and its other services PROVIDED TO PHYSICIANS AND ALLIED  
30 HEALTH PROFESSIONALS.

1           (2) The fees charged shall be set [so as] to **GENERATE SUFFICIENT**  
2 **FUNDS TO** approximate the cost of maintaining the Board, **THE LICENSURE PROGRAMS**  
3 **UNDER THIS TITLE, AND THE OTHER SERVICES IT PROVIDES TO PHYSICIANS AND**  
4 **ALLIED HEALTH PROFESSIONALS**, including the cost of providing a rehabilitation  
5 program for physicians **AND ALLIED HEALTH PROFESSIONALS** under [§ 14-401.1(g)] §  
6 **14-401.1(D)** of this title.

7           (3) Funds to cover the compensation and expenses of the Board members  
8 shall be generated by fees set under this section.

9           (4) **FEEs GENERATED BY PHYSICIAN OR ALLIED HEALTH**  
10 **PROFESSIONAL LICENSES SHALL BE USED TO MAINTAIN THE LICENSING PROGRAM**  
11 **AND SERVICES PROVIDED TO THAT PARTICULAR PROFESSION.**

12           (5) **THE FEES GENERATED SHALL BE USED TO COVER THE ACTUAL**  
13 **DOCUMENTED DIRECT AND INDIRECT COSTS OF FULFILLING THE STATUTORY AND**  
14 **REGULATORY DUTIES OF THE BOARD AS PROVIDED BY THE PROVISIONS OF THIS**  
15 **TITLE.**

16           (6) (i) **IN ADDITION TO THE FEE SET BY THE BOARD UNDER THIS**  
17 **SECTION FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL ASSESS A SEPARATE**  
18 **\$15 FEE FOR A RENEWAL OF EACH LICENSE FOR A PHYSICIAN ASSISTANT.**

19           (ii) **THE BOARD SHALL PAY THE FEE COLLECTED UNDER**  
20 **PARAGRAPH (1) OF THIS SUBSECTION TO THE PHYSICIAN ASSISTANT**  
21 **PRECEPTORSHIP TAX CREDIT FUND ESTABLISHED UNDER § 10-752 OF THE TAX –**  
22 **GENERAL ARTICLE.**

23           (c) [The] **EXCEPT AS PROVIDED IN SUBSECTION (B)(6) OF THIS SECTION,**  
24 **THE** Board shall pay all fees collected under the provisions of this title to the Comptroller  
25 of the State.

26           (d) (1) [In each of fiscal years 2019 through 2021, if the Governor does not  
27 include in the State budget at least \$400,000 for the operation of the Maryland Loan  
28 Assistance Repayment Program for Physicians and Physician Assistants under Title 24,  
29 Subtitle 17 of the Health – General Article, as administered by the Department, the  
30 Comptroller shall distribute:

31           (i) \$400,000 of the fees received from the Board to the Department  
32 to be used to make grants under the Maryland Loan Assistance Repayment Program for  
33 Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General  
34 Article to physicians and physician assistants engaged in primary care or to medical  
35 residents specializing in primary care who agree to practice for at least 2 years as primary

1 care physicians in a geographic area of the State that has been designated by the Secretary  
2 as being medically underserved; and

3 (ii) The balance of the fees to the Board of Physicians Fund.

4 (2) In fiscal year 2022, if the Governor does not include in the State budget  
5 at least \$1,000,000 for the operation of the Maryland Loan Assistance Repayment Program  
6 for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General  
7 Article, as administered by the Department, the Comptroller shall distribute:

8 (i) \$1,000,000 of the fees received from the Board to the Department  
9 to be used to make grants under the Maryland Loan Assistance Repayment Program for  
10 Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General  
11 Article to physicians and physician assistants engaged in primary care or to medical  
12 residents specializing in primary care who agree to practice for at least 2 years as primary  
13 care physicians in a geographic area of the State that has been designated by the Secretary  
14 as being medically underserved; and

15 (ii) The balance of the fees to the Board of Physicians Fund.

16 [(3)] (2) In fiscal year 2023 and each fiscal year thereafter, if the  
17 Department does not implement a permanent funding structure under § 24–1702(b)(1) of  
18 the Health – General Article and the Governor does not include in the State budget at least  
19 \$400,000 for the operation of the Maryland Loan Assistance Repayment Program for  
20 Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General  
21 Article, as administered by the Department, the Comptroller shall distribute:

22 (i) \$400,000 of the fees received from the Board to the Department  
23 to be used to make grants under the Maryland Loan Assistance Repayment Program for  
24 Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General  
25 Article to physicians and physician assistants engaged in primary care or to medical  
26 residents specializing in primary care who agree to practice for at least 2 years as primary  
27 care physicians in a geographic area of the State that has been designated by the Secretary  
28 as being medically underserved; and

29 (ii) The balance of the fees to the Board of Physicians Fund.

30 [(4)] (3) If the Governor includes in the State budget at least the amount  
31 specified in paragraph (1) [or (2)] of this subsection for the operation of the Maryland Loan  
32 Assistance Repayment Program for Physicians and Physician Assistants under Title 24,  
33 Subtitle 17 of the Health – General Article, as administered by the Department, the  
34 Comptroller shall distribute the fees to the Board of Physicians Fund.

35 (f) (1) In addition to the requirements of subsection (e) of this section, the  
36 Board shall fund the budget of the [Physician] Rehabilitation Program with fees set,  
37 collected, and distributed to the Fund under this title.

1 (2) After review and approval by the Board of a budget submitted by the  
2 [Physician] Rehabilitation Program, the Board may allocate money from the Fund to the  
3 [Physician] Rehabilitation Program.

4 14–301.

5 (a) **[To] IN ADDITION TO ANY OTHER REQUIREMENTS UNDER THIS TITLE, TO**  
6 qualify for a license, an applicant shall be an individual who meets the requirements of this  
7 section.

8 (b) The applicant shall be of good moral character.

9 (c) **[The] EXCEPT AS PROVIDED IN § 14–5F–11 OF THIS TITLE, THE** applicant  
10 shall be at least 18 years old.

11 **[(d) Except as provided in § 14–308 of this subtitle, the applicant shall:**

12 (1) (i) Have a degree of doctor of medicine from a medical school that is  
13 accredited by an accrediting organization that the Board recognizes in its regulations; and

14 (ii) Submit evidence acceptable to the Board of successful completion  
15 of 1 year of training in a postgraduate medical training program that is accredited by an  
16 accrediting organization that the Board recognizes in its regulations; or

17 (2) (i) Have a degree of doctor of osteopathy from a school of osteopathy  
18 in the United States, its territories or possessions, Puerto Rico, or Canada that has  
19 standards for graduation equivalent to those established by the American Osteopathic  
20 Association; and

21 (ii) Submit evidence acceptable to the Board of successful completion  
22 of 1 year of training in a postgraduate medical training program accredited by an  
23 accrediting organization that the Board recognizes in its regulations.]

24 **(D) THE APPLICANT SHALL COMPLETE A CRIMINAL HISTORY RECORDS**  
25 **CHECK IN ACCORDANCE WITH § 14–302 OF THIS SUBTITLE.**

26 (e) Except as otherwise provided in this [subtitle] TITLE, the applicant shall  
27 [pass an examination required] **MEET ANY EDUCATIONAL, CERTIFICATION, TRAINING,**  
28 **OR EXAMINATION REQUIREMENTS ESTABLISHED** by the Board.

29 (f) The applicant shall meet any other qualifications that the Board establishes  
30 in its regulations for license applicants.

31 **[(g) An otherwise qualified applicant who passes the examination after having**  
32 **failed the examination or any part of the examination 3 or more times may qualify for a**  
33 **license only if the applicant:**

1           (1)    Has successfully completed 2 or more years of a residency or fellowship  
2 accredited by the Accreditation Council on Graduate Medical Education or the American  
3 Osteopathic Association;

4           (2)    (i)    Has a minimum of 5 years of clinical practice of medicine:

5                   1.    In the United States or in Canada;

6                   2.    With at least 3 of the 5 years having occurred within 5  
7 years of the date of the application; and

8                   3.    That occurred under a full unrestricted license to practice  
9 medicine; and

10           (ii)   Has no disciplinary action pending and has had no disciplinary  
11 action taken against the applicant that would be grounds for discipline under § 14-404 of  
12 this title; or

13           (3)    Is board certified.]

14           **[(h) (G)**   (1)    The Board shall require as part of its examination or licensing  
15 procedures that an applicant for a license to practice medicine **OR AN ALLIED HEALTH**  
16 **PROFESSION** demonstrate an oral **AND WRITTEN** competency in the English language.

17                   (2)    Graduation from a recognized English-speaking undergraduate  
18 school or high school, including General Education Development (GED), after at least 3  
19 years of enrollment, or from a recognized English-speaking professional school is  
20 acceptable as proof of proficiency in the oral communication of the English language under  
21 this section.

22                   (3)    By regulation, the Board shall develop a procedure for testing  
23 individuals who because of their speech impairment are unable to complete satisfactorily a  
24 Board approved standardized test of oral competency.

25                   (4)    If any disciplinary charges or action that involves a problem with  
26 the oral communication of the English language are brought against a licensee under this  
27 title, the Board shall require the licensee to take and pass a Board approved standardized  
28 test of oral competency.

29           **[(i)**    The applicant shall complete a criminal history records check in accordance  
30 with § 14-308.1 of this subtitle.

31           (j)    (1)    The Board shall license an applicant to practice medicine if:

32                   (i)    The applicant:

1                   1.     Became licensed or certified as a physician in another  
2 jurisdiction under requirements that the Board determines are substantially equivalent to  
3 the licensing requirements of this title;

4                   2.     Is in good standing under the laws of the other  
5 jurisdiction;

6                   3.     Submits an application to the Board on a form that the  
7 Board requires; and

8                   4.     Pays to the Board an application fee set by the Board; and

9                   (ii)    The jurisdiction in which the applicant is licensed or certified  
10 offers a similar reciprocal licensing process for individuals licensed to practice medicine by  
11 the Board.

12                   (2)    The Board shall adopt regulations to implement this subsection.]

13 14–303.

14                   [(a)] To apply for a license **UNDER THIS TITLE**, an applicant shall:

15                   (1)    Complete a criminal history records check in accordance with [§  
16 14–308.1] **§ 14–302** of this subtitle;

17                   (2)    Submit an application to the Board on the form that the Board requires;  
18 and

19                   (3)    Pay to the Board the application fee set by the Board.

20                   [(b)] The Board may not release a list of applicants for licensure.]

21 14–304.

22                   (b)    (1)    On receipt of the criminal history record information of an applicant for  
23 licensure forwarded to the Board in accordance with [§ 14–308.1] **§ 14–302** of this subtitle,  
24 in determining whether to issue a license, the Board shall consider:

25                           (i)    The age at which the crime was committed;

26                           (ii)   The nature of the crime;

27                           (iii) The circumstances surrounding the crime;

28                           (iv)   The length of time that has passed since the crime;

- 1 (v) Subsequent work history;
- 2 (vi) Employment and character references; and
- 3 (vii) Other evidence that demonstrates whether the applicant poses a  
4 threat to the public health or safety.

5 (2) The Board may not issue a license if the criminal history record  
6 information required under [§ 14–308.1] **§ 14–302** of this subtitle has not been received.  
7 14–305.

8 (a) Except as otherwise provided in this title, a license authorizes the licensee to  
9 practice [medicine] **IN THIS STATE THE HEALTH OCCUPATION STATED ON THE**  
10 **LICENSE ISSUED BY THE BOARD** while the license is effective.

11 (b) A licensee may practice [medicine] **THE HEALTH OCCUPATION STATED ON**  
12 **THE LICENSE ISSUED BY THE BOARD** using only the name in which the license is issued.  
13 14–306.

14 (a) (1) The term of a license issued by the Board may not exceed 3 years.

15 (2) A license expires on a date set by the Board, unless the license is  
16 renewed for [a] **AN ADDITIONAL** term as provided in this section.

17 (b) (1) Subject to paragraph (2) of this subsection, at least 1 month before the  
18 license expires, the Board shall send to the licensee, by electronic or first–class mail to the  
19 last known electronic or physical address of the licensee[:

20 (i) **A] A** renewal notice that states:

21 **[1.] (I)** The date on which the current license expires;

22 **[2.] (II)** The date by which the renewal application must be  
23 received by the Board for the renewal to be issued and mailed before the license expires;  
24 and

25 **[3.] (III)** The amount of the renewal fee[; and

26 (ii) A blank panel data sheet supplied by the Health Care  
27 Alternative Dispute Resolution Office].

28 (2) If the Board chooses to send renewal notices exclusively by electronic  
29 mail under paragraph (1) of this subsection, the Board shall send a renewal notice by  
30 first–class mail to a licensee on request of the licensee.

1 (c) (1) Before the license expires, the licensee periodically may renew it for an  
2 additional term, if the licensee:

3 (i) Otherwise is entitled to be licensed;

4 (ii) Is of good moral character;

5 (iii) Pays to the Board a renewal fee set by the Board; [and]

6 (iv) Submits to the Board:

7 1. A renewal application on the form that the Board requires;

8 and

9 2. Satisfactory evidence of compliance with any continuing  
10 education **OR COMPETENCY** requirements set under this section for license renewal; **AND**

11 **(V) MEETS ANY ADDITIONAL LICENSE RENEWAL**  
12 **REQUIREMENTS ESTABLISHED BY THE BOARD.**

13 (2) Within 30 days after a license renewal under Section 7 of the Interstate  
14 Medical Licensure Compact established under § 14-3A-01 of this title, a compact physician  
15 shall submit to the Board the information required under paragraph (1)(iv) of this  
16 subsection.

17 (d) (1) In addition to any other qualifications and requirements established by  
18 the Board, the Board may establish continuing education **OR COMPETENCY** requirements  
19 as a condition to the renewal of licenses under this section.

20 [(2) In establishing these requirements, the Board shall evaluate existing  
21 methods, devices, and programs in use among the various medical specialties and other  
22 recognized medical groups.

23 (3) The Board shall adopt regulations that allow a licensee seeking renewal  
24 to receive up to 5 continuing education credits per renewal period for providing  
25 uncompensated, voluntary medical services during each renewal period.

26 (4) The Board may not establish or enforce these requirements if they  
27 would so reduce the number of physicians in a community as to jeopardize the availability  
28 of adequate medical care in that community.]

29 [(5) (2) The Board may not establish a continuing education requirement  
30 that every licensee complete a specific course or program as a condition to the renewal of a  
31 license under this section.



1           [(6) A disciplinary panel may impose a civil penalty of up to \$100 per  
2 continuing medical education credit in lieu of a sanction under § 14–404 of this title, for a  
3 first offense, for the failure of a licensee to obtain the continuing medical education credits  
4 required by the Board.]

5           (e) The Board shall renew the license of each licensee who meets the  
6 requirements of this section **AND ANY ADDITIONAL REQUIREMENTS ESTABLISHED**  
7 **UNDER SUBTITLE 5, 5A, 5B, 5C, 5D, 5E, 5F, 5G, OR 5H OF THIS TITLE, AS**  
8 **APPLICABLE.**

9           [(f) (1) Each licensee shall notify the secretary of the Board in writing of any  
10 change in the licensee’s name or address within 60 days after the change.

11           (2) If a licensee fails to notify the secretary of the Board within the time  
12 required under this section, the licensee is subject to an administrative penalty of \$100.]

13           [(g) (F) (1) Beginning October 1, 2016, the Board shall require a criminal  
14 history records check in accordance with [§ 14–308.1] **§ 14–302** of this subtitle for:

15                           (i) Renewal applicants as determined by regulations adopted by the  
16 Board; and

17                           (ii) Each former licensee who files for reinstatement under [§ 14–317  
18 of this subtitle] **THIS TITLE.**

19           (2) On receipt of the criminal history record information of a licensee  
20 forwarded to the Board in accordance with [§ 14–308.1] **§ 14–302** of this subtitle, in  
21 determining whether disciplinary action should be taken, based on the criminal record  
22 information, against a licensee who renewed or reinstated a license, the Board shall  
23 consider:

24                           (i) The age at which the crime was committed;

25                           (ii) The nature of the crime;

26                           (iii) The circumstances surrounding the crime;

27                           (iv) The length of time that has passed since the crime;

28                           (v) Subsequent work history;

29                           (vi) Employment and character references; and

30                           (vii) Other evidence that demonstrates whether the licensee poses a  
31 threat to the public health or safety.



1           **[(e)] (B)**       (1)    [In accordance with subsection (f) of this section, the Board shall  
2 enter into a written contract with an entity or individual for confidential physician peer  
3 review of allegations based on § 14–404(a)(22) of this subtitle.

4                       (2)    A peer reviewer shall:

5                               (i)     Be board certified;

6                               (ii)    Have special qualifications to judge the matter at hand;

7                               (iii)  Have received a specified amount of medical experience and  
8 training;

9                               (iv)   Have no formal actions against the peer reviewer’s own license;

10                              (v)     Receive training in peer review;

11                              (vi)   Have a standard format for peer review reports; and

12                              (vii)  To the extent practicable, be licensed and engaged in the practice  
13 of medicine in the State.

14                       (3)    The Board may consult with the appropriate specialty health care  
15 provider societies in the State to obtain a list of physicians qualified to provide peer review  
16 services.

17                       (4)]   For purposes of peer review, the Board may use sole source  
18 procurement under § 13–107 of the State Finance and Procurement Article.

19                       **[(5)] (2)**       The hearing of charges may not be stayed or challenged because  
20 of the selection of peer reviewers under this subsection before the filing of charges.

21                       **[(f)] (C)**       (1)    The entity or individual peer reviewer with which the Board  
22 contracts under subsection **[(e)] (B)** of this section **OR § 14–514 OF THIS TITLE** shall have  
23 90 days for completion of peer review.

24                       (2)    The entity or individual peer reviewer may apply to the Board for an  
25 extension of up to 30 days to the time limit imposed under [paragraph (1) of this subsection]  
26 **§ 14–515(D)(1) OF THIS TITLE**.

27                       (3)    If an extension is not granted, and 90 days have elapsed, the Board may  
28 contract with any other entity or individual who meets the requirements of [subsection  
29 (e)(2) of this section] **§ 14–515(D)(2) OF THIS TITLE** for the services of peer review.

1 (4) If an extension has been granted, and 120 days have elapsed, the Board  
2 may contract with any other entity or individual who meets the requirements of [subsection  
3 (e)(2) of this section] **§ 14-515(D)(2) OF THIS TITLE** for the services of peer review.

4 **[(g)] (D)** The Board shall issue a request for proposals and enter into a written  
5 contract with a nonprofit entity to provide rehabilitation services for physicians or other  
6 allied health professionals directed by the Board to receive rehabilitation services.

7 **[(h)] (E)** (1) To facilitate the investigation and prosecution of disciplinary  
8 matters and the mediation of fee disputes coming before it, the Board may contract with an  
9 entity or entities for the purchase of investigatory, mediation, and related services.

10 (2) Services that may be contracted for under this subsection include the  
11 services of:

- 12 (i) Investigators;
- 13 (ii) Attorneys;
- 14 (iii) Accountants;
- 15 (iv) Expert witnesses;
- 16 (v) Consultants; and
- 17 (vi) Mediators.

18 **[(i)] (F)** The Board or a disciplinary panel may issue subpoenas and administer  
19 oaths in connection with any investigation under this section and any hearing or proceeding  
20 before it.

21 **[(j)] (G)** (1) It is the intent of this section that the disposition of every  
22 complaint against a licensee that sets forth allegations of grounds for disciplinary action  
23 filed with the Board shall be completed as expeditiously as possible and, in any event,  
24 within 18 months after the complaint was received by the Board.

25 (2) If a disciplinary panel is unable to complete the disposition of a  
26 complaint within 1 year, the Board shall include in the record of that complaint a detailed  
27 explanation of the reason for the delay.

28 **[(k)] (H)** A disciplinary panel, in conducting a meeting with a physician or allied  
29 health professional to discuss the proposed disposition of a complaint, shall provide an  
30 opportunity to appear before the disciplinary panel to both the licensee who has been  
31 charged and the individual who has filed the complaint against the licensee giving rise to  
32 the charge.

1 14-401.2.

2 (e) A disciplinary panel may issue a cease and desist order or obtain injunctive  
3 relief against an individual for:

4 (1) Practicing a profession regulated under this title [or Title 15 of this  
5 article] without a license **OR WITH AN UNAUTHORIZED PERSON**;

6 (2) Representing to the public, by title, description of services, methods,  
7 procedures, or otherwise, that the individual is authorized to practice:

8 (i) Medicine in this State, in violation of [§ 14-602] **§ 14-528** of this  
9 title;

10 (ii) Respiratory care in this State, in violation of § 14-5A-21 of this  
11 title;

12 (iii) Radiation therapy, radiography, nuclear medicine technology, or  
13 radiation assistance in this State, in violation of § 14-5B-18 of this title;

14 (iv) Polysomnography in this State, in violation of § 14-5C-21 of this  
15 title;

16 (v) Athletic training in this State, in violation of § 14-5D-17(3) of  
17 this title;

18 (vi) Perfusion in this State, in violation of § 14-5E-21 of this title;

19 (vii) Naturopathic medicine in this State, in violation of § 14-5F-30  
20 of this title; [or]

21 (viii) **GENETIC COUNSELING IN THIS STATE, IN VIOLATION OF §**  
22 **14-5G-24 OF THIS TITLE; OR**

23 **(IX)** As a physician assistant in this State, in violation of [§ 15-402 of  
24 this article] **§ 14-5H-19 OF THIS TITLE**; or

25 (3) Taking any action:

26 (i) For which a disciplinary panel determines there is a  
27 preponderance of evidence of grounds for discipline under [§ 14-404] **§ 14-515** of this title;  
28 and

29 (ii) That poses a serious risk to the health, safety, and welfare of a  
30 patient.

1 14-402.

2 (a) In reviewing an application for licensure or in investigating an allegation  
3 brought against a licensed physician or any allied health professional regulated by the  
4 Board under this title, the [Physician] Rehabilitation Program may request the Board to  
5 direct, or the Board or a disciplinary panel on its own initiative may direct, the licensed  
6 physician or any allied health professional regulated by the Board under this title to submit  
7 to an appropriate examination.

8 (c) The unreasonable failure or refusal of the licensed individual **OR APPLICANT**  
9 to submit to an examination is prima facie evidence of the licensed individual's **OR**  
10 **APPLICANT'S** inability to practice medicine or the respective discipline competently, unless  
11 the Board or disciplinary panel finds that the failure or refusal was beyond the control of  
12 the licensed individual **OR APPLICANT**.

13 (e) (1) The Board or the entity or entities with which the Board contracts shall  
14 appoint the members of the [Physician] Rehabilitation Program.

15 (2) The chair of the Board shall appoint one member of the Board to serve  
16 as a liaison to the [Physician] Rehabilitation Program.

17 (f) The [Physician] Rehabilitation Program is subject to audit by the Legislative  
18 Auditor as provided in § 2-1220 of the State Government Article.

19 **14-404.**

20 **SUBJECT TO THE ADMINISTRATIVE PROCEDURE ACT AND THE HEARING**  
21 **PROVISIONS OF § 14-405 OF THIS SUBTITLE, A DISCIPLINARY PANEL MAY DENY A**  
22 **LICENSE TO AN APPLICANT OR, IF AN APPLICANT HAS FAILED TO RENEW THE**  
23 **APPLICANT'S LICENSE, REFUSE TO RENEW OR REINSTATE AN APPLICANT'S LICENSE**  
24 **FOR ANY OF THE REASONS THAT ARE GROUNDS FOR ACTION UNDER § 14-515, §**  
25 **14-5A-17, § 14-5B-14, § 14-5C-17, § 14-5D-14, § 14-5E-16, § 14-5F-18, §**  
26 **14-5G-18, OR § 14-5H-16 OF THIS TITLE, AS APPLICABLE.**

27 14-405.

28 (a) Except as otherwise provided in the Administrative Procedure Act, before the  
29 Board or a disciplinary panel takes any action under [§ 14-404(a)] **§ 14-404** of this subtitle  
30 or [§ 14-205(b)(3),] **§ 14-515(A)**, § 14-5A-17(a), § 14-5B-14(a), § 14-5C-17(a), §  
31 14-5D-14(a), § 14-5E-16(a), [or] § 14-5F-18, **§ 14-5G-18, OR § 14-5H-16** of this title,  
32 it shall give the individual against whom the action is contemplated an opportunity for a  
33 hearing before a hearing officer.

34 [(g)] **(F)** The hearing of charges may not be stayed or challenged by any  
35 procedural defects alleged to have occurred prior to the filing of charges.

1 14-406.

2 (a) Following the filing of charges, if a majority of the quorum of a disciplinary  
3 panel finds that there are grounds for action under [§ 14-404] **§ 14-515, § 14-5A-17, §**  
4 **14-5B-14, § 14-5C-17, § 14-5D-14, § 14-5E-16, § 14-5F-18, § 14-5G-18, OR §**  
5 **14-5H-16** of this [subtitle] TITLE, the disciplinary panel shall pass an order in accordance  
6 with the Administrative Procedure Act.

7 (b) After the charges are filed, if a disciplinary panel finds, on an affirmative vote  
8 of a majority of its quorum, that there are no grounds for action under [§ 14-404] **§**  
9 **14-515, § 14-5A-17, § 14-5B-14, § 14-5C-17, § 14-5D-14, § 14-5E-16, § 14-5F-18,**  
10 **§ 14-5G-18, OR § 14-5H-16** of this [subtitle] TITLE, the disciplinary panel:

11 (1) Immediately shall dismiss the charges and exonerate the licensee;

12 (2) (i) Except as provided in item (ii) of this item, shall expunge all  
13 records of the charges 3 years after the charges are dismissed; or

14 (ii) If the physician **OR ALLIED HEALTH PROFESSIONAL** executes  
15 a document releasing the Board from any liability related to the charges, shall immediately  
16 expunge all records of the charges; and

17 (3) May not take any further action on the charges.

18 14-409.

19 (a) (1) Except as provided in subsection (b) of this section, a disciplinary panel,  
20 **ON THE AFFIRMATIVE VOTE OF A MAJORITY OF THE QUORUM OF THE DISCIPLINARY**  
21 **PANEL**, may reinstate the license of an individual whose license has been surrendered or  
22 revoked under this title only in accordance with:

23 (i) The terms and conditions of the order of revocation or letter of  
24 surrender;

25 (ii) An order of reinstatement issued by the disciplinary panel; or

26 (iii) A final judgment in any proceeding for review.

27 (2) If a license is surrendered or revoked for a period of more than 1 year,  
28 the Board **OR A DISCIPLINARY PANEL** may reinstate the license after 1 year if the licensee:

29 (i) Meets the requirements for reinstatement as established by the  
30 Board; and

1 (ii) Completes a criminal history records check in accordance with [§  
2 14-308.1] **§ 14-302** of this title.

3 (c) If an order of revocation is based on [§ 14-404(b)] **§ 14-515(B), §**  
4 **14-5A-17(B), § 14-5B-14(B), § 14-5C-17(B), § 14-5D-14(B), § 14-5E-16(B), §**  
5 **14-5F-18(B), § 14-5G-18(B), OR § 14-5H-16(B)** of this [subtitle] **TITLE**, and the  
6 conviction or plea subsequently is overturned at any stage of an appeal or other  
7 postconviction proceeding, the revocation ends when the conviction or plea is overturned.  
8 14-411.

9 (d) The Board shall disclose any information contained in a record to:

10 (1) A committee of a hospital, health maintenance organization, or related  
11 institution if:

12 (i) The committee of a medical hospital staff concerned with  
13 [physician] **LICENSEE** discipline or other committee of a hospital, health maintenance  
14 organization, or related institution requests the information in writing;

15 (ii) A disciplinary panel has issued an order as to a [licensed  
16 physician] **LICENSEE** on whom the information is requested; and

17 (iii) The Board determines that the information requested is  
18 necessary for an investigation or action of the committee as to a medical privilege of a  
19 [licensed physician] **LICENSEE**; or

20 (2) The Secretary, the Office of Health Care Quality in the Department,  
21 the Maryland Health Care Commission, or the Health Services Cost Review Commission  
22 for the purpose of investigating quality or utilization of care in any entity regulated by the  
23 Office of Health Care Quality or the Health Services Cost Review Commission.

24 (g) (1) The Board shall notify all hospitals, health maintenance organizations,  
25 or other health care facilities where a [physician or an allied health professional]  
26 **LICENSEE** regulated by the Board has privileges, has a provider contract with a health  
27 maintenance organization, or is employed of a complaint or report filed against that  
28 [physician] **LICENSEE**, if:

29 (i) The Board determines, in its discretion, that the hospital, health  
30 maintenance organization, or health care facility should be informed about the report or  
31 complaint;

32 (ii) The nature of the complaint suggests a reasonable possibility of  
33 an imminent threat to patient safety; or



1 (iii) The complaint or report was as a result of a claim filed in the  
2 Health Care Alternative Dispute Resolution Office and a certificate of a qualified expert is  
3 filed in accordance with § 3–2A–04(b)(1) of the Courts Article.

4 (2) The Board shall disclose any information pertaining to a [physician’s]  
5 LICENSEE’S competency to practice [medicine] UNDER THE LICENSE contained in record  
6 to a committee of a hospital, health maintenance organization, or other health care facility  
7 if:

8 (i) The committee is concerned with [physician] LICENSEE  
9 discipline and requests the information in writing; and

10 (ii) The Board has received a complaint or report pursuant to  
11 paragraph (1)(i) and (ii) of this subsection on the [licensed physician] LICENSEE on whom  
12 the information is requested.

13 (3) The Board shall, after formal action is taken pursuant to § 14–406 of  
14 this subtitle, notify those hospitals, health maintenance organizations, or health care  
15 facilities where the [physician] LICENSEE has privileges, has a provider contract with a  
16 health maintenance organization, or is employed of its formal action within 10 days after  
17 the action is taken and shall provide the hospital, health maintenance organization, or  
18 health care facility with periodic reports as to enforcement or monitoring of a formal  
19 disciplinary order against a [physician] LICENSEE within 10 days after receipt of those  
20 reports.

21 (h) On the request of a person who has made a complaint to the Board regarding  
22 a [physician] LICENSEE, the Board shall provide the person with information on the status  
23 of the complaint.

24 (j) The Board may disclose any information contained in a record to a licensing  
25 or disciplinary authority of another state if:

26 (1) The licensing or disciplinary authority of another state that regulates  
27 [licensed physicians] LICENSEES in that state requests the information in writing; and

28 (2) The disclosure of any information is limited to the pendency of an  
29 allegation of a ground for disciplinary or other action by a disciplinary panel until:

30 (i) The disciplinary panel has passed an order under § 14–406 of  
31 this subtitle; or

32 (ii) A [licensed physician] LICENSEE on whom the information is  
33 requested authorizes a disclosure as to the facts of an allegation or the results of an  
34 investigation before the Board.

35 (k) The Board may disclose any information contained in a record to a person if:

1 (1) A [licensed physician] LICENSEE on whom any information is  
2 requested authorizes the person to receive the disclosure;

3 (2) The person requests the information in writing; and

4 (3) The authorization for the disclosure is in writing.

5 (p) (1) The Board may publish a summary of any allegations of grounds for  
6 disciplinary or other action.

7 (2) A summary may not identify:

8 (i) Any person who makes an allegation to the Board or any of its  
9 investigatory bodies;

10 (ii) A [licensed physician] LICENSEE about whom an allegation is  
11 made; or

12 (iii) A witness in an investigation or a proceeding before the Board or  
13 any of its investigatory bodies.

14 14-411.1.

15 (b) The Board shall create and maintain a public individual profile on each  
16 licensee that includes the following information:

17 (1) A summary of charges filed against the licensee, including a copy of the  
18 charging document, until a disciplinary panel has taken action under [§ 14-404] § 14-515  
19 of this subtitle based on the charges or has rescinded the charges;

20 (2) A description of any disciplinary action taken by the Board or a  
21 disciplinary panel against the licensee within the most recent 10-year period that includes  
22 a copy of the public order;

23 (3) A description in summary form of any final disciplinary action taken by  
24 a licensing board in any other state or jurisdiction against the licensee within the most  
25 recent 10-year period;

26 (4) A description of a conviction or entry of a plea of guilty or nolo  
27 contendere by the licensee for a crime involving moral turpitude reported to the Board  
28 under § 14-416 of this subtitle; and

29 [(5) As reported to the Board by the licensee, education and practice  
30 information about the licensee including:

1 (i) The name of any medical school that the licensee attended and  
2 the date on which the licensee graduated from the school;

3 (ii) A description of any internship and residency training;

4 (iii) A description of any specialty board certification by a recognized  
5 board of the American Board of Medical Specialties or the American Osteopathic  
6 Association;

7 (iv) The name of any hospital where the licensee has medical  
8 privileges;

9 (v) The location of the licensee's primary practice setting;

10 (vi) Whether the licensee participates in the Maryland Medical  
11 Assistance Program;

12 (vii) Whether the licensee maintains medical professional liability  
13 insurance; and

14 (viii) The number of medical malpractice final court judgments and  
15 arbitration awards against the licensee within the most recent 10-year period.]

16 **(5) FOR A PHYSICIAN, THE INFORMATION REQUIRED UNDER § 14-516**  
17 **OF THIS TITLE.**

18 (c) In addition to the requirements of subsection (b) of this section, the Board  
19 shall:

20 (1) **FOLLOWING THE FILING OF CHARGES OR NOTICE OF INITIAL**  
21 **DENIAL OF A LICENSE APPLICATION, DISCLOSE THE FILING TO THE PUBLIC ON THE**  
22 **BOARD'S WEBSITE;**

23 (2) Provide appropriate and accessible Internet links from the Board's  
24 [Internet site] **WEBSITE:**

25 (i) To the extent available, to the appropriate portion of the  
26 [Internet site] **WEBSITE** of each health maintenance organization licensed in this State  
27 which will allow the public to ascertain the names of the physicians affiliated with the  
28 health maintenance organization; and

29 (ii) To the appropriate portion of the [Internet site] **WEBSITE** of the  
30 American Medical Association;

31 [(2)] (3) Include a statement on each licensee's profile of information to  
32 be taken into consideration by a consumer when viewing a licensee's profile, including

1 factors to consider when evaluating a licensee's malpractice data, and a disclaimer stating  
2 that a charging document does not indicate a final finding of guilt by a disciplinary panel;  
3 and

4 ~~[(3)]~~ (4) Provide on the Board's [Internet site] **WEBSITE**:

5 (i) Notification that a person may contact the Board by telephone,  
6 electronic mail, or written request to find out whether the number of medical malpractice  
7 settlements involving a particular licensee totals three or more with a settlement amount  
8 of \$150,000 or greater within the most recent 5-year period as reported to the Board; and

9 (ii) A telephone number, electronic mail address, and physical  
10 address through which a person may contact the Board to request the information required  
11 to be provided under item (i) of this item.

12 (d) The Board:

13 (1) On receipt of a written request for a licensee's profile from any person,  
14 shall forward a written copy of the profile to the person;

15 (2) Shall maintain a website that serves as a single point of entry where  
16 all physician **AND ALLIED HEALTH PROFESSIONAL** profile information is available to the  
17 public on the Internet; and

18 (3) On receipt of a verbal, electronic, or written request in accordance with  
19 subsection ~~[(c)(3)]~~ **(C)(4)** of this section, shall provide the information within 2 business  
20 days of the request.

21 14-413.

22 **(A)** A person may not make any false statement, report, or representation to the  
23 Board or a disciplinary panel.

24 **(B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS**  
25 **GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT**  
26 **EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.**

27 **(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
28 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

29 14-416.

30 (a) Each court shall report to the Board each conviction of or entry of a plea of  
31 guilty or nolo contendere by a [physician] **LICENSEE** for any crime involving moral  
32 turpitude.

1 14-417.

2 (A) (1) EACH LICENSEE SHALL NOTIFY THE SECRETARY OF THE BOARD  
3 IN WRITING OF ANY CHANGE IN THE LICENSEE'S NAME OR ADDRESS WITHIN 60 DAYS  
4 AFTER THE CHANGE.

5 (2) IF A LICENSEE FAILS TO NOTIFY THE SECRETARY OF THE BOARD  
6 WITHIN THE TIME REQUIRED UNDER THIS SECTION, THE LICENSEE IS SUBJECT TO  
7 AN ADMINISTRATIVE PENALTY OF \$100.

8 (B) A DISCIPLINARY PANEL MAY IMPOSE A CIVIL PENALTY OF UP TO \$100  
9 PER CONTINUING MEDICAL EDUCATION CREDIT IN LIEU OF A SANCTION FOR A FIRST  
10 OFFENSE FOR THE FAILURE OF A LICENSEE TO OBTAIN THE CONTINUING MEDICAL  
11 EDUCATION CREDITS REQUIRED BY THE BOARD.

12 Subtitle 5. [Miscellaneous Provisions] PHYSICIANS.

13 14-503.

14 (c) (1) The Board shall adopt rules and regulations to delineate the scope of  
15 this section.

16 (2) Before it adopts any rule or regulation under this section, the Board  
17 shall invite and consider proposals from any individual or health group that could be  
18 affected by the rule or regulation.

19 (e) Except as otherwise provided in this section, an individual may perform  
20 X-ray duties without a license **TO PRACTICE MEDICINE** only if the duties:

21 (1) Do not include:

22 (i) Computerized or noncomputerized tomography;

23 (ii) Fluoroscopy;

24 (iii) Invasive radiology;

25 (iv) Mammography;

26 (v) Nuclear medicine;

27 (vi) Radiation therapy; or

28 (vii) Xerography;

- 1           (2)    Are limited to X-ray procedures of the:
- 2                   (i)     Chest, anterior-posterior and lateral;
- 3                   (ii)    Spine, anterior-posterior and lateral; or
- 4                   (iii)  Extremities, anterior-posterior and lateral, not including the
- 5 head; and

6           (3)    Are performed:

7                   (i)     By an individual who is not employed primarily to perform

8 X-ray duties;

9                   (ii)    In the medical office of the physician who delegates the duties;

10 and

11                  (iii)  1.     By an individual who, before October 1, 2002, has:

12                           A.     Taken a course consisting of at least 30 hours of training

13 in performing X-ray procedures approved by the Maryland Radiological Society in

14 consultation with the Maryland Society of Radiologic Technologists; and

15                           B.     Successfully passed an examination based on that course

16 that has been approved by the Maryland Radiological Society in consultation with the

17 Maryland Society of Radiologic Technologists; or

18                           2.     By a licensed physician assistant who has completed a

19 course that includes anterior-posterior and lateral radiographic studies of extremities on

20 at least 20 separate patients under the direct supervision of the delegating physician or

21 radiologist using a mini C-arm or similar low-level radiation machine to perform

22 nonfluoroscopic X-ray procedures, if the duties:

23                           A.     Include only the X-ray procedures described in paragraph

24 (2)(iii) of this subsection; and

25                           B.     Are performed pursuant to a Board-approved delegation

26 agreement that includes a request to perform advanced duties under [§ 15-302(c)(2)] §

27 **14-5H-08(C)(2)** of this [article] TITLE.

28 **14-504.**

29           **(A) TO QUALIFY FOR A LICENSE TO PRACTICE MEDICINE AS A PHYSICIAN IN**

30 **THE STATE, AN APPLICANT SHALL BE AN INDIVIDUAL WHO MEETS THE**

31 **REQUIREMENTS OF § 14-301 OF THIS TITLE AND THIS SECTION.**

1           **(B) EXCEPT AS PROVIDED IN § 14-505 OF THIS SUBTITLE, THE APPLICANT**  
2 **SHALL:**

3                   **(1) (I) HAVE A DEGREE OF DOCTOR OF MEDICINE FROM A**  
4 **MEDICAL SCHOOL THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION THAT**  
5 **THE BOARD RECOGNIZES IN ITS REGULATIONS; AND**

6                   **(II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF**  
7 **SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL**  
8 **TRAINING PROGRAM THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION**  
9 **THAT THE BOARD RECOGNIZES IN ITS REGULATIONS; OR**

10                   **(2) (I) HAVE A DEGREE OF DOCTOR OF OSTEOPATHY FROM A**  
11 **SCHOOL OF OSTEOPATHY IN THE UNITED STATES, ITS TERRITORIES OR**  
12 **POSSESSIONS, PUERTO RICO, OR CANADA THAT HAS STANDARDS FOR GRADUATION**  
13 **EQUIVALENT TO THOSE ESTABLISHED BY THE AMERICAN OSTEOPATHIC**  
14 **ASSOCIATION; AND**

15                   **(II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF**  
16 **SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL**  
17 **TRAINING PROGRAM ACCREDITED BY AN ACCREDITING ORGANIZATION THAT THE**  
18 **BOARD RECOGNIZES IN ITS REGULATIONS.**

19           **(C) IF AN EXAMINATION IS REQUIRED FOR A LICENSE TO PRACTICE**  
20 **MEDICINE, AN OTHERWISE QUALIFIED APPLICANT WHO PASSES THE EXAMINATION**  
21 **AFTER HAVING FAILED THE EXAMINATION OR ANY PART OF THE EXAMINATION**  
22 **THREE OR MORE TIMES MAY QUALIFY FOR A LICENSE ONLY IF THE APPLICANT:**

23                   **(1) HAS SUCCESSFULLY COMPLETED 2 OR MORE YEARS OF A**  
24 **RESIDENCY OR FELLOWSHIP ACCREDITED BY THE ACCREDITATION COUNCIL ON**  
25 **GRADUATE MEDICAL EDUCATION OR THE AMERICAN OSTEOPATHIC ASSOCIATION;**

26                   **(2) (I) HAS A MINIMUM OF 5 YEARS OF CLINICAL PRACTICE OF**  
27 **MEDICINE:**

28                               **1. IN THE UNITED STATES OR IN CANADA;**

29                               **2. WITH AT LEAST 3 OF THE 5 YEARS HAVING OCCURRED**  
30 **WITHIN 5 YEARS OF THE DATE OF THE APPLICATION; AND**

31                               **3. THAT OCCURRED UNDER A FULL UNRESTRICTED**  
32 **LICENSE TO PRACTICE MEDICINE; AND**

1                   **(II) HAS NO DISCIPLINARY ACTION PENDING AND HAS HAD NO**  
2 **DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT THAT WOULD BE GROUNDS**  
3 **FOR DISCIPLINE UNDER § 14-515 OF THIS SUBTITLE; OR**

4                   **(3) IS BOARD CERTIFIED.**

5           **(D) (1) THE BOARD SHALL LICENSE AN APPLICANT TO PRACTICE**  
6 **MEDICINE IF:**

7                   **(I) THE APPLICANT:**

8                               **1. BECAME LICENSED OR CERTIFIED AS A PHYSICIAN IN**  
9 **ANOTHER JURISDICTION UNDER REQUIREMENTS THAT THE BOARD DETERMINES**  
10 **ARE SUBSTANTIALLY EQUIVALENT TO THE LICENSING REQUIREMENTS OF THIS**  
11 **TITLE;**

12                               **2. IS IN GOOD STANDING UNDER THE LAWS OF THE**  
13 **OTHER JURISDICTION;**

14                               **3. SUBMITS AN APPLICATION TO THE BOARD ON A FORM**  
15 **THAT THE BOARD REQUIRES; AND**

16                               **4. PAYS TO THE BOARD AN APPLICATION FEE SET BY**  
17 **THE BOARD; AND**

18                               **(II) THE JURISDICTION IN WHICH THE APPLICANT IS LICENSED**  
19 **OR CERTIFIED OFFERS A SIMILAR RECIPROCAL LICENSING PROCESS FOR**  
20 **INDIVIDUALS LICENSED TO PRACTICE MEDICINE BY THE BOARD.**

21                   **(2) THE BOARD SHALL ADOPT REGULATIONS TO IMPLEMENT THIS**  
22 **SUBSECTION.**

23           **(E) (1) IN ESTABLISHING ANY CONTINUING EDUCATION REQUIREMENTS**  
24 **FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL EVALUATE EXISTING**  
25 **METHODS, DEVICES, AND PROGRAMS IN USE AMONG THE VARIOUS MEDICAL**  
26 **SPECIALTIES AND OTHER RECOGNIZED MEDICAL GROUPS.**

27                   **(2) THE BOARD SHALL ADOPT REGULATIONS THAT ALLOW A**  
28 **LICENSEE SEEKING RENEWAL TO RECEIVE UP TO 5 CONTINUING EDUCATION**  
29 **CREDITS PER RENEWAL PERIOD FOR PROVIDING UNCOMPENSATED, VOLUNTARY**  
30 **MEDICAL SERVICES DURING EACH RENEWAL PERIOD.**



1           **(3) THE BOARD MAY NOT ESTABLISH OR ENFORCE THESE**  
2 **REQUIREMENTS IF THEY WOULD SO REDUCE THE NUMBER OF PHYSICIANS IN A**  
3 **COMMUNITY AS TO JEOPARDIZE THE AVAILABILITY OF ADEQUATE MEDICAL CARE IN**  
4 **THAT COMMUNITY.**

5 14-505.

6           (b) An applicant for a license **TO PRACTICE MEDICINE** is exempt from the  
7 educational requirements of [~~§ 14-307~~] **§ 14-301 OF THIS TITLE AND § 14-504** of this  
8 subtitle, if the applicant:

9           (1) Has studied medicine at a foreign medical school;

10           (2) Is certified by the Educational Commission for Foreign Medical  
11 Graduates or by its successor as approved by the Board;

12           (3) Passes a qualifying examination for foreign medical school graduates  
13 required by the Board;

14           (4) Meets any other qualifications for foreign medical school graduates that  
15 the Board establishes in its regulation for licensing of applicants;

16           (5) Submits acceptable evidence to the Board of the requirements set in the  
17 Board's regulations; and

18           (6) Meets one of the following requirements:

19           (i) The applicant graduated from any foreign medical school and  
20 submits evidence acceptable to the Board of successful completion of 2 years of training in  
21 a postgraduate medical education program accredited by an accrediting organization  
22 recognized by the Board; or

23           (ii) The applicant successfully completed a fifth pathway program  
24 and submits evidence acceptable to the Board that the applicant:

25           1. Has a document issued by the foreign medical school  
26 certifying that the applicant completed all of the formal requirements of that school for the  
27 study of medicine, except for the postgraduate or social service components as required by  
28 the foreign country or its medical school;

29           2. Has successfully completed a fifth pathway program; and

30           3. Has successfully completed 2 years of training in a  
31 postgraduate medical education program following completion of a Board approved fifth  
32 pathway program.

1 14-506.

2 (a) An applicant who otherwise qualifies for a license **TO PRACTICE MEDICINE**  
3 under this title is entitled to sit for an examination as provided under this section or any  
4 regulations adopted to carry out this section.

5 14-510.

6 (a) The Board may:

7 (1) License **TO PRACTICE MEDICINE** an applicant by virtue of the  
8 conceded eminence and authority of the applicant in the profession if the applicant:

9 (i) Is recommended to the Board by:

10 1. The dean of a school of medicine in the State; or

11 2. The Director of the National Institutes of Health;

12 (ii) Is to receive an appointment at the institution making the  
13 recommendation under item (i) of this paragraph; and

14 (iii) Meets any other requirement the Board may adopt by regulation  
15 under this section;

16 (2) Define by regulation the term “conceded eminence and authority in the  
17 profession” and, for this purpose, shall consider such criteria as:

18 (i) Academic appointments;

19 (ii) Length of time in the profession;

20 (iii) Scholarly publications; and

21 (iv) Professional accomplishments;

22 (3) Adopt regulations concerning the further qualifications of an applicant  
23 for licensure, including conditions of employment, application procedures, and fees under  
24 this section;

25 (4) Allow an exception to the general education and examination  
26 requirements of [§ 14-307(d) and (e)] **§ 14-301(E) OF THIS TITLE AND § 14-504(B)** of  
27 this subtitle, but may not permit waiver of the requirements of [§ 14-307(a) through (c)] **§**  
28 **14-301(A) THROUGH (C)** of this [subtitle] **TITLE**;

1 (5) Qualify, restrict, or otherwise limit a license granted under this section;  
2 and

3 (6) Require a 6-month probationary period during which the medical  
4 services performed by the applicant granted a license under this section are supervised by  
5 another licensed physician.

6 14-511.

7 (b) The Board shall issue a license to an individual who is on inactive status if the  
8 individual:

9 (1) Submits to the Board:

10 (i) Satisfactory evidence of compliance with [§ 14-308.1] **§ 14-302**  
11 of this [subtitle] **TITLE**;

12 (ii) Satisfactory evidence of compliance with the continuing  
13 education requirements the Board adopts for this purpose; and

14 (iii) A reinstatement fee set by the Board; and

15 (2) Is otherwise entitled to be licensed.

16 14-513.

17 (C) **A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS GUILTY**  
18 **OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING**  
19 **\$500.**

20 (D) **THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
21 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

22 14-514.

23 (A) **IF AN ALLEGATION OF GROUNDS FOR DISCIPLINARY OR OTHER ACTION**  
24 **IS MADE BY A PATIENT OR A FAMILY MEMBER OF A PATIENT BASED ON §**  
25 **14-515(A)(22) OF THIS SUBTITLE AND A FULL INVESTIGATION RESULTS FROM THAT**  
26 **ALLEGATION, THE FULL INVESTIGATION SHALL INCLUDE AN OFFER OF AN**  
27 **INTERVIEW WITH THE PATIENT OR A FAMILY MEMBER OF THE PATIENT WHO WAS**  
28 **PRESENT AT OR ABOUT THE TIME THAT THE INCIDENT THAT GAVE RISE TO THE**  
29 **ALLEGATION OCCURRED.**

1           **(B) (1) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBSECTION, AFTER**  
2 **BEING ASSIGNED A COMPLAINT UNDER § 14-401.1 OF THIS TITLE, THE**  
3 **DISCIPLINARY PANEL MAY:**

4                   **(I) REFER AN ALLEGATION FOR FURTHER INVESTIGATION TO**  
5 **THE ENTITY THAT HAS CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF**  
6 **THIS SECTION; OR**

7                   **(II) TAKE ANY APPROPRIATE AND IMMEDIATE ACTION AS**  
8 **NECESSARY.**

9           **(2) (I) IF, AFTER BEING ASSIGNED A COMPLAINT AND**  
10 **COMPLETING THE PRELIMINARY INVESTIGATION, THE DISCIPLINARY PANEL FINDS**  
11 **THAT THE LICENSEE MAY HAVE VIOLATED § 14-515(A)(22) OF THIS SUBTITLE, THE**  
12 **DISCIPLINARY PANEL SHALL REFER THE ALLEGATION TO THE ENTITY OR ENTITIES**  
13 **THAT HAVE CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF THIS**  
14 **SECTION FOR FURTHER INVESTIGATION AND PHYSICIAN PEER REVIEW WITHIN THE**  
15 **INVOLVED MEDICAL SPECIALTY OR SPECIALTIES.**

16                   **(II) A DISCIPLINARY PANEL SHALL OBTAIN TWO PEER REVIEW**  
17 **REPORTS FROM THE ENTITY OR INDIVIDUAL WITH WHOM THE BOARD CONTRACTED**  
18 **UNDER SUBSECTION (D) OF THIS SECTION FOR EACH ALLEGATION THE**  
19 **DISCIPLINARY PANEL REFERS FOR PEER REVIEW.**

20           **(3) IF, AFTER BEING ASSIGNED A COMPLAINT, THE DISCIPLINARY**  
21 **PANEL DETERMINES THAT AN ALLEGATION INVOLVING FEES FOR PROFESSIONAL OR**  
22 **ANCILLARY SERVICES DOES NOT CONSTITUTE GROUNDS FOR DISCIPLINARY OR**  
23 **OTHER ACTION, THE DISCIPLINARY PANEL SHALL OFFER THE COMPLAINANT AND**  
24 **THE LICENSEE AN OPPORTUNITY TO MEDIATE THE DISPUTE.**

25           **(C) COUNTY MEDICAL SOCIETIES SHALL REFER TO THE BOARD ALL**  
26 **COMPLAINTS THAT SET FORTH ALLEGATIONS OF GROUNDS FOR DISCIPLINARY**  
27 **ACTION UNDER § 14-515 OF THIS SUBTITLE.**

28           **(D) (1) IN ACCORDANCE WITH § 14-401.1(C) OF THIS TITLE, THE BOARD**  
29 **SHALL ENTER INTO A WRITTEN CONTRACT WITH AN ENTITY OR INDIVIDUAL FOR**  
30 **CONFIDENTIAL PHYSICIAN PEER REVIEW OF ALLEGATIONS BASED ON §**  
31 **14-515(A)(22) OF THIS SUBTITLE.**

32                   **(2) A PEER REVIEWER SHALL:**

33                   **(I) BE BOARD CERTIFIED;**

1 (II) HAVE SPECIAL QUALIFICATIONS TO JUDGE THE MATTER AT  
2 HAND;

3 (III) HAVE RECEIVED A SPECIFIED AMOUNT OF MEDICAL  
4 EXPERIENCE AND TRAINING;

5 (IV) HAVE NO FORMAL ACTIONS AGAINST THE PEER REVIEWER'S  
6 OWN LICENSE;

7 (V) RECEIVE TRAINING IN PEER REVIEW;

8 (VI) HAVE A STANDARD FORMAT FOR PEER REVIEW REPORTS;  
9 AND

10 (VII) TO THE EXTENT PRACTICABLE, BE LICENSED AND ENGAGED  
11 IN THE PRACTICE OF MEDICINE IN THE STATE.

12 (3) THE BOARD MAY CONSULT WITH THE APPROPRIATE SPECIALTY  
13 HEALTH CARE PROVIDER SOCIETIES IN THE STATE TO OBTAIN A LIST OF PHYSICIANS  
14 QUALIFIED TO PROVIDE PEER REVIEW SERVICES.

15 14-515.

16 (a) Subject to the hearing provisions of § 14-405 of this [subtitle] TITLE, a  
17 disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary  
18 panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke  
19 a license if the licensee:

20 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
21 the applicant or licensee or for another;

22 (2) Fraudulently or deceptively uses a license;

23 (3) Is guilty of:

24 (i) Immoral conduct in the practice of medicine; or

25 (ii) Unprofessional conduct in the practice of medicine;

26 (4) Is professionally, physically, or mentally incompetent;

27 (5) Solicits or advertises in violation of [§ 14-503] § 14-513 of this [title]  
28 SUBTITLE;

29 (6) Abandons a patient;

- 1 (7) Habitually is intoxicated;
- 2 (8) Is addicted to, or habitually abuses, any narcotic or controlled  
3 dangerous substance as defined in § 5–101 of the Criminal Law Article;
- 4 (9) Provides professional services:
- 5 (i) While under the influence of alcohol; or
- 6 (ii) While using any narcotic or controlled dangerous substance, as  
7 defined in § 5–101 of the Criminal Law Article, or other drug that is in excess of therapeutic  
8 amounts or without valid medical indication;
- 9 (10) Promotes the sale of drugs, devices, appliances, or goods to a patient so  
10 as to exploit the patient for financial gain;
- 11 (11) Willfully makes or files a false report or record in the practice of  
12 medicine;
- 13 (12) Willfully fails to file or record any medical report as required under law,  
14 willfully impedes or obstructs the filing or recording of the report, or induces another to fail  
15 to file or record the report;
- 16 (13) On proper request, and in accordance with the provisions of Title 4,  
17 Subtitle 3 of the Health – General Article, fails to provide details of a patient’s medical  
18 record to the patient, another physician, or hospital;
- 19 (14) Solicits professional patronage through an agent or other person or  
20 profits from the acts of a person who is represented as an agent of the physician;
- 21 (15) Pays or agrees to pay any sum to any person for bringing or referring a  
22 patient or accepts or agrees to accept any sum from any person for bringing or referring a  
23 patient;
- 24 (16) Agrees with a clinical or bioanalytical laboratory to make payments to  
25 the laboratory for a test or test series for a patient, unless the licensed physician discloses  
26 on the bill to the patient or third-party payor:
- 27 (i) The name of the laboratory;
- 28 (ii) The amount paid to the laboratory for the test or test series; and
- 29 (iii) The amount of procurement or processing charge of the licensed  
30 physician, if any, for each specimen taken;
- 31 (17) Makes a willful misrepresentation in treatment;

1 (18) Practices medicine with an unauthorized person or aids an  
2 unauthorized person in the practice of medicine;

3 (19) Grossly overutilizes health care services;

4 (20) Offers, undertakes, or agrees to cure or treat disease by a secret  
5 method, treatment, or medicine;

6 (21) Is disciplined by a licensing or disciplinary authority or convicted or  
7 disciplined by a court of any state or country or disciplined by any branch of the United  
8 States uniformed services or the Veterans' Administration for an act that would be grounds  
9 for disciplinary action under this section;

10 (22) Fails to meet appropriate standards as determined by appropriate peer  
11 review for the delivery of quality medical and surgical care performed in an outpatient  
12 surgical facility, office, hospital, or any other location in this State;

13 (23) Willfully submits false statements to collect fees for which services are  
14 not provided;

15 (24) Was subject to investigation or disciplinary action by a licensing or  
16 disciplinary authority or by a court of any state or country for an act that would be grounds  
17 for disciplinary action under this section and the licensee:

18 (i) Surrendered the license issued by the state or country to the  
19 state or country; or

20 (ii) Allowed the license issued by the state or country to expire or  
21 lapse;

22 (25) Knowingly fails to report suspected child abuse in violation of § 5–704  
23 of the Family Law Article;

24 (26) Fails to educate a patient being treated for breast cancer of alternative  
25 methods of treatment as required by § 20–113 of the Health – General Article;

26 (27) Sells, prescribes, gives away, or administers drugs for illegal or  
27 illegitimate medical purposes;

28 (28) Fails to comply with the provisions of § 12–102 of this article;

29 (29) Refuses, withholds from, denies, or discriminates against an individual  
30 with regard to the provision of professional services for which the licensee is licensed and  
31 qualified to render because the individual is HIV positive;

1 (30) Except as to an association that has remained in continuous existence  
2 since July 1, 1963:

3 (i) Associates with a pharmacist as a partner or co-owner of a  
4 pharmacy for the purpose of operating a pharmacy;

5 (ii) Employs a pharmacist for the purpose of operating a pharmacy;  
6 or

7 (iii) Contracts with a pharmacist for the purpose of operating a  
8 pharmacy;

9 (31) Except in an emergency life-threatening situation where it is not  
10 feasible or practicable, fails to comply with the Centers for Disease Control and  
11 Prevention's guidelines on universal precautions;

12 (32) Fails to display the notice required under [§ 14-415] § 14-519 of this  
13 subtitle;

14 (33) Fails to cooperate with a lawful investigation conducted by the Board  
15 or a disciplinary panel;

16 (34) Is convicted of insurance fraud as defined in § 27-801 of the Insurance  
17 Article;

18 (35) Is in breach of a service obligation resulting from the applicant's or  
19 licensee's receipt of State or federal funding for the licensee's medical education;

20 (36) Willfully makes a false representation when seeking or making  
21 application for licensure or any other application related to the practice of medicine;

22 (37) By corrupt means, threats, or force, intimidates or influences, or  
23 attempts to intimidate or influence, for the purpose of causing any person to withhold or  
24 change testimony in hearings or proceedings before the Board or a disciplinary panel or  
25 those otherwise delegated to the Office of Administrative Hearings;

26 (38) By corrupt means, threats, or force, hinders, prevents, or otherwise  
27 delays any person from making information available to the Board or a disciplinary panel  
28 in furtherance of any investigation of the Board or a disciplinary panel;

29 (39) Intentionally misrepresents credentials for the purpose of testifying or  
30 rendering an expert opinion in hearings or proceedings before the Board or a disciplinary  
31 panel or those otherwise delegated to the Office of Administrative Hearings;

32 (40) Fails to keep adequate medical records as determined by appropriate  
33 peer review;



1 (41) Performs a cosmetic surgical procedure in an office or a facility that is  
2 not:

3 (i) Accredited by:

4 1. The American Association for Accreditation of Ambulatory  
5 Surgical Facilities;

6 2. The Accreditation Association for Ambulatory Health  
7 Care; or

8 3. The Joint Commission on the Accreditation of Healthcare  
9 Organizations; or

10 (ii) Certified to participate in the Medicare program, as enacted by  
11 Title XVIII of the Social Security Act;

12 (42) Fails to complete a criminal history records check under [§ 14–308.1] §  
13 **14–302** of this title;

14 (43) Except for the licensure process described under Subtitle 3A of this title,  
15 violates any provision of this title, any rule or regulation adopted by the Board, or any State  
16 or federal law pertaining to the practice of medicine;

17 (44) Fails to meet the qualifications for licensure under **THIS SUBTITLE**  
18 **AND** Subtitle 3 of this title;

19 (45) Fails to comply with § 1–223 of this article; or

20 (46) Fails to comply with the requirements of the Prescription Drug  
21 Monitoring Program under Title 21, Subtitle 2A of the Health – General Article.

22 **14–516.**

23 **THE PUBLIC INDIVIDUAL PROFILE FOR A LICENSED PHYSICIAN CREATED AND**  
24 **MAINTAINED UNDER § 14–411.1 OF THIS TITLE SHALL INCLUDE, AS REPORTED TO**  
25 **THE BOARD BY THE LICENSEE, EDUCATION AND PRACTICE INFORMATION ABOUT**  
26 **THE LICENSEE INCLUDING:**

27 **(1) THE NAME OF ANY MEDICAL SCHOOL THAT THE LICENSEE**  
28 **ATTENDED AND THE DATE ON WHICH THE LICENSEE GRADUATED FROM THE**  
29 **SCHOOL;**

30 **(2) A DESCRIPTION OF ANY INTERNSHIP AND RESIDENCY TRAINING;**

1           **(3) A DESCRIPTION OF ANY SPECIALTY BOARD CERTIFICATION BY A**  
2 **RECOGNIZED BOARD OF THE AMERICAN BOARD OF MEDICAL SPECIALTIES OR THE**  
3 **AMERICAN OSTEOPATHIC ASSOCIATION;**

4           **(4) THE NAME OF ANY HOSPITAL WHERE THE LICENSEE HAS MEDICAL**  
5 **PRIVILEGES;**

6           **(5) THE LOCATION OF THE LICENSEE'S PRIMARY PRACTICE SETTING;**

7           **(6) WHETHER THE LICENSEE PARTICIPATES IN THE MARYLAND**  
8 **MEDICAL ASSISTANCE PROGRAM;**

9           **(7) WHETHER THE LICENSEE MAINTAINS MEDICAL PROFESSIONAL**  
10 **LIABILITY INSURANCE; AND**

11           **(8) THE NUMBER OF MEDICAL MALPRACTICE FINAL COURT**  
12 **JUDGMENTS AND ARBITRATION AWARDS AGAINST THE LICENSEE WITHIN THE MOST**  
13 **RECENT 10-YEAR PERIOD.**

14 14-517.

15           (a) (1) Each hospital and related institution shall submit to the Board a report  
16 within 10 days after:

17                   (i) The hospital or related institution denied the application of a  
18 physician for staff privileges or limited, reduced, otherwise changed, or terminated the staff  
19 privileges of a physician, or the physician resigned whether or not under formal accusation,  
20 if the denial, limitation, reduction, change, termination, or resignation is for reasons that  
21 might be grounds for disciplinary action under [§ 14-404] § 14-515 of this subtitle;

22                   (ii) The hospital or related institution took any disciplinary action  
23 against a salaried, licensed physician without staff privileges, including termination of  
24 employment, suspension, or probation, for reasons that might be grounds for disciplinary  
25 action under [§ 14-404] § 14-515 of this subtitle;

26                   (iii) A licensed physician voluntarily resigned from the staff, employ,  
27 or training program of the hospital or related institution for reasons that might be grounds  
28 for disciplinary action under [§ 14-404] § 14-515 of this subtitle; or

29                   (iv) The hospital or related institution placed any other restrictions  
30 or conditions on any of the licensed physicians as listed in items (i) through (iii) of this  
31 paragraph for any reasons that might be grounds for disciplinary action under [§ 14-404]  
32 § 14-515 of this subtitle.

33 14-518.

1 (a) (1) Each alternative health system as defined in § 1–401 of this article shall  
2 submit to the Board a report within 10 days after:

3 (i) The alternative health system denied the formal application of a  
4 physician to contract with the alternative health system or limited, reduced, otherwise  
5 changed, or terminated the contract of a physician, or the physician resigned whether or  
6 not under formal accusation, if the denial, limitation, reduction, change, termination, or  
7 resignation is for reasons that might be grounds for disciplinary action under [§ 14–404] §  
8 **14–515** of this subtitle; or

9 (ii) The alternative health system placed any other restrictions or  
10 conditions on any licensed physician for any reasons that might be grounds for disciplinary  
11 action under [§ 14–404] § **14–515** of this subtitle.

12 14–521.

13 **(C) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS**  
14 **GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT**  
15 **EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.**

16 **(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
17 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

18 14–524.

19 **(B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS**  
20 **GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT**  
21 **EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.**

22 **(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
23 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

24 **[(b)] (C) (1)** The Board shall investigate any alleged violation of this section  
25 or [§ 14–507] § **14–523** of this [title] **SUBTITLE** and may enforce any provision of this title  
26 by injunction or other appropriate proceedings.

27 **[(c)] (2)** An action under this [section] **SUBSECTION** is in addition to and not  
28 instead of criminal prosecution under [§ 14–606 of this subtitle] **SUBSECTION (B) OF THIS**  
29 **SECTION.**

30 14–525.

1           **(D) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS**  
2 **GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT**  
3 **EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.**

4           **(2) A PERSON WHO IS REQUIRED TO GIVE NOTICE UNDER THIS**  
5 **SECTION, AND WHO FAILS TO GIVE THE REQUIRED NOTICE, IS LIABLE FOR A CIVIL**  
6 **PENALTY OF NOT MORE THAN \$100.**

7           **(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
8 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

9 14-527.

10           **(A) Except as otherwise provided in this title, a person may not practice, attempt**  
11 **to practice, or offer to practice medicine in this State unless licensed by the Board.**

12           **(B) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A**  
13 **PERSON WHO VIOLATES THIS SECTION IS:**

14                       **(I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A**  
15 **FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR**  
16 **BOTH; AND**

17                       **(II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO**  
18 **BE LEVIED BY A DISCIPLINARY PANEL.**

19           **(2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO**  
20 **NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER**  
21 **§ 14-306 OF THIS TITLE IF:**

22                       **(I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION**  
23 **OF THE LICENSE; AND**

24                       **(II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE**  
25 **REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.**

26           **(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
27 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

28 14-528.

29           **(c) An unlicensed individual who acts under [§ 14-302 or § 14-306] § 14-502 OR**  
30 **§ 14-503 of this [title] SUBTITLE may use the word “physician” together with another**

1 word to describe the occupation of the individual as in phrases such as “physician’s  
2 assistant” or “physician’s aide”.

3 **(D) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A**  
4 **PERSON WHO VIOLATES THIS SECTION IS:**

5 **(I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A**  
6 **FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR**  
7 **BOTH; AND**

8 **(II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO**  
9 **BE LEVIED BY A DISCIPLINARY PANEL.**

10 **(2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO**  
11 **NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER**  
12 **§ 14–306 OF THIS TITLE IF:**

13 **(I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION**  
14 **OF THE LICENSE; AND**

15 **(II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE**  
16 **REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.**

17 **(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**  
18 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

19 14–5A–01.

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

21 (c) “Committee” means the Respiratory Care [Professional Standards]  
22 **ADVISORY** Committee established under § 14–5A–05 of this subtitle.

23 14–5A–05.

24 There is a Respiratory Care [Professional Standards] **ADVISORY** Committee within  
25 the Board.

26 14–5A–06.

27 **(E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.**

28 14–5A–09.

1 (a) [To qualify for a license, an applicant shall be an individual who meets the  
2 requirements of this section.

3 (b) The applicant shall be of good moral character.

4 (c) The applicant shall be at least 18 years old.

5 (d) The applicant] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE**  
6 **REQUIREMENTS UNDER § 14-301 OF THIS TITLE, AN APPLICANT** shall[:

7 (1) Meet] **MEET** any educational, training, or examination requirements  
8 established by the Board including:

9 [(i)] **(1)** Graduation from an appropriate educational program as  
10 determined by the Board; and

11 [(ii)] **(2)** Certification by a national certifying board approved by  
12 the Board[; and

13 (2) Demonstrate oral and written competency in English as required by the  
14 Board].

15 [(e) The applicant shall complete a criminal history records check in accordance  
16 with § 14-308.1 of this title.]

17 14-5A-17.

18 (a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,  
19 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a  
20 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
21 suspend or revoke a license, if the [applicant or] licensee:

22 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
23 the applicant, licensee, or for another;

24 (2) Fraudulently or deceptively uses a license;

25 (3) Is guilty of unprofessional or immoral conduct in the practice of  
26 respiratory care;

27 (4) Is professionally, physically, or mentally incompetent;

28 (5) Abandons a patient;

29 (6) Is habitually intoxicated;

1 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous  
2 substance as defined in § 5–101 of the Criminal Law Article;

3 (8) Provides professional services while:

4 (i) Under the influence of alcohol; or

5 (ii) Using any narcotic or controlled dangerous substance as defined  
6 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic  
7 amounts or without valid medical indication;

8 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
9 patient so as to exploit the patient for financial gain;

10 (10) Willfully makes or files a false report or record in the practice of  
11 respiratory care;

12 (11) Willfully fails to file or record any report as required under law,  
13 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
14 to file or record a report;

15 (12) Breaches patient confidentiality;

16 (13) Pays or agrees to pay any sum or provide any form of remuneration or  
17 material benefit to any person for bringing or referring a patient or accepts or agrees to  
18 accept any sum or any form of remuneration or material benefit from an individual for  
19 bringing or referring a patient;

20 (14) Knowingly makes a misrepresentation while practicing respiratory  
21 care;

22 (15) Knowingly practices respiratory care with an unauthorized individual  
23 or aids an unauthorized individual in the practice of respiratory care;

24 (16) Offers, undertakes, or agrees to cure or treat disease by a secret  
25 method, treatment, or medicine;

26 (17) Is disciplined by a licensing or disciplinary authority or is convicted or  
27 disciplined by a court of any state or country or is disciplined by any branch of the United  
28 States uniformed services or the Veterans' Administration for an act that would be grounds  
29 for disciplinary action under the Board's disciplinary statutes;

30 (18) Fails to meet appropriate standards for the delivery of respiratory care  
31 performed in any inpatient or outpatient facility, office, hospital or related institution,  
32 domiciliary care facility, patient's home, or any other location in this State;

1 (19) Knowingly submits false statements to collect fees for which services  
2 are not provided;

3 (20) (i) Has been subject to investigation or disciplinary action by a  
4 licensing or disciplinary authority or by a court of any state or country for an act that would  
5 be grounds for disciplinary action under the Board's disciplinary statutes; and

6 (ii) Has:

7 1. Surrendered the license issued by the state or country; or

8 2. Allowed the license issued by the state or country to expire  
9 or lapse;

10 (21) Knowingly fails to report suspected child abuse in violation of § 5–704  
11 of the Family Law Article;

12 (22) Sells, prescribes, gives away, or administers drugs for illegal or  
13 illegitimate medical purposes;

14 (23) Practices or attempts to practice beyond the authorized scope of  
15 practice;

16 (24) Refuses, withholds from, denies, or discriminates against an individual  
17 with regard to the provision of professional services for which the licensee is licensed and  
18 qualified to render because the individual is HIV positive;

19 (25) Practices or attempts to practice a respiratory care procedure or uses or  
20 attempts to use respiratory care equipment if the applicant or licensee has not received  
21 education and training in the performance of the procedure or the use of the equipment;

22 (26) Fails to cooperate with a lawful investigation conducted by the Board  
23 or a disciplinary panel;

24 (27) Fails to practice under the supervision of a physician or violates a  
25 supervisory order of a supervising physician; or

26 (28) Fails to complete a criminal history records check under [§ 14–308.1] §  
27 **14–302** of this title.

28 14–5B–05.

29 (F) **A QUORUM OF THE COMMITTEE CONSISTS OF FIVE MEMBERS.**

30 14–5B–07.



1 (a) (2) The failure of a licensed physician to properly supervise a licensee is  
2 unprofessional conduct in the practice of medicine under [§ 14-404(a)(3)] **§ 14-515(A)(3)**  
3 of this title.

4 14-5B-09.

5 (a) [To qualify for a license, an applicant shall be an individual who meets the  
6 requirements of this section.

7 (b) Except as provided in subsection [(c)] **(B)** of this section, [the] **TO QUALIFY**  
8 **FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS**  
9 **TITLE, AN** applicant shall[:

10 (1) Be of good moral character;

11 (2) Be at least 18 years old;

12 (3) Demonstrate oral and written competency in English as required by the  
13 Board;

14 (4) [Meet] **MEET** any educational, training, or examination requirements  
15 established by the Board, including:

16 [(i)] **(1)** Graduation from an appropriate educational program as  
17 determined by the Board; and

18 [(ii)] **(2)** Certification[; and

19 (5) Complete a criminal history records check in accordance with §  
20 14-308.1 of this title].

21 [(c)] **(B)** To qualify for a license to practice as a radiologist assistant, an  
22 applicant shall:

23 (1) Be issued a general license to perform radiography;

24 (2) Complete an advanced academic program with a nationally recognized  
25 radiology curriculum that results in a baccalaureate degree, post baccalaureate certificate,  
26 or graduate degree and incorporates a radiologist-directed clinical preceptorship;

27 (3) Be certified in advanced cardiac life support; and

28 (4) Be certified as a radiologist assistant by the American Registry of  
29 Radiologic Technologists.

1           [(d)] (C)       Except for requirements adopted by the Board for license renewal under  
2 [§ 14-5B-12 of this subtitle] **§ 14-306 OF THIS TITLE**, nothing in this subtitle may be  
3 construed to require an individual who is certified by the Board as a radiation  
4 oncology/therapy technologist, medical radiation technologist, or nuclear medicine  
5 technologist as of October 1, 2008, to meet additional education, training, or examination  
6 requirements.

7 14-5B-11.

8           (a)       Licensure as a radiation therapist authorizes an individual to practice  
9 radiation therapy **IN THE STATE** while the license is effective.

10          (b)       Licensure as a radiographer authorizes an individual to practice radiography  
11 **IN THE STATE** while the license is effective.

12          (c)       Licensure as a nuclear medicine technologist authorizes an individual to  
13 practice nuclear medicine technology **IN THE STATE** while the license is effective.

14          (d)       Licensure as a radiologist assistant authorizes an individual to practice  
15 radiology assistance **IN THE STATE** while the license is effective.

16 14-5B-14.

17          (a)       Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,  
18 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a  
19 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
20 suspend or revoke a license, if the [applicant or] licensee:

21                  (1)       Fraudulently or deceptively obtains or attempts to obtain a license for  
22 the applicant, licensed individual, or for another;

23                  (2)       Fraudulently or deceptively uses a license;

24                  (3)       Is guilty of unprofessional or immoral conduct in the practice of  
25 radiation therapy, radiography, nuclear medicine technology, or radiology assistance;

26                  (4)       Is professionally, physically, or mentally incompetent;

27                  (5)       Abandons a patient;

28                  (6)       Is habitually intoxicated;

29                  (7)       Is addicted to or habitually abuses any narcotic or controlled dangerous  
30 substance as defined in § 5-101 of the Criminal Law Article;

31                  (8)       Provides professional services while:

1 (i) Under the influence of alcohol; or

2 (ii) Using any narcotic or controlled dangerous substance as defined  
3 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic  
4 amounts or without valid medical indication;

5 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
6 patient so as to exploit the patient for financial gain;

7 (10) Willfully makes or files a false report or record in the practice of  
8 radiation therapy, radiography, nuclear medicine technology, or radiology assistance;

9 (11) Willfully fails to file or record any report as required under law,  
10 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
11 to file or record a report;

12 (12) Breaches patient confidentiality;

13 (13) Pays or agrees to pay any sum or provide any form of remuneration or  
14 material benefit to any person for bringing or referring a patient or accepts or agrees to  
15 accept any sum or any form of remuneration or material benefit from an individual for  
16 bringing or referring a patient;

17 (14) Knowingly makes a misrepresentation while practicing radiation  
18 therapy, radiography, nuclear medicine technology, or radiology assistance;

19 (15) Knowingly practices radiation therapy, radiography, nuclear medicine  
20 technology, or radiology assistance with an unauthorized individual or aids an  
21 unauthorized individual in the practice of radiation therapy, radiography, nuclear medicine  
22 technology, or radiology assistance;

23 (16) Offers, undertakes, or agrees to cure or treat disease by a secret  
24 method, treatment, or medicine;

25 (17) Is disciplined by a licensing or disciplinary authority or is convicted or  
26 disciplined by a court of any state or country or is disciplined by any branch of the United  
27 States uniformed services or the Veterans' Administration for an act that would be grounds  
28 for disciplinary action under the Board's disciplinary statutes;

29 (18) Fails to meet appropriate standards for the delivery of quality radiation  
30 therapy, radiography, nuclear medicine technology, or radiology assistance care performed  
31 in any outpatient surgical facility, office, hospital or related institution, or any other  
32 location in this State;

33 (19) Knowingly submits false statements to collect fees for which services  
34 are not provided;

1           (20) (i) Has been subject to investigation or disciplinary action by a  
2 licensing or disciplinary authority or by a court of any state or country for an act that would  
3 be grounds for disciplinary action under the Board's disciplinary statutes; and

4           (ii) Has:

- 5           1. Surrendered the license issued by the state or country; or
- 6           2. Allowed the license issued by the state or country to expire  
7 or lapse;

8           (21) Knowingly fails to report suspected child abuse in violation of § 5-704  
9 of the Family Law Article;

10          (22) Sells, prescribes, gives away, or administers drugs for illegal or  
11 illegitimate medical purposes;

12          (23) Practices or attempts to practice beyond the authorized scope of  
13 practice;

14          (24) Refuses, withholds from, denies, or discriminates against an individual  
15 with regard to the provision of professional services for which the licensee is licensed and  
16 qualified to render because the individual is HIV positive;

17          (25) Practices or attempts to practice a radiation therapy, radiography,  
18 nuclear medicine technology, or radiology assistance procedure or uses radiation therapy,  
19 radiography, nuclear medicine technology, or radiology assistance equipment if the  
20 applicant or licensee has not received education, internship, training, or experience in the  
21 performance of the procedure or the use of the equipment;

22          (26) Fails to cooperate with a lawful investigation conducted by the Board  
23 or a disciplinary panel;

24          (27) Fails to practice under the supervision of a physician or violates a  
25 supervisory order of a supervising physician; or

26          (28) Fails to complete a criminal history records check under [§ 14-308.1] §  
27 **14-302** of this title.

28 14-5C-01.

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

30 (c) "Committee" means the Polysomnography [Professional Standards]  
31 **ADVISORY** Committee established under § 14-5C-05 of this subtitle.

1 14-5C-05.

2 There is a Polysomnography [Professional Standards] **ADVISORY** Committee within  
3 the Board.

4 14-5C-06.

5 **(E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.**

6 14-5C-08.

7 (b) This section does not apply to a student enrolled in an education program  
8 under [§ 14-5C-09(c)(3)] **§ 14-5C-09(3)** of this subtitle while practicing polysomnography  
9 in that program.

10 14-5C-09.

11 [(a) To qualify for a license, an applicant shall be an individual who meets the  
12 requirements of this section.

13 (b) The applicant shall:

14 (1) Be of good moral character;

15 (2) Be at least 18 years old; and

16 (3) Complete a criminal history records check in accordance with §  
17 14-308.1 of this title.

18 (c) An] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS**  
19 **SET FORTH IN § 14-301 OF THIS TITLE, AN** applicant for a polysomnographic technologist  
20 license shall:

21 (1) Have passed the national certifying examination given by the Board of  
22 Registered Polysomnographic Technologists or another examination approved by the  
23 Board;

24 (2) Submit to the Board proof of certification as a registered  
25 polysomnographic technologist or other national certification approved by the Board;

26 (3) (i) 1. Have graduated from a polysomnographic educational  
27 program that is accredited by the Commission on Accreditation of Allied Health Education  
28 Programs; or

29 2. A. Have graduated from a sleep technologist  
30 educational program that is accredited by the American Academy of Sleep Medicine; and

1 B. Have completed a clinical component of an educational  
2 program as established by the Committee and approved by the Board;

3 (ii) 1. Have graduated from a respiratory care educational  
4 program that is accredited by the Commission on Accreditation of Allied Health Education  
5 Programs; and

6 2. Have completed the Committee on Accreditation for  
7 Respiratory Care's curriculum for a polysomnography certificate that is accredited by the  
8 Commission on Accreditation of Allied Health Education Programs; or

9 (iii) 1. Have graduated from an electroneuro-diagnostic  
10 educational program that is accredited by the Commission on Accreditation of Allied Health  
11 Education Programs; and

12 2. Have completed additional units, modules, and courses of  
13 instruction focused on polysomnographic technology that are accredited by the Commission  
14 on Accreditation of Allied Health Education Programs; and

15 (4) Meet any other educational or clinical requirements established by the  
16 Committee and approved by the Board.

17 14-5C-10.

18 **[(a)]** The Board shall waive the education requirement under **[\S 14-5C-09(c)(3)]** **\S**  
19 **14-5C-09(3)** of this subtitle if on or before September 30, 2013, an individual:

20 (1) Has passed the national certifying examination by the Board of  
21 Registered Polysomnographic Technologists or another examination approved by the  
22 Board;

23 (2) Is certified by the Board of Registered Polysomnographic Technologists  
24 as a registered polysomnographic technologist;

25 (3) Has submitted an application for licensure to the Board; and

26 (4) Meets all of the requirements under **[\S 14-5C-09(b) and (c)(1) and (2)]**  
27 **\S 14-301(B), (C), AND (D) OF THIS TITLE AND \S 14-5C-09(1) AND (2)** of this subtitle.

28 **[(b)]** (1) If an individual has not satisfied the requirements under subsection (a)  
29 of this section on or before September 30, 2013, the individual may petition the Board for  
30 an extension.

31 (2) The Board shall determine whether to grant an extension under this  
32 subsection on a case-by-case basis.]

1 14-5C-17.

2 (a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,  
3 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a  
4 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
5 suspend or revoke a license, if the [applicant or] licensee:

6 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
7 the applicant, licensee, or for another;

8 (2) Fraudulently or deceptively uses a license;

9 (3) Is guilty of unprofessional or immoral conduct in the practice of  
10 polysomnography;

11 (4) Is professionally, physically, or mentally incompetent;

12 (5) Abandons a patient;

13 (6) Is habitually intoxicated;

14 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous  
15 substance as defined in § 5-101 of the Criminal Law Article;

16 (8) Provides professional services while:

17 (i) Under the influence of alcohol; or

18 (ii) Using any narcotic or controlled dangerous substance as defined  
19 in § 5-101 of the Criminal Law Article or any other drug that is in excess of therapeutic  
20 amounts or without valid medical indication;

21 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
22 patient so as to exploit the patient for financial gain;

23 (10) Willfully makes or files a false report or record in the practice of  
24 polysomnography;

25 (11) Willfully fails to file or record any report as required under law,  
26 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
27 to file or record a report;

28 (12) Breaches patient confidentiality;

29 (13) Pays or agrees to pay any sum or provide any form of remuneration or  
30 material benefit to any person for bringing or referring a patient or accepts or agrees to

1 accept any sum or any form of remuneration or material benefit from an individual for  
2 bringing or referring a patient;

3 (14) Knowingly makes a misrepresentation while practicing  
4 polysomnography;

5 (15) Knowingly practices polysomnography with an unauthorized individual  
6 or aids an unauthorized individual in the practice of polysomnography;

7 (16) Knowingly delegates a polysomnographic duty to an unlicensed  
8 individual;

9 (17) Offers, undertakes, or agrees to cure or treat disease by a secret  
10 method, treatment, or medicine;

11 (18) Is disciplined by a licensing or disciplinary authority or is convicted or  
12 disciplined by a court of any state or country or is disciplined by any branch of the United  
13 States uniformed services or the U.S. Department of Veterans Affairs for an act that would  
14 be grounds for disciplinary action under the Board's disciplinary statutes;

15 (19) Fails to meet appropriate standards for the delivery of  
16 polysomnographic services performed in a hospital sleep laboratory or a stand-alone sleep  
17 center;

18 (20) Knowingly submits false statements to collect fees for which services  
19 are not provided;

20 (21) (i) Has been subject to investigation or disciplinary action by a  
21 licensing or disciplinary authority or by a court of any state or country for an act that would  
22 be grounds for disciplinary action under the Board's disciplinary statutes; and

23 (ii) Has:

24 1. Surrendered the license, if any, issued by the state or  
25 country; or

26 2. Allowed the license, if any, issued by the state or country  
27 to expire or lapse;

28 (22) Knowingly fails to report suspected child abuse in violation of § 5-704  
29 of the Family Law Article;

30 (23) Sells, prescribes, gives away, or administers drugs for illegal or  
31 illegitimate medical purposes;

32 (24) Practices or attempts to practice beyond the authorized scope of  
33 practice;



1 (25) Refuses, withholds from, denies, or discriminates against an individual  
2 with regard to the provision of professional services for which the licensee is licensed and  
3 qualified to render because the individual is HIV positive;

4 (26) Practices or attempts to practice a polysomnography procedure or uses  
5 or attempts to use polysomnography equipment if the applicant or licensee has not received  
6 education and training in the performance of the procedure or the use of the equipment;

7 (27) Fails to cooperate with a lawful investigation conducted by the Board;  
8 or

9 (28) Fails to complete a criminal history records check under [§ 14-308.1] §  
10 **14-302** of this title.

11 14-5D-05.

12 (F) **A QUORUM OF THE COMMITTEE CONSISTS OF SIX MEMBERS.**

13 14-5D-07.

14 (b) This section does not apply to:

15 (1) An individual employed by the federal government as an athletic  
16 trainer while the individual is practicing within the scope of that employment;

17 (2) An individual employed by or under contract with an entity located in  
18 another state who represents that entity:

19 (i) At an athletic event in the State;

20 (ii) For a period of time not to exceed 45 days within a calendar year;  
21 and

22 (iii) By providing athletic training services to individuals  
23 representing the entity at the event; or

24 (3) A student enrolled in an education program that meets the criteria of  
25 [§ 14-5D-08(c)(2)] **§ 14-5D-08(A)(2)** of this subtitle while engaged in an unpaid, clinical  
26 educational experience of athletic training.

27 14-5D-08.

28 [(a) To qualify for a license, an applicant shall be an individual who meets the  
29 requirements of this section.

30 (b) The applicant shall:

- 1 (1) Be of good moral character;
- 2 (2) Be at least 18 years old; and
- 3 (3) Complete a criminal history records check in accordance with §  
4 14–308.1 of this title.]

5 **[(c)] (A) [The] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE**  
6 **REQUIREMENTS UNDER § 14–301 OF THIS TITLE, AN** applicant shall:

- 7 (1) Have a current certification by a national certifying board approved by  
8 the Board; **AND**
- 9 (2) Have received a bachelor’s or master’s degree from an athletic training  
10 educational program that is accredited by the Commission on Accreditation of Athletic  
11 Training Education or its successor[;
- 12 (3) Demonstrate oral and written competency in English as required by the  
13 Board; and
- 14 (4) Meet any other requirements established by the Board].

15 **[(d)] (B)** The Board shall waive the education requirements under this section if  
16 an individual was certified by the National Athletic Trainers’ Association Board of  
17 Certification, Inc., on or before October 1, 2012, and is currently in good standing.

18 14–5D–10.

19 (a) An athletic trainer license authorizes the licensee to practice athletic training  
20 services **IN THE STATE** while the license is effective.

21 14–5D–14.

22 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel,  
23 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a  
24 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
25 suspend or revoke a license, if the [applicant or] licensee:

- 26 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
27 the applicant, licensee, or for another;
- 28 (2) Fraudulently or deceptively uses a license;
- 29 (3) Is guilty of unprofessional or immoral conduct in the practice of athletic  
30 training;

- 1 (4) Is professionally, physically, or mentally incompetent;
- 2 (5) Abandons a patient;
- 3 (6) Habitually is intoxicated;
- 4 (7) Is addicted to, or habitually abuses, any narcotic or controlled  
5 dangerous substance as defined in § 5–101 of the Criminal Law Article;
- 6 (8) Provides professional services while:
- 7 (i) Under the influence of alcohol; or
- 8 (ii) Using any narcotic or controlled dangerous substance as defined  
9 in § 5–101 of the Criminal Law Article, or any other drug that is in excess of therapeutic  
10 amounts or without valid medical indication;
- 11 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
12 patient so as to exploit the patient for financial gain;
- 13 (10) Willfully makes or files a false report or record in the practice of athletic  
14 training;
- 15 (11) Willfully fails to file or record any report as required under law,  
16 willfully impedes or obstructs the filing or recording of the report, or induces another to fail  
17 to file or record the report;
- 18 (12) Breaches patient confidentiality;
- 19 (13) Pays or agrees to pay any sum or provide any form of remuneration or  
20 material benefit to any individual for bringing or referring a patient or accepts or agrees to  
21 accept any sum or any form of remuneration or material benefit from an individual for  
22 bringing or referring a patient;
- 23 (14) Knowingly makes a misrepresentation while practicing athletic  
24 training;
- 25 (15) Knowingly practices athletic training with an unauthorized individual  
26 or aids an unauthorized individual in the practice of athletic trainer services;
- 27 (16) Offers, undertakes, or agrees to cure or treat disease by a secret  
28 method, treatment, or medicine;
- 29 (17) Is disciplined by a licensing, certifying, or disciplinary authority or is  
30 convicted or disciplined by a court of any state or country or is disciplined by any branch of

1 the United States uniformed services or the Veterans Administration for an act that would  
2 be grounds for disciplinary action under this section;

3 (18) Fails to meet appropriate standards for the delivery of athletic training  
4 services;

5 (19) Knowingly submits false statements to collect fees for which services  
6 have not been provided;

7 (20) (i) Has been subject to investigation or disciplinary action by a  
8 licensing or disciplinary authority or by a court of any state or country for an act that would  
9 be grounds for disciplinary action under the Board's disciplinary statutes; and

10 (ii) Has:

11 1. Surrendered the license issued by the state or country; or

12 2. Allowed the license issued by the state or country to expire  
13 or lapse;

14 (21) Knowingly fails to report suspected child abuse in violation of § 5–704  
15 of the Family Law Article;

16 (22) Sells, prescribes, gives away, or administers drugs for illegal or  
17 illegitimate medical purposes;

18 (23) Practices or attempts to practice beyond the authorized scope of  
19 practice;

20 (24) Refuses, withholds from, denies, or discriminates against an individual  
21 with regard to the provision of professional services for which the licensee is licensed and  
22 qualified to render because the individual is HIV positive;

23 (25) Practices or attempts to practice an athletic training procedure or uses  
24 or attempts to use athletic training equipment if the applicant or licensee has not received  
25 education and training in the performance of the procedure or the use of the equipment;

26 (26) Fails to cooperate with a lawful investigation conducted by the Board  
27 or a disciplinary panel;

28 (27) Fails to practice under the supervision of a physician or violates the  
29 approved evaluation and treatment protocol;

30 (28) Violates an order of the Board or a disciplinary panel, including any  
31 condition of probation; or

1 (29) Fails to complete a criminal history records check under [§ 14-308.1] §  
2 **14-302** of this title.

3 14-5E-01.

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

5 (g) "Student" means an individual who, in accordance with [§ 14-5E-09(c)] §  
6 **14-5E-09** of this subtitle, is:

7 (1) Enrolled in an accredited educational program to qualify for a license  
8 under this subtitle; and

9 (2) Performing perfusion services within the accredited program under the  
10 supervision of a licensed perfusionist and without compensation.

11 14-5E-06.

12 **(E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.**

13 14-5E-08.

14 (b) This section does not apply to a student enrolled in an education program  
15 under [§ 14-5E-09(c)(2)] **§ 14-5E-09(2)** of this subtitle while practicing perfusion in that  
16 program.

17 14-5E-09.

18 [(a) To qualify for a license, an applicant shall be an individual who meets the  
19 requirements of this section.

20 (b) The applicant shall:

21 (1) Be of good moral character;

22 (2) Be at least 18 years old; and

23 (3) Complete a criminal history records check in accordance with §  
24 14-308.1 of this title.

25 (c) An] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS**  
26 **UNDER § 14-301 OF THIS TITLE, AN** applicant for a license to practice perfusion shall:

27 (1) (i) Submit to the Board satisfactory evidence of certification as a  
28 certified perfusionist or other national certification approved by the Board; and

1 (ii) Meet any other educational or clinical requirements established  
2 by the Committee and approved by the Board; or

3 (2) (i) Submit to the Board satisfactory evidence of graduation from a  
4 perfusion educational program that is accredited by the Commission on Accreditation of  
5 Allied Health Education Programs, or the Commission's predecessor or successor; and

6 (ii) Meet any other educational or clinical requirements established  
7 by the Committee and approved by the Board.

8 14-5E-10.

9 (a) Except as provided in subsection (b) of this section, an applicant who  
10 otherwise qualifies for a license under [~~§ 14-5E-09(c)(2)~~] **§ 14-5E-09(2)** of this subtitle is  
11 entitled to be licensed for a single 2-year term before taking the national certifying  
12 examination given by the American Board of Cardiovascular Perfusion or its successor  
13 organization or another examination given or approved by the Board.

14 14-5E-13.

15 [(a) (1) A license expires on a date set by the Board, unless the license is  
16 renewed for an additional term as provided in this section.

17 (2) The term of a license issued by the Board may not exceed 3 years.

18 (b) At least 1 month before a license expires, the Board shall send to the licensed  
19 perfusionist a renewal notice that states:

20 (1) The date on which the current license expires;

21 (2) The date by which the renewal application must be received by the  
22 Board for the renewal to be issued and sent before the license expires;

23 (3) The amount of the renewal fee; and]

24 [(4) (A) For licensees who qualified for an initial license under [§  
25 14-5E-09(c)(2)] **§ 14-5E-09(2)** of this subtitle, **THE NOTIFICATION SENT TO**  
26 **LICENSEES UNDER § 14-306(B) OF THIS TITLE SHALL INCLUDE A STATEMENT** that  
27 the licensee must submit satisfactory evidence of a passing score on the examination as  
28 required under subsection [(c)(2)] **(B)** of this section.

29 [(c) (1) Except as otherwise provided in this subtitle, before a license expires,  
30 the licensed perfusionist periodically may renew it for an additional term, if the licensee:

31 (i) Otherwise is entitled to be licensed;

- 1 (ii) Is of good moral character;
- 2 (iii) Pays to the Board a renewal fee set by the Board; and
- 3 (iv) Except as provided in paragraph (2) of this subsection, submits  
4 to the Board:
- 5 1. A renewal application on the form that the Board requires;  
6 and
- 7 2. Satisfactory evidence of compliance with any continuing  
8 education or competency requirements and other requirements set under this section for  
9 license renewal.]

10 **[(2)] (B)** A licensee who qualified for an initial license under **[§**  
11 **14-5E-09(c)(2)] § 14-5E-09(2)** of this subtitle shall submit to the Board satisfactory  
12 evidence of a passing score on the national certifying examination given by the American  
13 Board of Cardiovascular Perfusion or its successor organization or another examination  
14 given or approved by the Board.

15 **[(d)]** In addition to any other qualifications and requirements established by the  
16 Board, the Board shall establish continuing education or competency requirements as a  
17 condition of the renewal of a license under this section.]

18 **[(e)] (C)** (1) The Board shall renew the license of each licensee who meets the  
19 requirements of this section **AND § 14-306 OF THIS TITLE**.

20 (2) The Board may not renew the license of a licensee who fails to submit  
21 satisfactory evidence of a passing score on the examination as required under subsection  
22 **[(c)(2)] (B)** of this section.

23 **[(f)]** The Board shall reinstate the license of an individual who has failed to renew  
24 the license for any reason if the individual:

- 25 (1) Applies for reinstatement after the date the license expires;
- 26 (2) Meets the renewal requirements of this section; and
- 27 (3) Pays to the Board the reinstatement fee set by the Board.

28 (g) (1) Beginning October 1, 2016, the Board shall require a criminal history  
29 records check in accordance with § 14-308.1 of this title for:

- 30 (i) Renewal applicants as determined by regulations adopted by the  
31 Board; and

1 (ii) Each former licensee who files for reinstatement under  
2 subsection (f) of this section.

3 (2) On receipt of the criminal history record information of a licensee  
4 forwarded to the Board in accordance with § 14–308.1 of this title, in determining whether  
5 disciplinary action should be taken, based on the criminal history record information,  
6 against a licensee who renewed or reinstated a license, the Board shall consider:

7 (i) The age at which the crime was committed;

8 (ii) The nature of the crime;

9 (iii) The circumstances surrounding the crime;

10 (iv) The length of time that has passed since the crime;

11 (v) Subsequent work history;

12 (vi) Employment and character references; and

13 (vii) Other evidence that demonstrates whether the licensee poses a  
14 threat to the public health or safety.

15 (3) The Board may renew or reinstate a license only if the licensee or  
16 applicant attests that the licensee or applicant has submitted to a criminal history records  
17 check under § 14–308.1 of this title.

18 (h) A disciplinary panel may impose a civil penalty of up to \$100 per continuing  
19 education credit in lieu of a sanction under § 14–5E–16 of this subtitle, for a first offense  
20 for failure of a licensee to obtain the continuing education credits required by the Board.]

21 14–5E–14.

22 [(a) (1) A licensed perfusionist shall notify the Board in writing of a change in  
23 name or address within 60 days after the change.

24 (2) A licensed perfusionist who fails to comply with the requirements of  
25 paragraph (1) of this subsection is subject to an administrative penalty of \$100.]

26 [(b)] Each licensed perfusionist shall:

27 (1) Keep a copy of the license in the licensee’s employment file; and

28 (2) Make the license available for inspection on request.

29 14–5E–16.



1 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel,  
2 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a  
3 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
4 suspend or revoke a license, if the [applicant or] licensee:

5 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
6 the applicant or licensee or for another;

7 (2) Fraudulently or deceptively uses a license;

8 (3) Is guilty of unprofessional or immoral conduct in the practice of  
9 perfusion;

10 (4) Is professionally, physically, or mentally incompetent;

11 (5) Abandons a patient;

12 (6) Is habitually intoxicated;

13 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous  
14 substance as defined in § 5–101 of the Criminal Law Article;

15 (8) Provides professional services while:

16 (i) Under the influence of alcohol; or

17 (ii) Using any narcotic or controlled dangerous substance as defined  
18 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic  
19 amounts or without valid medical indication;

20 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
21 patient so as to exploit the patient for financial gain;

22 (10) Willfully makes or files a false report or record in the practice of  
23 perfusion;

24 (11) Willfully fails to file or record any report as required under law,  
25 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
26 to file or record a report;

27 (12) Breaches patient confidentiality;

28 (13) Pays or agrees to pay any sum or provide any form of remuneration or  
29 material benefit to any person for bringing or referring a patient or accepts or agrees to  
30 accept any sum or any form of remuneration or material benefit from an individual for  
31 bringing or referring a patient;

1 (14) Knowingly makes a misrepresentation while practicing perfusion;

2 (15) Knowingly practices perfusion with an unauthorized individual or aids  
3 an unauthorized individual in the practice of perfusion;

4 (16) Knowingly delegates a perfusion duty to an unlicensed individual;

5 (17) Offers, undertakes, or agrees to cure or treat disease by a secret  
6 method, treatment, or medicine;

7 (18) Is disciplined by a licensing or disciplinary authority or is convicted or  
8 disciplined by a court of any state or country or is disciplined by any branch of the United  
9 States uniformed services or the U.S. Department of Veterans Affairs for an act that would  
10 be grounds for disciplinary action under the Board's disciplinary statutes;

11 (19) Fails to meet appropriate standards for the delivery of perfusion  
12 services;

13 (20) Knowingly submits false statements to collect fees for which services  
14 are not provided;

15 (21) (i) Has been subject to investigation or disciplinary action by a  
16 licensing or disciplinary authority or by a court of any state or country for an act that would  
17 be grounds for disciplinary action under the Board's disciplinary statutes; and

18 (ii) Has:

19 1. Surrendered the license, if any, issued by the state or  
20 country; or

21 2. Allowed the license, if any, issued by the state or country  
22 to expire or lapse;

23 (22) Knowingly fails to report suspected child abuse in violation of § 5-704  
24 of the Family Law Article;

25 (23) Sells, prescribes, gives away, or administers drugs for illegal or  
26 illegitimate medical purposes;

27 (24) Practices or attempts to practice beyond the authorized scope of  
28 practice;

29 (25) Refuses, withholds from, denies, or discriminates against an individual  
30 with regard to the provision of professional services for which the licensee is licensed and  
31 qualified to render because the individual is HIV positive;

1 (26) Practices or attempts to practice a perfusion procedure or uses or  
2 attempts to use perfusion equipment if the applicant or licensee has not received education  
3 and training in the performance of the procedure or the use of the equipment;

4 (27) Fails to cooperate with a lawful investigation of the Board or a  
5 disciplinary panel; or

6 (28) Fails to complete a criminal history records check under [§ 14–308.1] §  
7 **14–302** of this title.

8 14–5F–07.

9 **(G) A QUORUM OF THE COMMITTEE CONSISTS OF THREE MEMBERS.**

10 14–5F–11.

11 (a) [To] **IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS**  
12 **TITLE, TO** qualify for a license, an [applicant shall be an individual who meets the  
13 requirements of this section.

14 (b) The applicant shall be of good moral character.

15 (c) The] applicant shall be at least 21 years old.

16 [(d)] **(B)** Except as provided in § 14–5F–12 of this subtitle, the applicant shall:

17 (1) Have a doctorate in naturopathic medicine from an approved  
18 naturopathic medical program; and

19 (2) Pass the competency–based national naturopathic licensing  
20 examination Part I and Part II administered by the North American Board of Naturopathic  
21 Examiners, or its successor agency that has been nationally recognized to administer a  
22 naturopathic examination that represents federal standards of education and training.

23 [(e)] **(C)** An applicant shall be physically and mentally capable of safely  
24 practicing naturopathic medicine with or without reasonable accommodation.

25 [(f)] **(D)** If an applicant is licensed, certified, or registered to practice  
26 naturopathic medicine or any other health occupation in another state, the applicant shall  
27 be in good standing with the applicable state licensing, certification, or registration  
28 authority.

29 [(g) An applicant shall complete a criminal history records check in accordance  
30 with § 14–308.1 of this title.]

31 14–5F–12.

1 To apply for a license, an applicant shall:

2 [(1) Complete a criminal history records check in accordance with §  
3 14–308.1 of this title;

4 (2) Submit an application to the Board on a form that the Board requires;

5 (3) Pay to the Board an application fee set by the Board;]

6 [(4) (1) If the applicant has been licensed, certified, or registered to  
7 practice naturopathic medicine in another state, submit all evidence relating to:

8 (i) Any disciplinary action taken or any administrative penalties  
9 assessed against the applicant by the appropriate state licensing, certification, or  
10 registration authority; and

11 (ii) Any consent agreements the applicant entered into that contain  
12 conditions placed on the applicant's professional conduct and practice, including any  
13 voluntary surrender of a license;

14 [(5) (2) Complete and submit to the Board a Board–approved written  
15 attestation that:

16 (i) States that the applicant has a collaboration and consultation  
17 agreement with a physician licensed under this article;

18 (ii) Includes the name and license number of the physician with  
19 whom the applicant has a collaboration and consultation agreement;

20 (iii) States that the applicant will refer patients to and consult with  
21 physicians and other health care providers licensed or certified under this article as needed;  
22 and

23 (iv) States that the applicant will require patients to sign a consent  
24 form that states that the applicant's practice of naturopathic medicine is limited to the  
25 scope of practice identified in § 14–5F–14 of this subtitle; and

26 [(6) (3) Inform the physician named in the attestation that the physician  
27 has been named.

28 14–5F–15.

29 [(a) (1) The term of a license issued by the Board may not exceed 3 years.

1           (2) A license expires on a date set by the Board, unless the license is  
2 renewed as provided in this section.

3           (b) At least 1 month before the license expires, the Board shall send to the licensee  
4 a renewal notice that states:

5           (1) The date on which the current license expires;

6           (2) The date by which the renewal application must be received by the  
7 Board for the renewal to be issued and mailed before the license expires; and

8           (3) The amount of the renewal fee.

9           (c) The Board shall renew the license of a licensee who:

10           (1) Submits a renewal application on the form that the Board requires;

11           (2) Is of good moral character;

12           (3) Pays a renewal fee set by the Board;

13           (4) Is otherwise entitled to be licensed;

14           (5) Meets the continuing education requirements adopted by the Board;  
15 and

16           (6) Provides] **IN ADDITION TO MEETING THE LICENSE RENEWAL**  
17 **REQUIREMENTS UNDER § 14-306 OF THIS TITLE, THE LICENSEE SHALL PROVIDE**  
18 evidence of biennial cardiopulmonary resuscitation certification.

19           [(d) (1) Beginning October 1, 2016, the Board shall require a criminal history  
20 records check in accordance with § 14-308.1 of this title for:

21           (i) Renewal applicants as determined by regulations adopted by the  
22 Board; and

23           (ii) Each former licensee who files for reinstatement under §  
24 14-5F-16(b) of this subtitle.

25           (2) On receipt of the criminal history record information of a licensee  
26 forwarded to the Board in accordance with § 14-308.1 of this title, in determining whether  
27 disciplinary action should be taken, based on the criminal history record information,  
28 against a licensee who renewed or reinstated a license, the Board shall consider:

29           (i) The age at which the crime was committed;

30           (ii) The nature of the crime;

- 1 (iii) The circumstances surrounding the crime;
- 2 (iv) The length of time that has passed since the crime;
- 3 (v) Subsequent work history;
- 4 (vi) Employment and character references; and
- 5 (vii) Other evidence that demonstrates whether the licensee poses a  
6 threat to the public health or safety.

7 (3) The Board may renew or reinstate a license only if the licensee or  
8 applicant attests that the licensee or applicant has submitted to a criminal history records  
9 check under § 14-308.1 of this title.

10 (e) A disciplinary panel may impose a civil penalty of up to \$100 per continuing  
11 education credit in lieu of a sanction under § 14-5F-18 of this subtitle, for a first offense  
12 for failure of a licensee to obtain the continuing education credits required by the Board.]

13 14-5F-16.

14 (a) [(1)] The Board may place a licensee on inactive status if the licensee  
15 submits to the Board:

16 [(i)] (1) An application for inactive status on the form required by  
17 the Board; and

18 [(ii)] (2) The inactive status fee set by the Board.

19 [(2)] (B) The Board shall issue a license to a naturopathic doctor who is  
20 on inactive status if the individual is otherwise entitled to be licensed under this subtitle  
21 and submits to the Board:

22 [(i)] (1) Satisfactory evidence of compliance with the requirements  
23 of [§ 14-308.1] § 14-302 of this title;

24 [(ii)] (2) Satisfactory evidence of compliance with the continuing  
25 education requirements the Board adopts for this purpose; and

26 [(iii)] (3) A reinstatement fee set by the Board.

27 [(b) The Board shall reinstate the license of a naturopathic doctor who has failed  
28 to renew the license for any reason if the naturopathic doctor:

29 (1) Meets the renewal requirements of § 14-5F-15 of this subtitle;

1           (2)   Pays to the Board a reinstatement fee set by the Board; and

2           (3)   Submits to the Board satisfactory evidence of compliance with the  
3 qualifications and requirements adopted by the Board under this subtitle for license  
4 reinstatements.]

5 14–5F–18.

6           (a)   Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel,  
7 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a  
8 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
9 suspend or revoke a license of any licensee if the [applicant or] licensee:

10           (1)   Is habitually intoxicated, or is addicted to or habitually abuses any  
11 narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law  
12 Article, or any drug without a valid prescription or indication, or provides professional  
13 services while under the influence of alcohol or using any narcotic or controlled dangerous  
14 substance, as defined in § 5–101 of the Criminal Law Article;

15           (2)   Has been found to be mentally incompetent by a physician if the mental  
16 incompetence impairs the ability of the applicant or licensee to undertake the practice of  
17 naturopathic medicine in a manner consistent with the safety of the public;

18           (3)   Has entered into a consent agreement with or has been assessed an  
19 administrative penalty by a licensing authority in another state;

20           (4)   Fraudulently or deceptively obtains, attempts to obtain, or uses a  
21 license for the applicant, the licensee, or another;

22           (5)   Has a license revoked or suspended, or was otherwise acted against,  
23 including the denial of licensure, by the licensing authority of another state;

24           (6)   Uses false, deceptive, or misleading advertising;

25           (7)   Advertises, practices, or attempts to practice under a name other than  
26 the applicant's or licensee's own name;

27           (8)   Aids, assists, employs, or advises any unlicensed individual to practice  
28 naturopathic medicine in violation of this subtitle;

29           (9)   Willfully makes or files a false report or record in the practice of  
30 naturopathic medicine;

31           (10)  Willfully or negligently fails to file a report or record as required by law,  
32 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
33 to file or record a report;

- 1           (11) Pays or receives any commission, bonus, kickback, or rebate, or engages  
2 in any split-fee arrangement in any form with a licensed physician, organization, agency,  
3 or other person, either directly or indirectly, for patients referred to health care providers;
- 4           (12) Exercises influence within a patient-doctor relationship for purposes of  
5 engaging a patient in sexual activity;
- 6           (13) Engages in sexual misconduct with a patient;
- 7           (14) Fails to keep written medical records justifying the course of treatment  
8 of a patient;
- 9           (15) Engages in an act or omission that does not meet generally accepted  
10 standards of practice of naturopathic medicine or of safe care of patients, whether or not  
11 actual injury to a patient is established;
- 12           (16) Delegates professional responsibilities to an individual when the  
13 licensee delegating the responsibilities knows or has reason to know that the individual is  
14 not qualified by training, experience, or licensure to perform the responsibilities;
- 15           (17) Promotes the sale of services, drugs, devices, appliances, or goods to a  
16 patient so as to exploit the patient for financial gain;
- 17           (18) Breaches patient confidentiality;
- 18           (19) Is guilty of unprofessional or immoral conduct in the practice of  
19 naturopathic medicine;
- 20           (20) Offers, undertakes, or agrees to cure or treat a disease by a secret  
21 method, treatment, or medicine;
- 22           (21) Knowingly fails to report suspected child abuse in violation of § 5-704  
23 of the Family Law Article;
- 24           (22) Sells, prescribes, gives away, or administers drugs for illegal or  
25 illegitimate purposes;
- 26           (23) Denies or discriminates against an individual with regard to the  
27 provision of professional services for which the licensee is licensed and qualified to render  
28 because the individual is HIV positive;
- 29           (24) Fails to cooperate with a lawful investigation of the Board;
- 30           (25) Abandons a patient;



1 (26) Violates any provision of this title or any regulation adopted by the  
2 Board; or

3 (27) Fails to complete a criminal history records check under [§ 14–308.1] §  
4 **14–302** of this title.

5 14–5F–21.

6 [(a) The Board shall give notice and hold a hearing in accordance with the  
7 Administrative Procedure Act.

8 (b) The individual may be represented at the hearing by counsel.

9 (c) Over the signature of an officer or the administrator of the Board, the Board  
10 or a disciplinary panel may issue subpoenas and administer oaths in connection with any  
11 investigation under this subtitle and any hearings or proceedings before the Board or a  
12 disciplinary panel.

13 (d) If, without lawful excuse, a person disobeys a subpoena from the Board or a  
14 disciplinary panel or an order by the Board or a disciplinary panel to take an oath or to  
15 testify or answer a question, then, on petition of the Board, a court of competent jurisdiction  
16 may punish the person as for contempt of court.

17 (e) If, after due notice, the individual against whom the action is contemplated  
18 fails or refuses to appear, the Board or a disciplinary panel may hear and determine the  
19 matter.

20 (f) If, after a hearing **IN ACCORDANCE WITH THE ADMINISTRATIVE**  
21 **PROCEDURE ACT**, an individual is found in violation of § 14–5F–18 of this subtitle, the  
22 individual shall pay the costs of the hearing as specified in a regulation adopted by the  
23 Board.

24 14–5F–24.

25 (c) A disciplinary panel may not reinstate a surrendered or revoked license that  
26 has been surrendered or revoked for a period of more than 1 year unless the licensee:

27 (1) Meets the requirements for reinstatement as established under this  
28 title; and

29 (2) Completes a criminal history records check in accordance with [§  
30 14–308.1] § **14–302** of this title.

31 14–5G–09.

1 (a) To qualify for a license to practice genetic counseling, an applicant shall be an  
2 individual who meets the requirements of this section **AND § 14–301 OF THIS TITLE.**

3 (b) **[The applicant must be of good moral character.**

4 (c) The applicant must be at least 18 years old.

5 (d) The applicant must be a graduate of an appropriate education program  
6 approved by the Board.

7 **[(e) (C)** Except as provided in subsection **[(f) (D)] (D)** of this section, the applicant  
8 shall submit to the Board satisfactory evidence of certification by a national certifying  
9 organization approved by the Board.

10 **[(f) (D)** If an applicant does not meet the requirement under subsection **[(e)]**  
11 **(C)** of this section, the applicant may qualify for licensure if the applicant:

12 (1) Has worked as a genetic counselor for:

13 (i) At least 10 years before January 1, 2024; and

14 (ii) At least 5 consecutive years immediately preceding the date on  
15 which the applicant submits the application for licensure;

16 (2) Has graduated from an education program approved by the Board;

17 (3) Submits to the Board three letters of recommendation from licensed  
18 physicians who have been licensed for at least 5 years or certified genetic counselors eligible  
19 for licensure and who:

20 (i) Have worked with the applicant in an employment or  
21 professional setting for 3 years before the applicant submits the application for licensure;  
22 and

23 (ii) Can attest to the applicant's competency in providing genetic  
24 counseling services; and

25 (4) Applies for initial licensure on or before December 31, 2024.

26 **[(g)** The applicant shall complete a criminal history records check in accordance  
27 with § 14–308.1 of this title.]

28 **[(h) (E)** The applicant shall meet any additional education, training, or  
29 examination requirements established by the Board.

30 14–5G–14.

1 (h) A supervised genetic counselor is subject to discipline under [§ 14-5G-19] §  
2 ~~14-5G-18~~ of this subtitle to the same extent as a genetic counselor.

3 14-5G-17.

4 A disciplinary panel may issue a cease and desist order for[:

5 (1) Practicing genetic counseling without a license or with an unauthorized  
6 person; or

7 (2) Supervising] SUPERVISING or aiding an unauthorized person in the  
8 practice of genetic counseling.

9 14-5G-18.

10 (a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,  
11 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a  
12 license to any applicant,] reprimand any licensee, place any licensee on probation, or  
13 suspend or revoke a license, if the [applicant or] licensee:

14 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
15 the applicant or licensee or for another;

16 (2) Fraudulently or deceptively uses a license;

17 (3) Is guilty of unprofessional or immoral conduct while practicing genetic  
18 counseling;

19 (4) Is professionally, physically, or mentally incompetent;

20 (5) Abandons a patient;

21 (6) Is habitually intoxicated;

22 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous  
23 substance as defined in § 5-101 of the Criminal Law Article;

24 (8) Provides professional services while:

25 (i) Under the influence of alcohol; or

26 (ii) Using any narcotic or controlled dangerous substance as defined  
27 in § 5-101 of the Criminal Law Article or any other drug that is in excess of therapeutic  
28 amounts or without valid medical indication;

- 1           (9) Promotes the sale of services, drugs, devices, appliances, or goods to a  
2 patient so as to exploit the patient for financial gain;
- 3           (10) Willfully makes or files a false report or record in the practice of genetic  
4 counseling;
- 5           (11) Willfully fails to file or record any report as required under law,  
6 willfully impedes or obstructs the filing or recording of a report, or induces another to fail  
7 to file or record a report;
- 8           (12) Breaches patient confidentiality;
- 9           (13) Pays or agrees to pay any sum or provide any form of remuneration or  
10 material benefit to any person for bringing or referring a patient or accepts or agrees to  
11 accept any sum or any form of remuneration or material benefit from an individual for  
12 bringing or referring a patient;
- 13           (14) Knowingly makes a misrepresentation while practicing genetic  
14 counseling;
- 15           (15) Knowingly practices genetic counseling with an unauthorized  
16 individual or aids an unauthorized individual in practicing genetic counseling;
- 17           (16) Knowingly delegates a genetic counseling duty to an unlicensed  
18 individual;
- 19           (17) Grossly overutilizes health care services;
- 20           (18) Offers, undertakes, or agrees to cure or treat disease by a secret  
21 method, treatment, or medicine;
- 22           (19) Is disciplined by a licensing or disciplinary authority or is convicted or  
23 disciplined by a court of any state or country or is disciplined by any branch of the United  
24 States uniformed services or the U.S. Department of Veterans Affairs for an act that would  
25 be grounds for disciplinary action under the Board's disciplinary statutes;
- 26           (20) Fails to meet appropriate standards for the delivery of genetic  
27 counseling services;
- 28           (21) Knowingly submits false statements to collect fees for which services  
29 are not provided;
- 30           (22) (i) Has been subject to investigation or disciplinary action by a  
31 licensing or disciplinary authority or by a court of any state or country for an act that would  
32 be grounds for disciplinary action under the Board's disciplinary statutes; and
- 33                   (ii) Has:



1           **[(h)] (G)**       “Delegated medical acts” means activities that constitute the practice  
2 of medicine delegated by a physician under **[Title 14 of this article] THIS TITLE.**

3           **[(i)] (H)**       “Delegation agreement” means a document that is executed by a  
4 primary supervising physician and a physician assistant containing the requirements of **[(§**  
5 **15–302] § 14–5H–08** of this **[title] SUBTITLE.**

6           **[(i–1)]** “Disciplinary panel” means a disciplinary panel of the Board established  
7 under § 14–401 of this article.]

8           **[(j)] (I)**       “Dispense” or “dispensing” has the meaning stated in § 12–101 of this  
9 article.

10          **[(k)] (J)**       “Drug sample” means a unit of a prescription drug that is intended to  
11 promote the sale of the drug and is not intended for sale.

12          **[(l)] (K)**       “Hospital” means:

13               (1)       A hospital as defined under § 19–301 of the Health – General Article;

14               (2)       A comprehensive care facility that:

15                       (i)       Meets the requirements of a hospital–based skilled nursing  
16 facility under federal law; and

17                       (ii)       Offers acute care in the same building; and

18               (3)       An emergency room that is physically connected to a hospital or a  
19 freestanding medical facility that is licensed under Title 19, Subtitle 3A of the Health –  
20 General Article.

21          **[(m)] (L)**       “License” means a license issued by the Board to a physician assistant  
22 under this title.

23          **[(n)] (M)**       “National certifying examination” means the Physician Assistant  
24 National Certifying Examination administered by the National Commission on  
25 Certification of Physician Assistants or its successor.

26          **[(o)] (N)**       “Physician assistant” means an individual who is licensed under this  
27 title to practice medicine with physician supervision.

28          **[(p)] (O)**       “Practice as a physician assistant” means the performance of medical  
29 acts that are:

30               (1)       Delegated by a supervising physician to a physician assistant;

1 (2) Within the supervising physician's scope of practice; and

2 (3) Appropriate to the physician assistant's education, training, and  
3 experience.

4 **[(q)] (P)** "Prescriptive authority" means the authority delegated by a primary or  
5 alternate supervising physician to a physician assistant to:

6 (1) Prescribe and administer controlled dangerous substances, prescription  
7 drugs, medical devices, and the oral, written, or electronic ordering of medications; and

8 (2) Dispense as provided under **[\S 15-302.2(b), (c), and (d)] \S**  
9 **14-5H-10(B), (C), AND (D)** of this **[title] SUBTITLE**.

10 **[(r)] (Q)** "Primary supervising physician" means a physician who:

11 (1) Completes a delegation agreement that meets the requirements under  
12 **[\S\S 15-301(d) and (e) and 15-302] \S\S 14-5H-07(D) AND (E) AND 14-5H-08** of this **[title]**  
13 **SUBTITLE** and files a copy with the Board;

14 (2) Acts as the physician responsible to ensure that a physician assistant  
15 practices medicine in accordance with this title and the regulations adopted under this title;

16 (3) Ensures that a physician assistant practices within the scope of practice  
17 of the primary supervising physician or any designated alternate supervising physician;  
18 and

19 (4) Ensures that a list of alternate supervising physicians is maintained at  
20 the practice setting.

21 **[(s)] (R)** "Public health facility" means a site where clinical public health  
22 services are rendered under the auspices of the Department, a local health department in  
23 a county, or the Baltimore City Health Department.

24 **[(t)] (S)** "Starter dosage" means an amount of a drug sufficient to begin therapy:

25 (1) Of short duration of 72 hours or less; or

26 (2) Prior to obtaining a larger quantity of the drug to complete therapy.

27 **[(u)] (T)** (1) "Supervision" means the responsibility of a physician to exercise  
28 on-site supervision or immediately available direction for physician assistants performing  
29 delegated medical acts.

1           (2) “Supervision” includes physician oversight of and acceptance of direct  
2 responsibility for the patient services and care rendered by a physician assistant, including  
3 continuous availability to the physician assistant in person, through written instructions,  
4 or by electronic means and by designation of one or more alternate supervising physicians.

5 14–5H–02.

6           [(a)] A physician assistant may not practice within the scope of practice of any of  
7 the following health occupations authorized under this article:

8           (1) Nursing;

9           (2) Optometry;

10          (3) Physical therapy; or

11          (4) Psychology.

12          [(b)] This title does not limit the right of an individual to practice a health  
13 occupation that the individual is authorized to practice under this article.]

14 14–5H–03.

15          (c) Except as otherwise provided under subsections (b) and (d) of this section, a  
16 hospital, a related institution, an alternative health care system, or an employer of a  
17 physician assistant shall report to the Board any limitation, reduction, or other change of  
18 the terms of employment of the physician assistant or any termination of employment of  
19 the physician assistant for any reason that might be grounds for disciplinary action under  
20 [§ 15–314] § 14–5H–16 of this [title] SUBTITLE.

21          (d) A hospital, related institution, alternative health system, or employer that has  
22 reason to know that a physician assistant has committed an action or has a condition that  
23 might be grounds for reprimand or probation of the physician assistant or suspension or  
24 revocation of the license of the physician assistant under [§ 15–314] § 14–5H–16 of this  
25 [title] SUBTITLE because the physician assistant is alcohol– or drug–impaired is not  
26 required to report to the Board if:

27           (1) The hospital, related institution, alternative health system, or  
28 employer knows that the physician assistant is:

29           (i) In an alcohol or drug treatment program that is accredited by the  
30 Joint Commission [on the Accreditation of Healthcare Organizations] or is certified by the  
31 Department; or

32           (ii) Under the care of a health care practitioner who is competent  
33 and capable of dealing with alcoholism and drug abuse;



1           (2) The hospital, related institution, alternative health system, or  
2 employer is able to verify that the physician assistant remains in the treatment program  
3 until discharge; and

4           (3) The action or condition of the physician assistant has not caused injury  
5 to any person while the physician assistant is practicing as a licensed physician assistant.

6           (e) (1) If the physician assistant enters, or is considering entering, an alcohol  
7 or drug treatment program that is accredited by the Joint Commission [on Accreditation of  
8 Healthcare Organizations] or that is certified by the Department, the physician assistant  
9 shall notify the hospital, related institution, alternative health system, or employer of the  
10 physician assistant's decision to enter the treatment program.

11 14-5H-06.

12           (a) In addition to the powers set forth elsewhere in this title, the Committee, on  
13 its initiative or on the Board's request, may:

14           (1) Recommend to the Board regulations for carrying out the provisions of  
15 this title;

16           (2) Recommend to the Board approval, modification, or disapproval of an  
17 application for licensure or a delegation agreement;

18           (3) Report to the Board any conduct of a supervising physician or a  
19 physician assistant that may be cause for disciplinary action under this [title] **SUBTITLE**  
20 or under [§ 14-404 of this article] **§ 14-515 OF THIS TITLE**; and

21           (4) Report to the Board any alleged unauthorized practice of a physician  
22 assistant.

23 14-5H-07.

24           (c) Patient services that may be provided by a physician assistant include:

25           (1) (i) Taking complete, detailed, and accurate patient histories; and

26           (ii) Reviewing patient records to develop comprehensive medical  
27 status reports;

28           (2) Performing physical examinations and recording all pertinent patient  
29 data;

1           (3)    Interpreting and evaluating patient data as authorized by the primary  
2 or alternate supervising physician for the purpose of determining management and  
3 treatment of patients;

4           (4)    Initiating requests for or performing diagnostic procedures as indicated  
5 by pertinent data and as authorized by the supervising physician;

6           (5)    Providing instructions and guidance regarding medical care matters to  
7 patients;

8           (6)    Assisting the primary or alternate supervising physician in the delivery  
9 of services to patients who require medical care in the home and in health care institutions,  
10 including:

11                   (i)    Recording patient progress notes;

12                   (ii)   Issuing diagnostic orders; and

13                   (iii)   Transcribing or executing specific orders at the direction of the  
14 primary or alternate supervising physician; and

15           (7)    Exercising prescriptive authority under a delegation agreement and in  
16 accordance with [§ 15–302.2] **§ 14–5H–10** of this subtitle.

17 14–5H–08.

18           (c)    (2)   (ii)   1.    Before a physician assistant may perform X–ray duties  
19 authorized under [§ 14–306(e)] **§ 14–503(E)** of this [article] **TITLE** in the medical office of  
20 the physician delegating the duties, a primary supervising physician shall obtain the  
21 Board’s approval of a delegation agreement that includes advanced duties in accordance  
22 with subparagraph 2 of this subparagraph.

23           (g)    If the Board determines that a primary or alternate supervising physician or  
24 physician assistant is practicing in a manner inconsistent with the requirements of this  
25 title [or Title 14 of this article], the Board on its own initiative or on the recommendation  
26 of the Committee may demand modification of the practice, withdraw the approval of the  
27 delegation agreement, or refer the matter to a disciplinary panel for the purpose of taking  
28 other disciplinary action under [§ 14–404 or §15–314] **§ 14–5H–16 OF THIS SUBTITLE OR**  
29 **§ 14–515** of this [article] **TITLE**.

30           (k)    Subject to the [notice] **NOTIFICATION** required under [§ 15–103] **§**  
31 **14–5H–03** of this [title] **SUBTITLE**, a physician assistant may terminate a delegation  
32 agreement filed with the Board under this subtitle at any time.

33           (l)    (2)   If there is no designated alternate supervising physician or the  
34 designated alternate supervising physician does not agree to supervise the physician

1 assistant, the physician assistant may not practice until the physician assistant receives  
2 approval of a new delegation agreement under [§ 15–302.1] **§ 14–5H–09** of this subtitle.

3 (m) A physician assistant whose delegation agreement is terminated may not  
4 practice as a physician assistant until the physician assistant receives preliminary  
5 approval of a new delegation agreement under [§ 15–302.1] **§ 14–5H–09** of this subtitle.

6 14–5H–09.

7 (a) If a delegation agreement does not include advanced duties or the advanced  
8 duties have been approved under [§ 15–302(c)(1)] **§ 14–5H–08(C)(1)** of this subtitle, a  
9 physician assistant may assume the duties under a delegation agreement on the date that  
10 the Board acknowledges receipt of the completed delegation agreement.

11 (b) In this section, “pending” means that a delegation agreement that includes  
12 delegation of advanced duties in a setting that does not meet the requirements under [§  
13 15–302(c)(1)] **§ 14–5H–08(C)(1)** of this subtitle has been executed and submitted to the  
14 Board for its approval, but:

15 (1) The Committee has not made a recommendation to the Board; or

16 (2) The Board has not made a final decision regarding the delegation  
17 agreement.

18 14–5H–10.

19 (e) Before a physician assistant may renew a license for an additional 2–year  
20 term under [§ 15–307] **§ 14–306** of this [subtitle] **TITLE**, the physician assistant shall  
21 submit evidence to the Board of successful completion of 8 category 1 hours of pharmacology  
22 education within the previous 2 years.

23 14–5H–12.

24 (a) **[To] IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS**  
25 **TITLE, TO** qualify for a license, an applicant shall:

26 (1) Complete a criminal history records check in accordance with §  
27 14–308.1 of this article;

28 (2) Be of good moral character;

29 (3) Demonstrate oral and written competency in the English language as  
30 required by the Board;

31 (4) Be at least 18 years old; and

1                   (5)   (i)] (1)        Be a graduate of a physician assistant training program  
2 approved by the Board; or

3                               (ii)] (2)        Have passed the physician assistant national certifying  
4 examination administered by the National Commission on Certification of Physician  
5 Assistants prior to 1986, maintained all continuing education and recertification  
6 requirements, and been in continuous practice since passage of the examination.

7 14–5H–14.

8           [(a)] Each licensee shall keep a license and delegation agreement for inspection at  
9 the primary place of business of the licensee.

10           [(b) (1) Each licensee shall give the Board written notice of any change of name  
11 or address within 60 days of the date of the change.

12                   (2) A licensee who fails to comply with this subsection is subject to an  
13 administrative penalty of \$100.]

14 14–5H–15.

15           (a) [(1)] Except as otherwise provided under § 10–226 of the State Government  
16 Article, before the Board takes any action to reject or modify a delegation agreement or  
17 advanced duty, the Board shall give the licensee the opportunity for a hearing before the  
18 Board.

19                   [(2)] (B) The Board shall give notice and hold the hearing under Title 10,  
20 Subtitle 2 of the State Government Article.

21                   [(3)] (C) The Board may administer oaths in connection with any  
22 proceeding under this section.

23                   [(4)] (D) At least 14 days before the hearing, the hearing notice shall be  
24 sent to the last known address of the applicant or licensee.

25           [(b) Any licensee aggrieved under this subtitle by a final decision of the Board  
26 rejecting or modifying a delegation agreement or advanced duty may petition for judicial  
27 review as allowed by the Administrative Procedure Act.]

28 14–5H–16.

29           (a) Subject to the hearing provisions of [§ 15–315] § 14–405 of this [subtitle]  
30 TITLE, a disciplinary panel, on the affirmative vote of a majority of the quorum, may  
31 reprimand any physician assistant, place any physician assistant on probation, or suspend  
32 or revoke a license if the physician assistant:

1 (1) Fraudulently or deceptively obtains or attempts to obtain a license for  
2 the applicant or licensee or for another;

3 (2) Fraudulently or deceptively uses a license;

4 (3) Is guilty of:

5 (i) Immoral conduct in the practice of medicine; or

6 (ii) Unprofessional conduct in the practice of medicine;

7 (4) Is professionally, physically, or mentally incompetent;

8 (5) Solicits or advertises in violation of [§ 14-503] **§ 14-5H-19** of this  
9 [article] **SUBTITLE**;

10 (6) Abandons a patient;

11 (7) Habitually is intoxicated;

12 (8) Is addicted to, or habitually abuses, any narcotic or controlled  
13 dangerous substance as defined in § 5-101 of the Criminal Law Article;

14 (9) Provides professional services:

15 (i) While under the influence of alcohol; or

16 (ii) While using any narcotic or controlled dangerous substance, as  
17 defined in § 5-101 of the Criminal Law Article, or other drug that is in excess of therapeutic  
18 amounts or without valid medical indication;

19 (10) Promotes the sale of drugs, devices, appliances, or goods to a patient so  
20 as to exploit the patient for financial gain;

21 (11) Willfully makes or files a false report or record in the practice of  
22 medicine;

23 (12) Willfully fails to file or record any medical report as required under law,  
24 willfully impedes or obstructs the filing or recording of the report, or induces another to fail  
25 to file or record the report;

26 (13) On proper request, and in accordance with the provisions of Title 4,  
27 Subtitle 3 of the Health – General Article, fails to provide details of a patient's medical  
28 record to the patient, another physician, or hospital;

29 (14) Solicits professional patronage through an agent or other person or  
30 profits from the acts of a person who is represented as an agent of the physician;

1           (15) Pays or agrees to pay any sum to any person for bringing or referring a  
2 patient or accepts or agrees to accept any sum from any person for bringing or referring a  
3 patient;

4           (16) Agrees with a clinical or bioanalytical laboratory to make payments to  
5 the laboratory for a test or test series for a patient, unless the licensed physician assistant  
6 discloses on the bill to the patient or third-party payor:

7                   (i) The name of the laboratory;

8                   (ii) The amount paid to the laboratory for the test or test series; and

9                   (iii) The amount of procurement or processing charge of the licensed  
10 physician, if any, for each specimen taken;

11           (17) Makes a willful misrepresentation in treatment;

12           (18) Practices medicine with an unauthorized person or aids an  
13 unauthorized person in the practice of medicine;

14           (19) Grossly overutilizes health care services;

15           (20) Offers, undertakes, or agrees to cure or treat disease by a secret  
16 method, treatment, or medicine;

17           (21) Is disciplined by a licensing or disciplinary authority or convicted or  
18 disciplined by a court of any state or country or disciplined by any branch of the United  
19 States uniformed services or the Veterans' Administration for an act that would be grounds  
20 for disciplinary action under this section;

21           (22) Fails to meet appropriate standards for the delivery of quality medical  
22 and surgical care performed in an outpatient surgical facility, office, hospital, or any other  
23 location in this State;

24           (23) Willfully submits false statements to collect fees for which services are  
25 not provided;

26           (24) Was subject to investigation or disciplinary action by a licensing or  
27 disciplinary authority or by a court of any state or country for an act that would be grounds  
28 for disciplinary action under this section and the licensee:

29                   (i) Surrendered the license issued by the state or country to the  
30 state or country; or

31                   (ii) Allowed the license issued by the state or country to expire or  
32 lapse;

- 1                   (25) Knowingly fails to report suspected child abuse in violation of § 5–704  
2 of the Family Law Article;
- 3                   (26) Fails to educate a patient being treated for breast cancer of alternative  
4 methods of treatment as required by § 20–113 of the Health – General Article;
- 5                   (27) Sells, prescribes, gives away, or administers drugs for illegal or  
6 illegitimate medical purposes;
- 7                   (28) Fails to comply with the provisions of § 12–102 of this article;
- 8                   (29) Refuses, withholds from, denies, or discriminates against an individual  
9 with regard to the provision of professional services for which the physician assistant is  
10 licensed and qualified to render because the individual is HIV positive;
- 11                   (30) Except as to an association that has remained in continuous existence  
12 since July 1, 1963:
- 13                   (i) Associates with a pharmacist as a partner or co-owner of a  
14 pharmacy for the purpose of operating a pharmacy;
- 15                   (ii) Employs a pharmacist for the purpose of operating a pharmacy;  
16 or
- 17                   (iii) Contracts with a pharmacist for the purpose of operating a  
18 pharmacy;
- 19                   (31) Except in an emergency life-threatening situation where it is not  
20 feasible or practicable, fails to comply with the Centers for Disease Control and  
21 Prevention’s guidelines on universal precautions;
- 22                   (32) Fails to display the notice required under [§ 14–415] § 14–519 of this  
23 [article] TITLE;
- 24                   (33) Fails to cooperate with a lawful investigation conducted by the Board  
25 or a disciplinary panel;
- 26                   (34) Is convicted of insurance fraud as defined in § 27–801 of the Insurance  
27 Article;
- 28                   (35) Is in breach of a service obligation resulting from the applicant’s or  
29 licensee’s receipt of State or federal funding for the physician assistant’s medical education;
- 30                   (36) Willfully makes a false representation when seeking or making  
31 application for licensure or any other application related to the practice of medicine;

1 (37) By corrupt means, threats, or force, intimidates or influences, or  
2 attempts to intimidate or influence, for the purpose of causing any person to withhold or  
3 change testimony in hearings or proceedings before the Board or a disciplinary panel or  
4 those otherwise delegated to the Office of Administrative Hearings;

5 (38) By corrupt means, threats, or force, hinders, prevents, or otherwise  
6 delays any person from making information available to the Board or a disciplinary panel  
7 in furtherance of any investigation of the Board or a disciplinary panel;

8 (39) Intentionally misrepresents credentials for the purpose of testifying or  
9 rendering an expert opinion in hearings or proceedings before the Board or a disciplinary  
10 panel or those otherwise delegated to the Office of Administrative Hearings;

11 (40) Fails to keep adequate medical records;

12 (41) Performs delegated medical acts beyond the scope of the delegation  
13 agreement filed with the Board or after notification from the Board that an advanced duty  
14 has been disapproved;

15 (42) Performs delegated medical acts without the supervision of a physician;

16 (43) Fails to complete a criminal history records check under [§ 14–308.1] §  
17 **14–302** of this [article] **TITLE**;

18 (44) Fails to comply with the requirements of the Prescription Drug  
19 Monitoring Program in Title 21, Subtitle 2A of the Health – General Article;

20 (45) Fails to comply with the requirements of the Prescription Drug  
21 Monitoring Program under Title 21, Subtitle 2A of the Health – General Article; or

22 (46) Fails to comply with any State or federal law pertaining to the practice  
23 as a physician assistant.

24 **(C) IF, AFTER A HEARING UNDER § 14–405 OF THIS TITLE, A DISCIPLINARY**  
25 **PANEL FINDS THAT THERE ARE GROUNDS FOR DISCIPLINE UNDER SUBSECTION (A)**  
26 **OF THIS SECTION TO SUSPEND OR REVOKE A LICENSE OF A PHYSICIAN ASSISTANT,**  
27 **REPRIMAND A LICENSED PHYSICIAN ASSISTANT, OR PLACE THE LICENSED**  
28 **PHYSICIAN ASSISTANT ON PROBATION, THE DISCIPLINARY PANEL MAY IMPOSE A**  
29 **FINE SUBJECT TO THE BOARD’S REGULATIONS IN ADDITION TO SUSPENDING OR**  
30 **REVOKING THE LICENSE, REPRIMANDING THE LICENSEE, OR PLACING THE**  
31 **LICENSEE ON PROBATION.**

32 **(D) THE BOARD SHALL PAY ANY FINES COLLECTED UNDER THIS SECTION**  
33 **INTO THE GENERAL FUND OF THE STATE.**





1 SECTION 4. AND BE IT FURTHER ENACTED, That the Laws of Maryland read  
2 as follows:

3 **Article – Health Occupations**

4 14–3A–01.

5 The Interstate Medical Licensure Compact is enacted into law and entered into with  
6 all other states legally joining in it in the form substantially as it appears in this section as  
7 follows:

8 SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE

9 (b) (3) (i) The member board within the state selected as the state of  
10 principal license shall, in the course of verifying eligibility, require the applicant to obtain  
11 a criminal background check as required under [§ 14–308.1] **§ 14–302** of this title,  
12 including the use of the results of fingerprint or other biometric data checks compliant with  
13 the requirements of the Federal Bureau of Investigation, with the exception of federal  
14 employees who have suitability determination in accordance with U.S. C.F.R. § 731.202.

15 SECTION 5. AND BE IT FURTHER ENACTED, That the Laws of Maryland read  
16 as follows:

17 **Article – Tax – General**

18 10–752.

19 (a) (1) In this section the following words have the meanings indicated.

20 (3) “Health care practitioner” means an individual who:

21 (i) is licensed to practice medicine under Title 14 of the Health  
22 Occupations Article;

23 (ii) is a physician assistant, as defined in [§ 15–101] **§ 14–5H–01** of  
24 the Health Occupations Article; or

25 (iii) is a registered nurse practitioner, as defined in § 8–101 of the  
26 Health Occupations Article.

27 (d) (7) The Fund consists of:

28 (i) revenue distributed to the Fund under [§ 15–206] **§ 14–207** of  
29 the Health Occupations Article;

30 (ii) money appropriated in the State budget to the Fund; and

1 (iii) any other money from any other source accepted for the benefit  
2 of the Fund.

3 SECTION 6. AND BE IT FURTHER ENACTED, That the publisher of the  
4 Annotated Code of Maryland, in consultation with and subject to the approval of the  
5 Department of Legislative Services, shall correct, with no further action required by the  
6 General Assembly, cross-references and terminology rendered incorrect by this Act. The  
7 publisher shall adequately describe any correction that is made in an editor's note following  
8 the section affected.

9 SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect  
10 October 1, 2022. Section 4 of this Act shall remain effective until the taking effect of the  
11 termination provision specified in Section 5 of Chapter 470 of the Acts of the General  
12 Assembly of 2018. If that termination provision takes effect, Section 4 of this Act shall be  
13 abrogated and of no further force and effect. Section 5 of this Act shall remain effective  
14 until the taking effect of the termination provision specified in Section 6 of Chapters 153  
15 and 154 of the Acts of the General Assembly of 2021. If that termination provision takes  
16 effect, Section 5 of this Act shall be abrogated and of no further force and effect. This Act  
17 may not be interpreted to have any effect on those termination provisions.

Approved:

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Governor.

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Speaker of the House of Delegates.

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President of the Senate.