# **HOUSE BILL 962**

J2 HB 1252/22 – HGO

By: Delegate Alston

Introduced and read first time: February 10, 2023 Assigned to: Health and Government Operations

#### A BILL ENTITLED

#### 1 AN ACT concerning

2

# Physicians and Allied Health Professions - Reorganization and Revisions

FOR the purpose of repealing obsolete and redundant language in, clarifying language in, and reorganizing certain provisions of law governing the State Board of Physicians and the regulation of physicians, physician assistants, and allied health professionals; authorizing the Board to regulate the allied health committees; repealing the requirement that the Board provide a certain data sheet; and generally relating to the State Board of Physicians and the regulation of physicians, physician 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-13, 14-5A-14, 14-5A-10, 14-5A-11, 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-0216 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-02through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1, 14-5E-19, 19 20 14-5F-05, 14-5F-13, 14-5F-15.1, 14-5F-17, 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, 15-315, 15-316, 24and 15-316.1

25 Annotated Code of Maryland

26 (2021 Replacement Volume and 2022 Supplement)

27 BY renumbering

28 Article – Health Occupations

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

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1
          Section 14–206, 14–206.1, 14–301, 14–302, 14–306, 14–307, 14–308, 14–308.1,
 2
                14-309, 14-311, 14-312, 14-313, 14-313, 14-314, 14-315, 14-316, 14-317,
 3
                14-318 through 14-320, 14-322, 14-404, 14-413 through 14-415, 14-502,
 4
                14-503, 14-504, 14-505, 14-506, 14-507, 14-508, 14-509, 14-601, 14-602,
 5
                14-603, 14-605, 14-607, 15-101 through 15-103, 15-201, 15-202, 15-205,
 6
                15-301, 15-302, 15-302.1 through 15-302.3, 15-303, 15-306, 15-309, 15-313,
 7
                15–314, 15–317, 15–401, 15–402, 15–402.1, 15–403, 15–501, and 15–502
 8
          to be Section 14-401.2, 14-401.3, 14-501, 14-502, 14-503, 14-301, 14-505,
 9
                14-302, 14-303, 14-506, 14-507, 14-304, 14-529, 14-305, 14-508, 14-306,
10
                14-307, 14-509 through 14-511, 14-512, 14-515, 14-517 through 14-519,
                14-414, 14-513, 14-526, 14-525, 14-415, 14-523, 14-520, 14-522, 14-527,
11
                14-528, 14-413, 14-521, 14-524, 14-5H-01 through 14-5H-03, 14-5H-04,
12
                14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08, 14-5H-09 through 14-5H-11,
13
                14-5H-12, 14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16, 14-5H-17,
14
15
                14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23,
16
                respectively
17
          Annotated Code of Maryland
18
          (2021 Replacement Volume and 2022 Supplement)
19
    BY repealing and reenacting, with amendments,
20
          Article – Correctional Services
21
          Section 9-603(d)(2)
22
          Annotated Code of Maryland
23
          (2017 Replacement Volume and 2022 Supplement)
24
    BY repealing and reenacting, with amendments,
          Article – Courts and Judicial Proceedings
25
26
          Section 5–106(r), 5–715(d), and 10–205(b)
27
          Annotated Code of Maryland
          (2020 Replacement Volume and 2022 Supplement)
28
29
    BY repealing and reenacting, without amendments,
30
          Article – Health – General
31
          Section 4–201(a), 5–601(a), and 13–3301(a)
32
          Annotated Code of Maryland
33
          (2019 Replacement Volume and 2022 Supplement)
34
    BY repealing and reenacting, with amendments,
          Article – Health – General
35
          Section 4–201(s), 5–601(v), 13–3301(d), and 18–214.1(b)
36
37
          Annotated Code of Maryland
          (2019 Replacement Volume and 2022 Supplement)
38
39
    BY repealing and reenacting, with amendments,
40
          Article – Health Occupations
41
          Section
                     1-302(g),
                                  1-306(e),
                                              8-205(a)(3),
                                                             11–404.2(h),
                                                                            12-102(c)(2),
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14–101(a–1), (g), (i), and (o), 14–102(a), 14–205, 14–207(b) through (d) and (f),

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1
                 14–3A–01 Section 5(b)(3)(i), 14–401.1(a)(5) and (e) through (k), 14–402(a), (c),
 2
                 (e), and (f), 14–405(a) and (g), 14–406, 14–409(a) and (c), 14–411(d), (g), (h),
 3
                 (j), (k), and (p), 14–411.1(b) through (d), 14–416(a), 14–5A–01(c), 14–5A–05,
 4
                 14-5A-09, 14-5A-17(a), 14-5B-07(a)(2), 14-5B-09, 14-5B-11, 14-5B-14(a),
 5
                 14-5C-01(c), 14-5C-05, 14-5C-08(b), 14-5C-09, 14-5C-10, 14-5C-17(a),
 6
                 14-5D-07(b),
                                14-5D-08,
                                              14–5D–10(a), 14–5D–14(a),
                                                                             14-5E-01(g),
 7
                 14-5E-08(b), 14-5E-09, 14-5E-10(a), 14-5E-13, 14-5E-14, 14-5E-16(a),
 8
                 14-5F-11, 14-5F-12, 14-5F-15, 14-5F-16, 14-5F-18(a), 14-5F-21,
 9
                 14–5F–24(c), 14–5G–09, 14–5G–14(h), 14–5G–17, and 14–5G–18(a)
10
           Annotated Code of Maryland
11
           (2021 Replacement Volume and 2022 Supplement)
12
    BY repealing and reenacting, without amendments,
13
           Article – Health Occupations
14
           Section 14–101(a), 14–5A–01(a), 14–5C–01(a), and 14–5E–01(a)
15
          Annotated Code of Maryland
16
           (2021 Replacement Volume and 2022 Supplement)
17
    BY adding to
18
           Article – Health Occupations
19
           Section 14–101(a–2), (n), and (p–1), 14–404, 14–417, 14–504, 14–514, 14–516,
20
                 14-5A-06(e), 14-5B-05(f), 14-5C-06(e), 14-5D-05(f), 14-5E-06(e), and
21
                 14-5F-07(g)
22
           Annotated Code of Maryland
23
           (2021 Replacement Volume and 2022 Supplement)
24
    BY repealing and reenacting, with amendments,
25
          Article – Health Occupations
26
           Section 14–301, 14–303, 14–304(b), 14–305, 14–306, 14–307, 14–401.2(e), and
27
                 14-413; 14-503(c) and (e), 14-505(b), 14-506(a), 14-510(a), 14-511(b),
28
                 14-515(a), 14-517(a)(1), 14-518(a)(1), 14-524(b) and (c), 14-527, and
29
                 14-528(c) to be under the amended subtitle "Subtitle 5. Physicians"; and
30
                 14-5H-01(a), (e) through (i), and (j) through (u), 14-5H-02, 14-5H-03(c), (d),
                 and (e)(1), 14–5H–06(a), 14–5H–07(c), 14–5H–08(c)(2)(ii)1., (g), (k), (l)(2), and
31
32
                 (m), 14–5H–09(a) and (b), 14–5H–10(e), 14–5H–12(a), 14–5H–14, 14–5H–15,
33
                 14-5H-16(a), and 14-5H-21 through 14-5H-23
34
           Annotated Code of Maryland
35
           (2021 Replacement Volume and 2022 Supplement)
36
           (As enacted by Section 2 of this Act)
37
    BY adding to
38
          Article – Health Occupations
39
           Section 14-513(c) and (d), 14-521(c), 14-524(b), 14-525(d), and 14-528(d); and
40
                 14–5H–16(c) through (e) to be under the new subtitle "Subtitle 5H. Physician
                Assistants"
41
42
           Annotated Code of Maryland
43
           (2021 Replacement Volume and 2022 Supplement)
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1
          (As enacted by Section 2 of this Act)
 2
    BY repealing
 3
          Article – Health Occupations
 4
          Section 14-5H-01(d) and (i-1)
 5
          Annotated Code of Maryland
          (2021 Replacement Volume and 2022 Supplement)
 6
 7
          (As enacted by Section 2 of this Act)
 8
    BY repealing and reenacting, without amendments,
 9
          Article – Transportation
10
          Section 13-616(a)(1)
          Annotated Code of Maryland
11
          (2020 Replacement Volume and 2022 Supplement)
12
13
    BY repealing and reenacting, with amendments,
14
          Article – Transportation
15
          Section 13-616(a)(7)
16
          Annotated Code of Maryland
          (2020 Replacement Volume and 2022 Supplement)
17
    BY repealing and reenacting, without amendments,
18
19
          Article – Tax – General
20
          Section 10-752(a)(1)
21
          Annotated Code of Maryland
22
          (2022 Replacement Volume)
23
    BY repealing and reenacting, with amendments,
24
          Article – Tax – General
25
          Section 10–752(a)(3) and (d)(7)
26
          Annotated Code of Maryland
27
          (2022 Replacement Volume)
28
          SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
29
    That Section(s) 14–101(n), 14–401.1(b) through (d), 14–405(f), 14–5A–02 through
30
    14-5A-04
                14-5A-10, 14-5A-11, 14-5A-13,
                                                   14-5A-14, 14-5A-16, 14-5A-17.1,
31
    14-5A-18.1, 14-5A-19, 14-5B-02 through 14-5B-04, 14-5B-10, 14-5B-12, 14-5B-12.1,
32
    14-5B-13, 14-5B-14.1, 14-5B-15.1, 14-5B-16, 14-5C-02 through 14-5C-04, 14-5C-11,
33
    14-5C-12, 14-5C-14, 14-5C-14.1, 14-5C-16, 14-5C-18.1, 14-5C-19, 14-5D-02,
34
    14–5D–03, 14–5D–09,
                           14-5D-12, 14-5D-12.1, 14-5D-13, 14-5D-15,
                                                                            14-5D-16.
35
    14-5D-16.1, 14-5E-02 through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1,
36
    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
37
    through 14-5G-04, 14-5G-10, 14-5G-11, 14-5G-13, 14-5G-15, 14-5G-16, 14-5G-19,
38
    14-5G-21,
                 14-5G-22,
                             15-203,
                                       15-204,
                                                 15-206,
                                                            15–304,
                                                                      15 - 305,
                                                                                15 - 307.
39
    15-308, 15-310 through 15-312, 15-315, 15-316, and 15-316.1 of Article - Health
    Occupations of the Annotated Code of Maryland be repealed.
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- 1 SECTION 2. AND BE IT FURTHER ENACTED, That Section(s) 14–206, 14–206.1, 214-301, 14-302, 14-306, 14-307, 14-308, 14-308.1, 14-309, 14-311, 14-312, 14-313, 3 14-313.1, 14-314, 14-315, 14-316, 14-317, 14-318 through 14-320, 14-322, 14-404, 4 14-413 through 14-415, 14-502, 14-503, 14-504, 14-505, 14-506, 14-507, 14-508, 5 14-509, 14-601, 14-602, 14-603, 14-605, 14-607, 15-101 through 15-103, 15-201, 6 15-202, 15-205, 15-301, 15-302, 15-302.1 through 15-302.3, 15-303, 15-306, 15-309, 7 15-313, 15-314, 15-317, 15-401, 15-402, 15-402.1, 15-403, 15-501, and 15-502 of Article 8 - Health Occupations of the Annotated Code of Maryland be renumbered to be Section(s) 9 14-401.2, 14-401.3, 14-501, 14-502, 14-503, 14-301, 14-505, 14-302, 14-303, 14-506, 10 14-507, 14-304, 14-529, 14-305, 14-508, 14-306, 14-307, 14-509 through 14-511, 14-512, 14-515, 14-517 through 14-519, 14-414, 14-513, 14-526, 14-525, 14-415, 11 12 14 - 523, 14-520,14 - 522, 14-527, 14-528, 14-413,14 - 521, 14 - 524, 13 14-5H-01 through 14-5H-03, 14-5H-04, 14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08, 14 14-5H-09 through 14-5H-11, 14-5H-12, 14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16, 14-5H-17, 14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23, 15 16 respectively.
- SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

### Article - Correctional Services

20 9-603.

19

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21 (d) (2) If an assessment conducted under paragraph (1) of this subsection 22 indicates opioid use disorder, an evaluation of the inmate shall be conducted by a health 23 care practitioner with prescriptive authority authorized under Title 8[,] OR Title 14[, or 24 Title 15] of the Health Occupations Article.

## **Article - Courts and Judicial Proceedings**

- 26 5–106.
- 27 (r) A prosecution for an offense under [§ 14–601] § 14–527 of the Health Occupations Article of practicing, attempting to practice, or offering to practice medicine without a license shall be instituted within 3 years after the offense was committed.
- 30 5–715.
- 31 (d) Any person who acts in good faith is not civilly liable for giving any of the 32 information required under [§ 14–413 or § 14–414] § 14–517 OR § 14–518 of the Health 33 Occupations Article.
- 34 10–205.
- 35 (b) Records, reports, statements, notes, or information assembled or obtained by 36 the Maryland Department of Health, the Maryland Commission to Study Problems of Drug

- 1 Addiction, the Medical and Chirurgical Faculty or its allied medical societies, the Maryland
- 2 Institute for Emergency Medical Services Systems, an in-hospital staff committee, or a
- 3 national organized medical society or research group that are declared confidential by §
- 4 4-102 of the Health General Article or [§ 14-506] § 14-415 of the Health Occupations
- 5 Article, are not admissible in evidence in any proceeding.

# 6 Article - Health - General

- 7 4-201.
- 8 (a) In this subtitle the following words have the meanings indicated.
- 9 (s) "Physician assistant" means an individual who is licensed under Title [15] 14, 10 SUBTITLE 5H of the Health Occupations Article to practice medicine with physician supervision.
- 12 5-601.
- 13 (a) In this subtitle the following words have the meanings indicated.
- 14 (v) "Physician assistant" means an individual who is licensed under Title [15] 14,
- SUBTITLE 5H of the Health Occupations Article to practice medicine with physician supervision.
- 17 13–3301.
- 18 (a) In this subtitle the following words have the meanings indicated.
- 19 (d) "Certifying provider" means an individual who:
- 20 (1) (i) 1. Has an active, unrestricted license to practice medicine
- 21 that was issued by the State Board of Physicians under Title 14 of the Health Occupations
- 22 Article; and
- 23 2. Is in good standing with the State Board of Physicians;
- 24 (ii) 1. Has an active, unrestricted license to practice dentistry
- 25 that was issued by the State Board of Dental Examiners under Title 4 of the Health
- 26 Occupations Article; and
- 27 2. Is in good standing with the State Board of Dental
- 28 Examiners;
- 29 (iii) 1. Has an active, unrestricted license to practice podiatry
- 30 that was issued by the State Board of Podiatric Medical Examiners under Title 16 of the
- 31 Health Occupations Article; and

$\frac{1}{2}$	2. Medical Examiners;	Is in good standing with the State Board of Podiatric				
3 4 5 6	nursing and has an active, ur a nurse midwife that were issu	Has an active, unrestricted license to practice registered are stricted certification to practice as a nurse practitioner or ued by the State Board of Nursing under Title 8 of the Health				
7	2.	Is in good standing with the State Board of Nursing; or				
8 9 10	physician assistant issued by	Has an active, unrestricted license to practice as a the State Board of Physicians under Title [15] 14, SUBTITLE s Article;				
11 12	2. supervising physician who is	Has an active delegation agreement with a primary a certifying provider; and				
13	3.	Is in good standing with the State Board of Physicians;				
14	(2) Has a Stat	te controlled dangerous substances registration; and				
15 16	( )					
17	18–214.1.					
18 19 20 21	providers may prescribe, dispense, or otherwise provide antibiotic therapy to any sexual partner of a patient diagnosed with chlamydia, gonorrhea, or trichomoniasis without					
22	(1) A physicia	n licensed under Title 14 of the Health Occupations Article;				
23 24 25	(2) An advanced practice registered nurse with prescriptive authority licensed under Title 8 of the Health Occupations Article acting in accordance with $\S$ 8–508 of the Health Occupations Article;					
26 27 28	SUBTITLE 5H of the Health	rized physician assistant licensed under Title [15] 14, Occupations Article acting in accordance with [§ 15–302.2] § upations Article; and				
29 30	( )	ed nurse employed by a local health department who complies				
31 32		formulary developed and approved under $\ 3-403(b)$ of this				

1 - 306.

1 The requirements established under § 8-512 of the Health (ii) 2 Occupations Article. 3 **Article – Health Occupations** 1 - 302.4 5 (g) Subsection (d)(12) of this section may not be construed to: 6 Permit an individual or entity to engage in the insurance business, as 7 defined in § 1–101 of the Insurance Article, without obtaining a certificate of authority from 8 the Maryland Insurance Commissioner and satisfying all other applicable requirements of the Insurance Article; 9 10 (2)additional (i) Impose obligations on carrier incentive—based compensation to a health care practitioner under § 15–113 of the Insurance 11 12 Article; or 13 (ii) Require disclosure of information regarding the incentive-based compensation, except as required under § 15–113 of the Insurance Article; 14 15 (3)Authorize a health care entity to knowingly make a direct or indirect payment to a health care practitioner as an inducement to reduce or limit medically 16 necessary services to individuals who are under the direct care of the health care 17 18 practitioner; 19 **(4)** Permit an arrangement that violates: [§ 14-404(a)(15)] § 14-515(A)(15) of this article; or 20 (i) 21§ 8–508, § 8–511, § 8–512, § 8–516, or § 8–517 of the Criminal (ii) 22Law Article: 23(5)Narrow, expand, or otherwise modify: 24 Any definition in § 1–301 of this subtitle, including the definition (i) of "in-office ancillary services"; or 2526 (ii) Any exception in subsection (d)(4) of this section including the exception for referrals for in-office ancillary services or tests; or 27 28Require a compensation arrangement to comply with the provisions of 29 subsection (d)(12) of this section if the compensation arrangement is exempt under any 30 other provision of subsection (d) of this section.

1 (e) This section does not prohibit: 2 A referring laboratory from billing for anatomic pathology services or 3 histologic processing if the referring laboratory must send a specimen to another clinical 4 laboratory for histologic processing or anatomic pathology consultation; and 5 A health care practitioner who takes a Pap test specimen from a patient 6 and who orders but does not supervise or perform an anatomic pathology service on the 7 specimen, from billing a patient or payor for the service, provided the health care 8 practitioner complies with: 9 [§ § (i) The disclosure requirements of 14-404(a)(16) **14–515(A)(16)** of this article; and 10 11 (ii) The ethics policies of the American Medical Association that relate to referring physician billing for laboratory services. 12 13 8-205.14 In addition to the powers and duties set forth elsewhere in this title, the Board 15 has the following powers and duties: 16 To adopt rules and regulations for the performance of delegated medical (3)17 functions that are recognized jointly by the State Board of Physicians and the State Board of Nursing, under [§ 14–306(d)] § 14–503(D) of this article: 18 19 11-404.2.20 A therapeutically certified optometrist shall be: (h) 21 (1)Held to the same standard of care as an ophthalmologist who is licensed 22under Title 14 of this article and who is providing similar services; and 23 (2)Required to comply with the notice requirement under [§ 14–508] § **14–520** of this article. 242512-102.26(c) (2) This title does not prohibit: 27 (i) A licensed veterinarian from: 28 1. Personally preparing and dispensing the veterinarian's

29

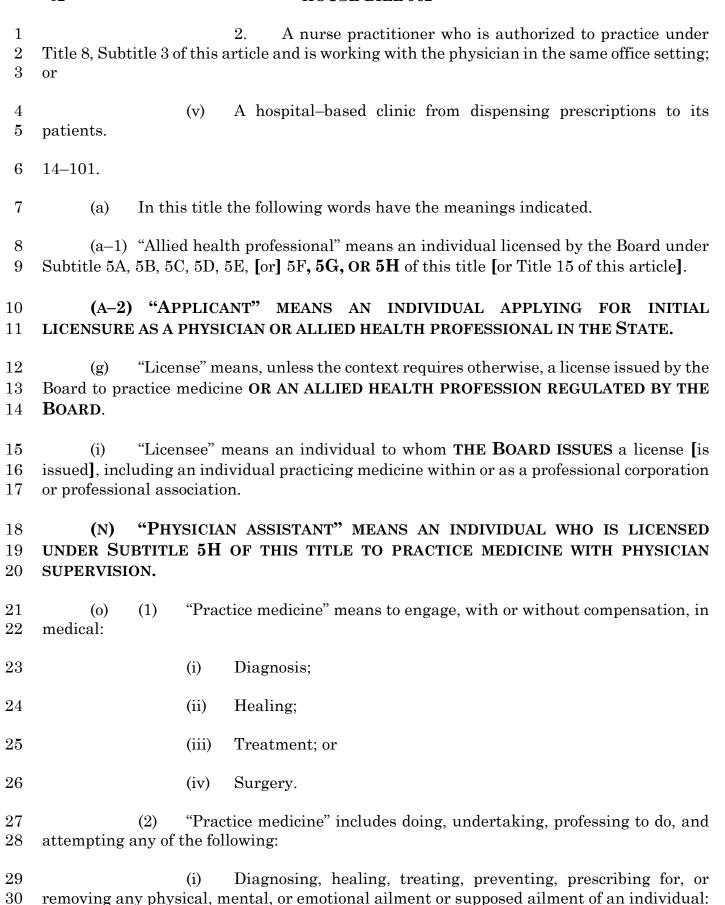
prescriptions; or

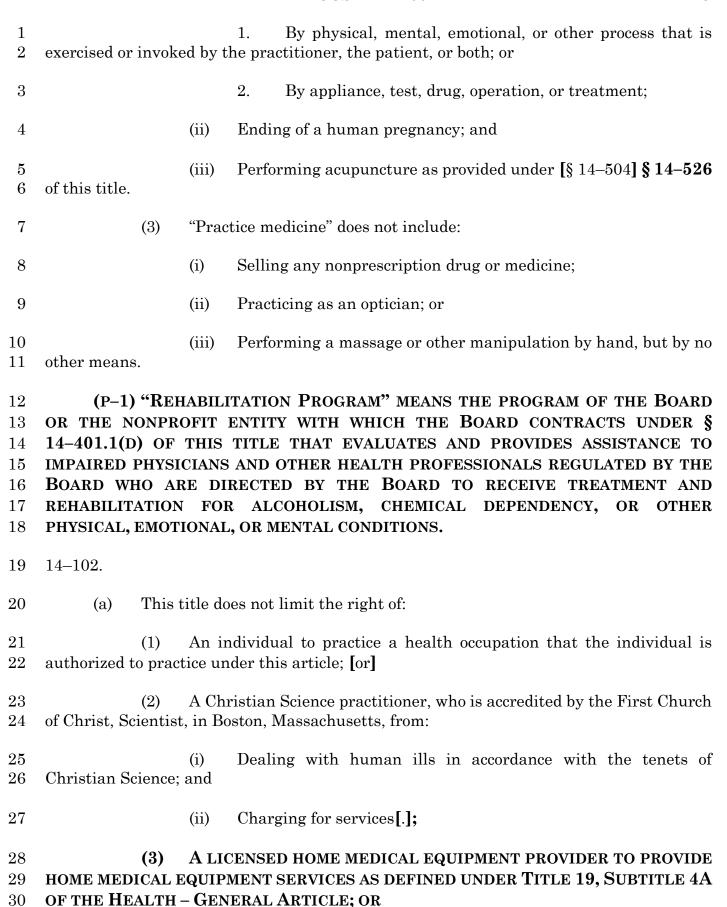
1 2 3	2. Dispensing, in accordance with § 2–313(c) of the Agriculture Article, compounded nonsterile preparations or compounded sterile preparations provided by a pharmacy;
4 5	(ii) A licensed dentist, physician, or podiatrist from personally preparing and dispensing the dentist's, physician's, or podiatrist's prescriptions when:
6	1. The dentist, physician, or podiatrist:
7 8	A. Has applied to the board of licensure in this State which licensed the dentist, physician, or podiatrist;
9 10 11	B. Has demonstrated to the satisfaction of that board that the dispensing of prescription drugs or devices by the dentist, physician, or podiatrist is in the public interest;
12 13 14	C. Has received a written permit from that board to dispense prescription drugs or devices except that a written permit is not required in order to dispense starter dosages or samples without charge; and
15 16 17	D. Posts a sign conspicuously positioned and readable regarding the process for resolving incorrectly filled prescriptions or includes written information regarding the process with each prescription dispensed;
18 19	2. The person for whom the drugs or devices are prescribed is a patient of the prescribing dentist, physician, or podiatrist;
20 21	3. The dentist, physician, or podiatrist does not have a substantial financial interest in a pharmacy; and
22	4. The dentist, physician, or podiatrist:
23 24	A. Complies with the dispensing and labeling requirements of this title;
25 26	B. Records the dispensing of the prescription drug or device on the patient's chart;
27 28 29	C. Allows the Office of Controlled Substances Administration to enter and inspect the dentist's, physician's, or podiatrist's office at all reasonable hours and in accordance with § 12–102.1 of this subtitle;

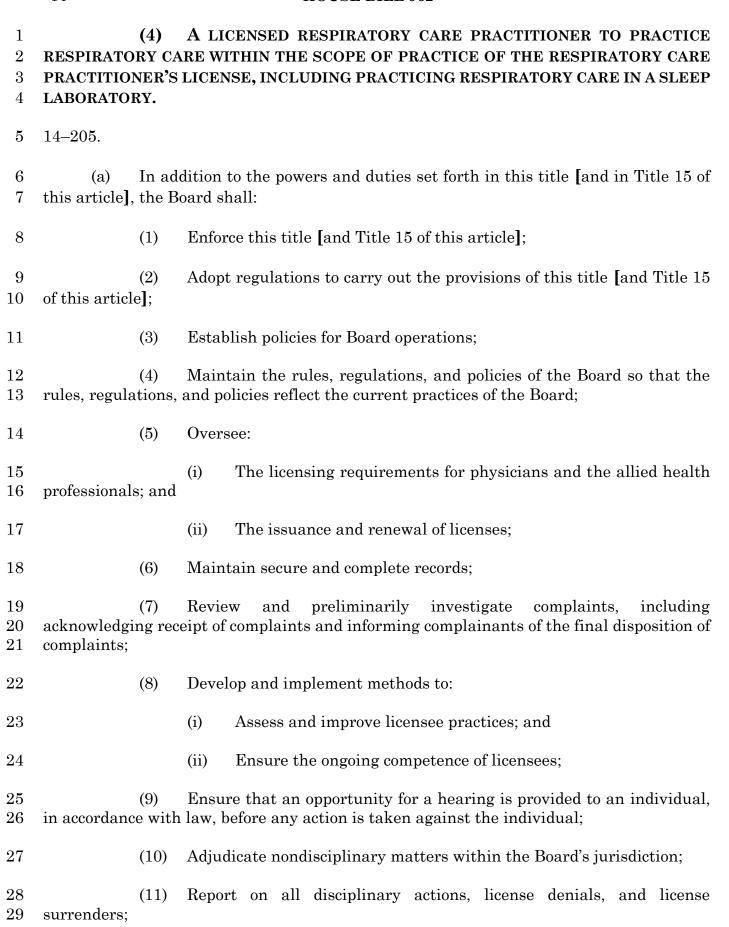
D. On inspection by the Office of Controlled Substances Administration, signs and dates an acknowledgment form provided by the Office of Controlled Substances Administration relating to the requirements of this section;

1 2 3	E. Except for starter dosages or samples without charge, provides the patient with a written prescription, maintains prescription files in accordance with § 12–403(c)(13) of this title, and maintains a separate file for Schedule II prescriptions;
4 5	F. Does not direct patients to a single pharmacist or pharmacy in accordance with $\S~12-403(c)(8)$ of this title;
6 7	G. Does not receive remuneration for referring patients to a pharmacist or pharmacy;
8 9	H. Complies with the child resistant packaging requirements regarding prescription drugs under Title 22, Subtitle 3 of the Health – General Article;
10	I. Complies with drug recalls;
11 12 13	J. Maintains biennial inventories and complies with any other federal and State record–keeping requirements relating to controlled dangerous substances;
14 15 16	K. Purchases prescription drugs from a pharmacy or wholesale distributor who holds a permit issued by the Board of Pharmacy, as verified by the Board of Pharmacy;
17 18 19	L. Annually reports to the respective board of licensure whether the dentist, physician, or podiatrist has personally prepared and dispensed prescription drugs within the previous year; and
20 21 22 23	M. Completes ten continuing education credits over a 5-year period relating to the preparing and dispensing of prescription drugs, offered by the Accreditation Council for Pharmacy Education (ACPE) or as approved by the Secretary, in consultation with each respective board of licensure, as a condition of permit renewal;
24 25 26	(iii) A licensed physician from dispensing a topical medication without obtaining the permit required under item (ii)1C of this paragraph or completing the continuing education required under item (ii)4M of this paragraph when the physician:
27	1. Otherwise complies with item (ii) of this paragraph; and
28 29	2. Has obtained a special written permit under [§ 14–509] § 14–522 of this article;
30 31	(iv) A licensed physician who complies with the requirements of item (ii) of this paragraph from personally preparing and dispensing a prescription written by:
32	1. A physician assistant in accordance with a delegation

agreement that complies with Title [15]  ${\bf 14}$ , Subtitle [3]  ${\bf 5H}$  of this article; or







(12)1 Establish appropriate fees that are adequate to fund the effective 2 regulation of physicians and allied health professionals; 3 (13)Make recommendations that benefit the health, safety, and welfare of 4 the public: 5 (14)Provide ongoing education and training for Board members to ensure 6 that the Board members can competently discharge their duties; 7 (15)Direct educational outreach to and communicate with licensees and the 8 public; 9 Develop and adopt a budget that reflects revenues and supports the (16)costs associated with each allied health profession regulated by the Board; 10 11 Develop and approve an annual report and other required reports for (17)12 submission to the Secretary, the Governor, the General Assembly, and the public; 13 (18)Approve contracts as needed and within budgetary limits; 14 Appoint standing and ad hoc committees from among Board members (19)15 as necessary; 16 Delegate to the executive director of the Board the authority to 17 discharge Board or disciplinary panel duties, as deemed appropriate and necessary by the 18 Board or disciplinary panel, and hold the executive director accountable to the Board; and 19 Appoint members of the disciplinary panels. (21)20 (b) (1) In addition to the powers set forth elsewhere in this title, the Board 21 may: 22 Adopt regulations to regulate the performance of acupuncture, (i) but only to the extent authorized by [§ 14–504] § 14–526 of this title; 2324 After consulting with the State Board of Pharmacy, adopt rules (ii) 25and regulations regarding the dispensing of prescription drugs by a licensed physician; 26 (iii) On receipt of a written and signed complaint, including a referral 27 from the Commissioner of Labor and Industry, conduct an unannounced inspection of the 28office of a physician or acupuncturist, other than an office of a physician or acupuncturist 29 in a hospital, related institution, freestanding medical facility, or a freestanding birthing

center, to determine compliance at that office with the Centers for Disease Control and

Prevention's guidelines on universal precautions; and

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- 1 (iv) Contract with others for the purchase of administrative and 2 examination services to carry out the provisions of this title.
- 3 (2) The Board or a disciplinary panel may investigate an alleged violation 4 of this title.
- [(3) Subject to the Administrative Procedure Act and the hearing provisions of § 14–405 of this title, a disciplinary panel may deny a license to an applicant or, if an applicant has failed to renew the applicant's license, refuse to renew or reinstate an applicant's license for:
- 9 (i) Any of the reasons that are grounds for action under 14–404, 10 14–5A–17, 14–5B–14, 14–5C–17, 14–5D–14, 14–5E–16, or 14–5F–18 of this title, as applicable; or
- 12 (ii) Failure to complete a criminal history records check in 13 accordance with § 14–308.1 of this title.]
- 14 (c) (1) In addition to the duties set forth elsewhere in this title, the Board 15 shall:
- 16 (i) Issue, for use in other jurisdictions, a certificate of professional standing to any [licensed physician] LICENSEE; and
- 18 (ii) Keep a list of all **PENDING** license applicants.
- 19 (2) (i) The Board shall keep a list of all [physicians] LICENSEES who 20 are currently licensed.
- 21 (ii) The list shall include each [physician's] LICENSEE'S designated 22 public address.
- 23 (iii) A [physician's] LICENSEE'S designated public address may be a 24 post office box only if the [physician] LICENSEE provides to the Board a nonpublic address, 25 under paragraph (3) of this subsection, that is not a post office box.
- 26 (iv) Each list prepared under this paragraph shall be kept as a 27 permanent record of the Board.
- 28 (v) The list of [currently licensed physicians] CURRENT 29 LICENSEES is a public record.
- 30 (3) (i) The Board shall maintain on file a [physician's] LICENSEE'S 31 designated nonpublic address, if provided by the [physician] LICENSEE, to facilitate 32 communication between the [physician] LICENSEE and the Board.

- 1 The Board shall offer a [physician] LICENSEE the opportunity to (ii) 2 designate a nonpublic address, in addition to the [physician's] LICENSEE'S public address, at the time of initial licensure and license renewal. 3 4 A [physician] LICENSEE shall designate an address where the 5 Board may send the [physician] LICENSEE mail. 6 A [physician's] LICENSEE'S designated nonpublic address is not 7 a public record and may not be released by the Board. 8 THE BOARD MAY NOT RELEASE A LIST OF APPLICANTS FOR LICENSURE. (D) 9 **(E)** THE BOARD MAY ADOPT REGULATIONS REGARDING COMMITTEES ESTABLISHED UNDER THIS TITLE GOVERNING: 10 11 **(1)** THE TERM OF OFFICE FOR MEMBERS; 12 **(2)** THE PROCEDURE FOR FILLING VACANCIES ON A COMMITTEE; 13 **(3)** THE REMOVAL OF MEMBERS; AND THE DUTIES OF EACH OFFICER. 14 **(4)** 14 - 207. 15 (1) The Board [may] SHALL set reasonable fees for the issuance and 16 (b) renewal of licenses and its other services PROVIDED TO PHYSICIANS AND ALLIED 17 18 HEALTH PROFESSIONALS. 19 (2) The fees charged shall be set [so as] to GENERATE SUFFICIENT 20FUNDS TO approximate the cost of maintaining the Board, THE LICENSURE PROGRAMS UNDER THIS TITLE, AND THE OTHER SERVICES IT PROVIDES TO PHYSICIANS AND 2122 ALLIED HEALTH PROFESSIONALS, including the cost of providing a rehabilitation 23 program for physicians AND ALLIED HEALTH PROFESSIONALS under [§ 14–401.1(g)] § **14–401.1(D)** of this title. 2425Funds to cover the compensation and expenses of the Board members 26 shall be generated by fees set under this section.
- 27 (4) FEES GENERATED BY PHYSICIAN OR ALLIED HEALTH 28 PROFESSIONAL LICENSES SHALL BE USED TO MAINTAIN THE LICENSING PROGRAM 29 AND SERVICES PROVIDED TO THAT PARTICULAR PROFESSION.

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- 1 (5) THE FEES GENERATED SHALL BE USED TO COVER THE ACTUAL DOCUMENTED DIRECT AND INDIRECT COSTS OF FULFILLING THE STATUTORY AND REGULATORY DUTIES OF THE BOARD AS PROVIDED BY THE PROVISIONS OF THIS TITLE.
- 5 (6) (I) IN ADDITION TO THE FEE SET BY THE BOARD UNDER THIS SECTION FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL ASSESS A SEPARATE \$15 FEE FOR A RENEWAL OF EACH LICENSE FOR A PHYSICIAN ASSISTANT.
- 8 (II) THE BOARD SHALL PAY THE FEE COLLECTED UNDER 9 SUBPARAGRAPH (I) OF THIS PARAGRAPH TO THE PHYSICIAN ASSISTANT 10 PRECEPTORSHIP TAX CREDIT FUND ESTABLISHED UNDER § 10–752 OF THE TAX 11 GENERAL ARTICLE.
- 12 (c) [The] EXCEPT AS PROVIDED IN SUBSECTION (B)(6) OF THIS SECTION, 13 THE Board shall pay all fees collected under the provisions of this title to the Comptroller 14 of the State.
- (d) (1) [In each of fiscal years 2019 through 2021, if the Governor does not include in the State budget at least \$400,000 for the operation of the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article, as administered by the Department, the Comptroller shall distribute:
  - (i) \$400,000 of the fees received from the Board to the Department to be used to make grants under the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article to physicians and physician assistants engaged in primary care or to medical residents specializing in primary care who agree to practice for at least 2 years as primary care physicians in a geographic area of the State that has been designated by the Secretary as being medically underserved; and
    - (ii) The balance of the fees to the Board of Physicians Fund.
- 28 (2) In fiscal year 2022, if the Governor does not include in the State budget 29 at least \$1,000,000 for the operation of the Maryland Loan Assistance Repayment Program 30 for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General 31 Article, as administered by the Department, the Comptroller shall distribute:
- 32 (i) \$1,000,000 of the fees received from the Board to the Department 33 to be used to make grants under the Maryland Loan Assistance Repayment Program for 34 Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General 35 Article to physicians and physician assistants engaged in primary care or to medical 36 residents specializing in primary care who agree to practice for at least 2 years as primary 37 care physicians in a geographic area of the State that has been designated by the Secretary 38 as being medically underserved; and

1 (ii) The balance of the fees to the Board of Physicians Fund. 2 **(**3)**1** In fiscal year 2023 and each fiscal year thereafter, if the Department 3 does not implement a permanent funding structure under § 24–1702(b)(1) of the Health – 4 General Article and the Governor does not include in the State budget at least \$400,000 for 5 the operation of the Maryland Loan Assistance Repayment Program for Physicians and 6 Physician Assistants under Title 24, Subtitle 17 of the Health – General Article, as 7 administered by the Department, the Comptroller shall distribute: 8 (i) \$400,000 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 The balance of the fees to the Board of Physicians Fund. (ii) 16 [(4)] **(2)** If the Governor includes in the State budget at least the amount specified in paragraph (1) [or (2)] of this subsection for the operation of the Maryland Loan 17 18 Assistance Repayment Program for Physicians and Physician Assistants under Title 24, 19 Subtitle 17 of the Health – General Article, as administered by the Department, the 20 Comptroller shall distribute the fees to the Board of Physicians Fund. 21(f) (1) In addition to the requirements of subsection (e) of this section, the 22Board shall fund the budget of the [Physician] Rehabilitation Program with fees set, collected, and distributed to the Fund under this title. 23 24(2) After review and approval by the Board of a budget submitted by the 25[Physician] Rehabilitation Program, the Board may allocate money from the Fund to the [Physician] Rehabilitation Program. 26 27 14-301. 28 [To] IN ADDITION TO ANY OTHER REQUIREMENTS UNDER THIS TITLE, TO 29qualify for a license, an applicant shall be an individual who meets the requirements of this 30 section. The applicant shall be of good moral character. 31 (b) 32 The EXCEPT AS PROVIDED IN § 14-5F-11 OF THIS TITLE, THE applicant

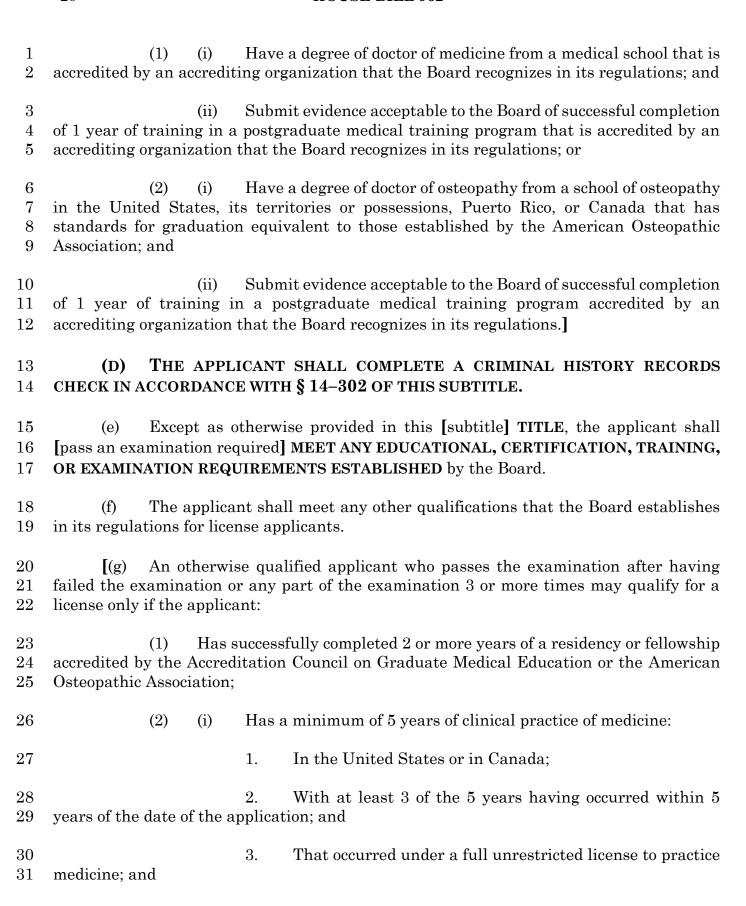
Except as provided in § 14–308 of this subtitle, the applicant shall:

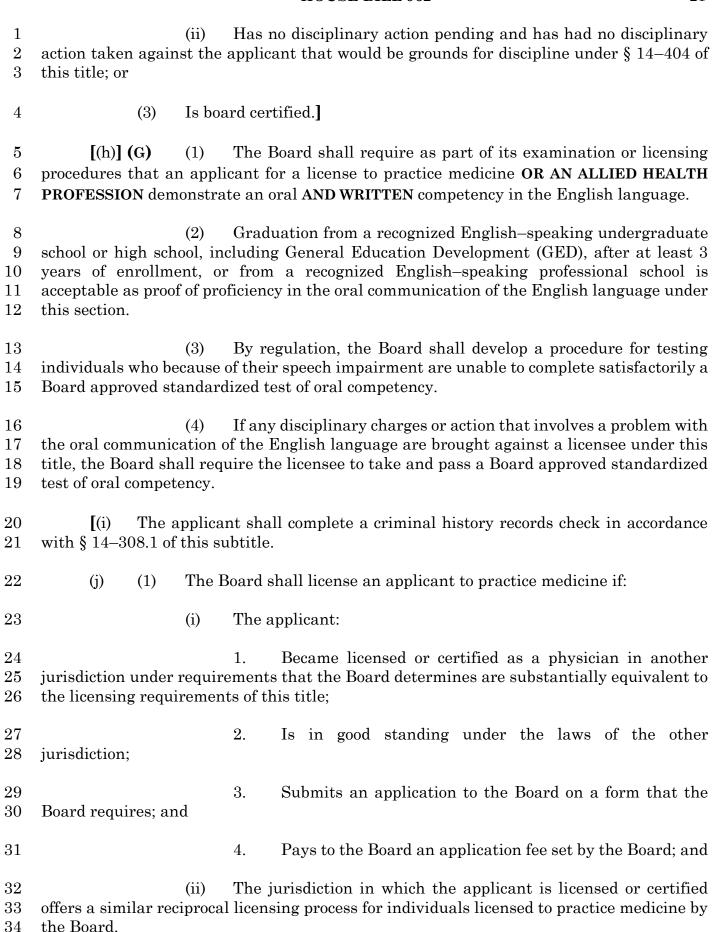
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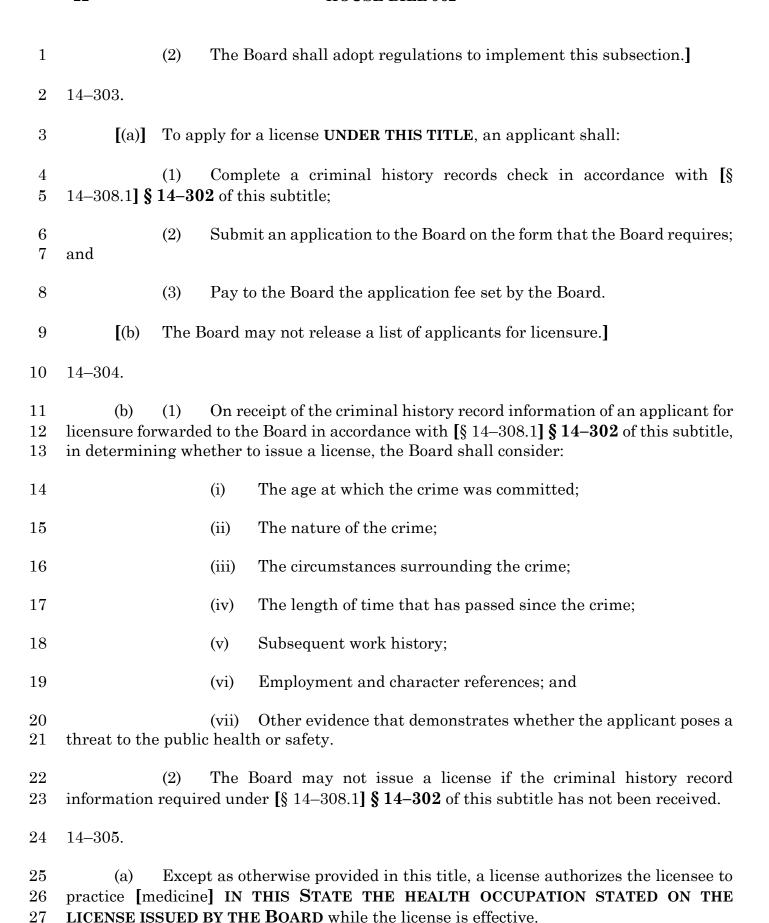
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shall be at least 18 years old.

(d)







$\frac{1}{2}$	(b) A licensee may practice [medicine] THE HEALTH OCCUPATION STATED ON THE LICENSE ISSUED BY THE BOARD using only the name in which the license is issued.					
3	3 14–306.					
4	4 (a) (1) The term	of a license issued by the Board may not exceed 3 years.				
5 6		expires on a date set by the Board, unless the license is NAL term as provided in this section.				
7 8 9	(b) (1) Subject to paragraph (2) of this subsection, at least 1 month before the license expires, the Board shall send to the licensee, by electronic or first—class mail to the last known electronic or physical address of the licensee[:					
10	(i) A] A	A renewal notice that states:				
11	[1.]	(I) The date on which the current license expires;				
12 13 14	B received by the Board for the	(II) The date by which the renewal application must be renewal to be issued and mailed before the license expires;				
15	[3.]	(III) The amount of the renewal fee[; and				
16 17	· /	blank panel data sheet supplied by the Health Care on Office].				
18 19 20	(2) If the Board chooses to send renewal notices exclusively by electronic mail under paragraph (1) of this subsection, the Board shall send a renewal notice by first-class mail to a licensee on request of the licensee.					
21 22	(c) (1) Before the license expires, the licensee periodically may renew it for an additional term, if the licensee:					
23	3 (i) Oth	erwise is entitled to be licensed;				
24	4 (ii) Is o	f good moral character;				
25	5 (iii) Pay	s to the Board a renewal fee set by the Board; [and]				
26	iv) Sub	omits to the Board:				
27 28		A renewal application on the form that the Board requires;				

- 2. Satisfactory evidence of compliance with any continuing education **OR COMPETENCY** requirements set under this section for license renewal; **AND**
- 3 (V) MEETS ANY ADDITIONAL LICENSE RENEWAL 4 REQUIREMENTS ESTABLISHED BY THE BOARD.
- 5 (2) Within 30 days after a license renewal under Section 7 of the Interstate 6 Medical Licensure Compact established under § 14–3A–01 of this title, a compact physician 7 shall submit to the Board the information required under paragraph (1)(iv) of this subsection.
- 9 (d) (1) In addition to any other qualifications and requirements established by 10 the Board, the Board may establish continuing education **OR COMPETENCY** requirements 11 as a condition to the renewal of licenses under this section.
- 12 **[**(2) In establishing these requirements, the Board shall evaluate existing methods, devices, and programs in use among the various medical specialties and other recognized medical groups.
- 15 (3) The Board shall adopt regulations that allow a licensee seeking renewal 16 to receive up to 5 continuing education credits per renewal period for providing 17 uncompensated, voluntary medical services during each renewal period.
- 18 (4) The Board may not establish or enforce these requirements if they would so reduce the number of physicians in a community as to jeopardize the availability of adequate medical care in that community.]
- [(5)] (2) The Board may not establish a continuing education requirement that every licensee complete a specific course or program as a condition to the renewal of a license under this section.
- [(6) A disciplinary panel may impose a civil penalty of up to \$100 per continuing medical education credit in lieu of a sanction under § 14–404 of this title, for a first offense, for the failure of a licensee to obtain the continuing medical education credits required by the Board.]
- 28 (e) The Board shall renew the license of each licensee who meets the 29 requirements of this section AND ANY ADDITIONAL REQUIREMENTS ESTABLISHED 30 UNDER SUBTITLE 5, 5A, 5B, 5C, 5D, 5E, 5F, 5G, OR 5H OF THIS TITLE, AS 31 APPLICABLE.
- [(f) (1) Each licensee shall notify the secretary of the Board in writing of any change in the licensee's name or address within 60 days after the change.
- 34 (2) If a licensee fails to notify the secretary of the Board within the time 35 required under this section, the licensee is subject to an administrative penalty of \$100.]

1 [(g)] **(F)** (1) Beginning October 1, 2016, the Board shall require a criminal history records check in accordance with [§ 14–308.1] § 14–302 of this subtitle for: 2 3 (i) Renewal applicants as determined by regulations adopted by the Board; and 4 5 Each former licensee who files for reinstatement under [§ 14–317 (ii) 6 of this subtitle THIS TITLE. 7 (2)On receipt of the criminal history record information of a licensee 8 forwarded to the Board in accordance with [§ 14-308.1] § 14-302 of this subtitle, in 9 determining whether disciplinary action should be taken, based on the criminal record 10 information, against a licensee who renewed or reinstated a license, the Board shall 11 consider: 12 (i) The age at which the crime was committed; 13 The nature of the crime: (ii) 14 (iii) The circumstances surrounding the crime; 15 (iv) The length of time that has passed since the crime; 16 Subsequent work history; (v) 17 Employment and character references; and (vi) 18 (vii) Other evidence that demonstrates whether the licensee poses a 19 threat to the public health or safety. 20 The Board may renew or reinstate a license only if the licensee or 21applicant attests that the licensee or applicant has submitted to a criminal history records 22check under [§ 14–308.1] § 14–302 of this subtitle. 2314-307. 24The Board shall reinstate the license of [a physician] AN INDIVIDUAL who has failed to renew the license for any reason if the [physician] INDIVIDUAL: 2526 Meets the renewal requirements of [§ 14–316] § 14–306 of this subtitle AND THE APPLICABLE RENEWAL REQUIREMENTS IN SUBTITLE 5, 5A, 5B, 5C, 5D, 275E, 5F, 5G, OR 5H OF THIS TITLE; 28

SUBMITS A REINSTATEMENT APPLICATION ON THE FORM THAT

29

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**(2)** 

THE BOARD REQUIRES;

1	<b>[</b> (2) <b>]</b>	(3)	Pays	s to the	Board a reinstate	ment fee set b	y the Board; [and]
2 3 4	[(3)] the qualifications <b>AND</b>	` '				<del>-</del>	e of compliance with ense reinstatements;
5 6	(5) REQUIREMENTS	MEE ESTAF		ANY ED BY T	ADDITIONAL THE BOARD.	LICENSE	REINSTATEMENT
7	14–401.1.						
8 9 10 11 12	subtitle, [§ 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–15, § 14–5E–16, or § 14–5F–21 of this title or § 15–315 of this article,] the chair of the disciplinary panel that was assigned the complaint under paragraph (2)(i) of this subsection shall refer the complaint to the other						
13 14 15 16	disciplinary panel under subparagraph (i) of this paragraph, the disciplinary panel that was assigned the complaint under paragraph (2)(i) of this subsection, or any of its members,						
17			1.	Conti	nue to handle the	complaint;	
18 19	complaint; or		2.	Parti	cipate in any disci	iplinary proce	edings regarding the
20			3.	Deter	rmine the final dis	position of the	e complaint.
21 22 23	v i v i						
24	(2)	A pee	er revi	ewer sh	nall:		
25		(i)	Be b	oard ce	rtified;		
26		(ii)	Hav	e specia	l qualifications to	judge the mat	tter at hand;
27 28	training;	(iii)	Hav	e receiv	ved a specified a	mount of med	lical experience and
29		(iv)	Hav	e no for	mal actions agains	st the peer rev	riewer's own license;
30		(v)	Rece	eive trai	ning in peer revie	w;	

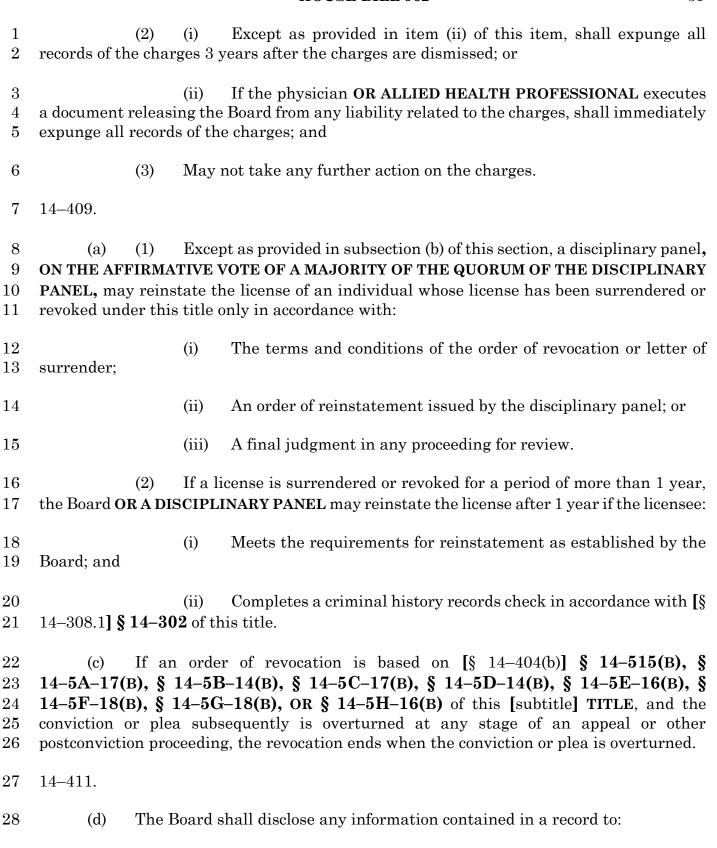
1	(vi) Have a standard format for peer review reports; and						
2 3	(vii) To the extent practicable, be licensed and engaged in the practice of medicine in the State.						
4 5 6	(3) The Board may consult with the appropriate specialty health care provider societies in the State to obtain a list of physicians qualified to provide peer review services.						
7 8	(4)] For purposes of peer review, the Board may use sole source procurement under § 13–107 of the State Finance and Procurement Article.						
9 10	[(5)] <b>(2)</b> The hearing of charges may not be stayed or challenged because of the selection of peer reviewers under this subsection before the filing of charges.						
11 12 13	contracts under subsection [(e)] (B) of this section OR § 14-514 OF THIS TITLE shall have						
14 15 16	extension of up to 30 days to the time limit imposed under [paragraph (1) of this subsection]						
17	(3) If an extension is not granted, and 90 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of [subsection						
18 19	(e)(2) of this section] § 14–515(D)(2) OF THIS TITLE for the services of peer review.						
19 20 21	(e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.  (4) If an extension has been granted, and 120 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of [subsection]						
19 20 21 22 23 24	<ul> <li>(e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.</li> <li>(4) If an extension has been granted, and 120 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of [subsection (e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.</li> <li>[(g)] (D) The Board shall issue a request for proposals and enter into a written contract with a nonprofit entity to provide rehabilitation services for physicians or other</li> </ul>						
19 20 21 22 23 24 25 26 27	(e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.  (4) If an extension has been granted, and 120 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of [subsection (e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.  [(g)] (D) The Board shall issue a request for proposals and enter into a written contract with a nonprofit entity to provide rehabilitation services for physicians or other allied health professionals directed by the Board to receive rehabilitation services.  [(h)] (E) (1) To facilitate the investigation and prosecution of disciplinary matters and the mediation of fee disputes coming before it, the Board may contract with an						
19 20 21 22 23 24 25 26 27 28	(e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.  (4) If an extension has been granted, and 120 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of [subsection (e)(2) of this section] § 14-515(D)(2) OF THIS TITLE for the services of peer review.  [(g)] (D) The Board shall issue a request for proposals and enter into a written contract with a nonprofit entity to provide rehabilitation services for physicians or other allied health professionals directed by the Board to receive rehabilitation services.  [(h)] (E) (1) To facilitate the investigation and prosecution of disciplinary matters and the mediation of fee disputes coming before it, the Board may contract with an entity or entities for the purchase of investigatory, mediation, and related services.  (2) Services that may be contracted for under this subsection include the						

1	1 (iii)	Accountants;					
2	2 (iv)	Expert witnesses;					
3	3 (v)	Consultants; and					
4	4 (vi)	Mediators.					
5 6 7	6 oaths in connection with a	oard or a disciplinary panel may issue subpoenas and administer ny investigation under this section and any hearing or proceeding					
8 9 10	complaint against a licensee that sets forth allegations of grounds for disciplinary action filed with the Board shall be completed as expeditiously as possible and, in any event						
12 13 14	3 complaint within 1 year, t	(2) If a disciplinary panel is unable to complete the disposition of a complaint within 1 year, the Board shall include in the record of that complaint a detailed explanation of the reason for the delay.					
15 16 17 18	[(k)] (H) A disciplinary panel, in conducting a meeting with a physician or allied health professional to discuss the proposed disposition of a complaint, shall provide an opportunity to appear before the disciplinary panel to both the licensee who has been charged and the individual who has filed the complaint against the licensee giving rise to the charge.						
20	0 14–401.2.						
21 22	(e) A disciplinary panel may issue a cease and desist order or obtain injunctive relief against an individual for:						
23 24	` '	cing a profession regulated under this title [or Title 15 of this OR WITH AN UNAUTHORIZED PERSON;					
25 26	` '	senting to the public, by title, description of services, methods, that the individual is authorized to practice:					
27 28		Medicine in this State, in violation of [§ 14–602] § 14–528 of this					
29 80	9 (ii)	Respiratory care in this State, in violation of § 14–5A–21 of this					

- 1 Radiation therapy, radiography, nuclear medicine technology, or 2 radiation assistance in this State, in violation of § 14–5B–18 of this title; 3 (iv) Polysomnography in this State, in violation of § 14–5C–21 of this title: 4 5 (v) Athletic training in this State, in violation of § 14–5D–17(3) of 6 this title; 7 (vi) Perfusion in this State, in violation of § 14–5E–21 of this title; Naturopathic medicine in this State, in violation of § 14–5F–30 8 (vii) 9 of this title; [or] 10 (viii) GENETIC COUNSELING IN THIS STATE, IN VIOLATION OF § 11 14-5G-24 OF THIS TITLE; OR 12 As a physician assistant in this State, in violation of § 15–402 of this article] § 14-5H-19 OF THIS TITLE; or 13 14 (3)Taking any action: 15 For which a disciplinary panel determines there is a preponderance of evidence of grounds for discipline under [§ 14–404] § 14–515 of this title; 16 17 and 18 (ii) That poses a serious risk to the health, safety, and welfare of a 19 patient. 20 14-402. 21 In reviewing an application for licensure or in investigating an allegation 22brought against a licensed physician or any allied health professional regulated by the 23Board under this title, the [Physician] Rehabilitation Program may request the Board to 24direct, or the Board or a disciplinary panel on its own initiative may direct, the licensed 25 physician or any allied health professional regulated by the Board under this title to submit 26to an appropriate examination. 27 The unreasonable failure or refusal of the licensed individual OR APPLICANT (c) 28 to submit to an examination is prima facie evidence of the licensed individual's OR 29 APPLICANT'S inability to practice medicine or the respective discipline competently, unless 30 the Board or disciplinary panel finds that the failure or refusal was beyond the control of the licensed individual OR APPLICANT. 31
- 32 (e) (1) The Board or the entity or entities with which the Board contracts shall appoint the members of the [Physician] Rehabilitation Program.

- 1 (2) The chair of the Board shall appoint one member of the Board to serve 2 as a liaison to the [Physician] Rehabilitation Program.
- 3 (f) The [Physician] Rehabilitation Program is subject to audit by the Legislative 4 Auditor as provided in § 2–1220 of the State Government Article.
- 5 **14-404.**
- SUBJECT TO THE ADMINISTRATIVE PROCEDURE ACT AND THE HEARING PROVISIONS OF § 14–405 OF THIS SUBTITLE, A DISCIPLINARY PANEL MAY DENY A LICENSE TO AN APPLICANT OR, IF AN APPLICANT HAS FAILED TO RENEW THE APPLICANT'S LICENSE, REFUSE TO RENEW OR REINSTATE AN APPLICANT'S LICENSE FOR ANY OF THE REASONS THAT ARE GROUNDS FOR ACTION UNDER § 14–515, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, § 14–5G–18, OR § 14–5H–16 OF THIS TITLE, AS APPLICABLE.
- 13 14-405.
- 14 (a) Except as otherwise provided in the Administrative Procedure Act, before the Board or a disciplinary panel takes any action under [ $\S$  14–404(a)]  $\S$  14–404 of this subtitle or [ $\S$  14–205(b)(3),]  $\S$  14–515(A),  $\S$  14–5A–17(a),  $\S$  14–5B–14(a),  $\S$  14–5C–17(a),  $\S$
- 17 14–5D–14(a), § 14–5E–16(a), [or] § 14–5F–18, § 14–5G–18, OR § 14–5H–16 of this title,
- 18 it shall give the individual against whom the action is contemplated an opportunity for a
- 19 hearing before a hearing officer.
- [(g)] **(F)** The hearing of charges may not be stayed or challenged by any procedural defects alleged to have occurred prior to the filing of charges.
- 22 14-406.

- 23 (a) Following the filing of charges, if a majority of the quorum of a disciplinary panel finds that there are grounds for action under [§ 14–404] § 14–515, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, § 14–5G–18, OR § 14–5H–16 of this [subtitle] TITLE, the disciplinary panel shall pass an order in accordance with the Administrative Procedure Act.
- 28 (b) After the charges are filed, if a disciplinary panel finds, on an affirmative vote 29 of a majority of its quorum, that there are no grounds for action under [§ 14–404] § 30 14–515, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, 31 § 14–5G–18, OR § 14–5H–16 of this [subtitle] TITLE, the disciplinary panel:
  - (1) Immediately shall dismiss the charges and exonerate the licensee;



A committee of a hospital, health maintenance organization, or related

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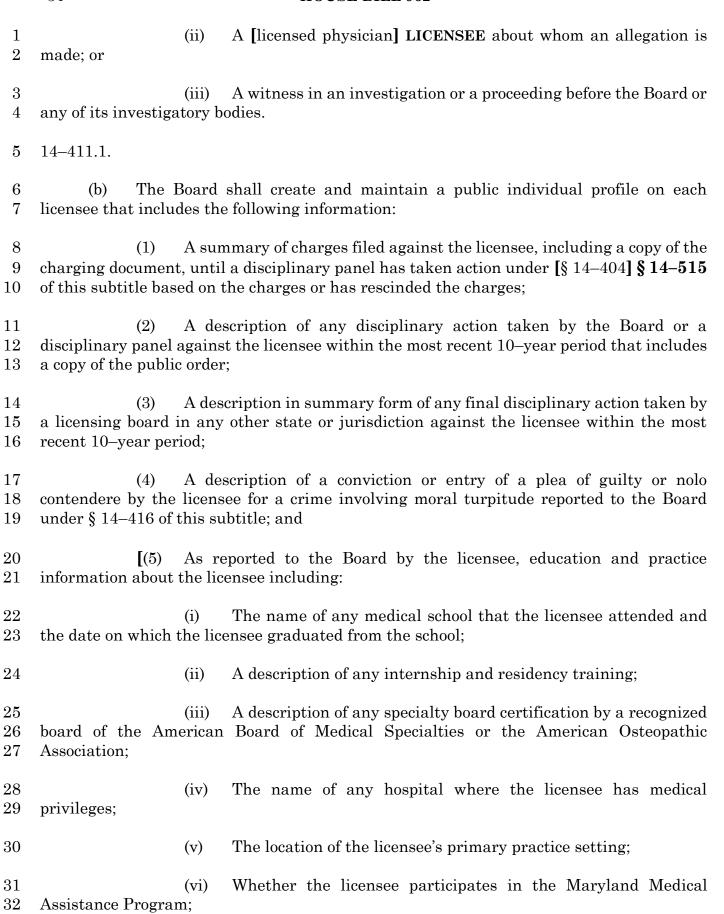
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(1)

institution if:

- 1 (i) The committee of a medical hospital staff concerned with 2 [physician] LICENSEE discipline or other committee of a hospital, health maintenance organization, or related institution requests the information in writing;
- 4 (ii) A disciplinary panel has issued an order as to a [licensed 5 physician] LICENSEE on whom the information is requested; and
- 6 (iii) The Board determines that the information requested is 7 necessary for an investigation or action of the committee as to a medical privilege of a 8 [licensed physician] LICENSEE; or
- 9 (2) The Secretary, the Office of Health Care Quality in the Department, 10 the Maryland Health Care Commission, or the Health Services Cost Review Commission 11 for the purpose of investigating quality or utilization of care in any entity regulated by the 12 Office of Health Care Quality or the Health Services Cost Review Commission.
- 13 (g) (1) The Board shall notify all hospitals, health maintenance organizations, 14 or other health care facilities where a [physician or an allied health professional] 15 LICENSEE regulated by the Board has privileges, has a provider contract with a health 16 maintenance organization, or is employed of a complaint or report filed against that 17 [physician] LICENSEE, if:
- 18 (i) The Board determines, in its discretion, that the hospital, health 19 maintenance organization, or health care facility should be informed about the report or 20 complaint;
- 21 (ii) The nature of the complaint suggests a reasonable possibility of 22 an imminent threat to patient safety; or
- 23 (iii) The complaint or report was as a result of a claim filed in the 24 Health Care Alternative Dispute Resolution Office and a certificate of a qualified expert is 25 filed in accordance with § 3–2A–04(b)(1) of the Courts Article.
- 26 (2) The Board shall disclose any information pertaining to a [physician's]
  27 LICENSEE'S competency to practice [medicine] UNDER THE LICENSE contained in record
  28 to a committee of a hospital, health maintenance organization, or other health care facility
  29 if:
- 30 (i) The committee is concerned with [physician] LICENSEE 31 discipline and requests the information in writing; and
- 32 (ii) The Board has received a complaint or report pursuant to 33 paragraph (1)(i) and (ii) of this subsection on the [licensed physician] LICENSEE on whom 34 the information is requested.

- 1 The Board shall, after formal action is taken pursuant to § 14-406 of (3)2 this subtitle, notify those hospitals, health maintenance organizations, or health care 3 facilities where the [physician] LICENSEE has privileges, has a provider contract with a 4 health maintenance organization, or is employed of its formal action within 10 days after the action is taken and shall provide the hospital, health maintenance organization, or 5 6 health care facility with periodic reports as to enforcement or monitoring of a formal 7 disciplinary order against a [physician] LICENSEE within 10 days after receipt of those 8 reports.
- 9 (h) On the request of a person who has made a complaint to the Board regarding 10 a [physician] LICENSEE, the Board shall provide the person with information on the status 11 of the complaint.
- 12 (j) The Board may disclose any information contained in a record to a licensing 13 or disciplinary authority of another state if:
- 14 (1) The licensing or disciplinary authority of another state that regulates 15 [licensed physicians] LICENSEES in that state requests the information in writing; and
- 16 (2) The disclosure of any information is limited to the pendency of an allegation of a ground for disciplinary or other action by a disciplinary panel until:
- 18 (i) The disciplinary panel has passed an order under 14–406 of 19 this subtitle; or
- 20 (ii) A [licensed physician] LICENSEE on whom the information is 21 requested authorizes a disclosure as to the facts of an allegation or the results of an 22 investigation before the Board.
- 23 (k) The Board may disclose any information contained in a record to a person if:
- 24 (1) A [licensed physician] LICENSEE on whom any information is 25 requested authorizes the person to receive the disclosure;
- 26 (2) The person requests the information in writing; and
- 27 (3) The authorization for the disclosure is in writing.
- 28 (p) (1) The Board may publish a summary of any allegations of grounds for 29 disciplinary or other action.
- 30 (2) A summary may not identify:
- 31 (i) Any person who makes an allegation to the Board or any of its 32 investigatory bodies;



1 Whether the licensee maintains medical professional liability (vii) 2 insurance; and 3 (viii) The number of medical malpractice final court judgments and arbitration awards against the licensee within the most recent 10-year period. 4 FOR A PHYSICIAN, THE INFORMATION REQUIRED UNDER § 14–516 5 **(5)** 6 OF THIS TITLE. 7 (c) In addition to the requirements of subsection (b) of this section, the Board 8 shall: 9 FOLLOWING THE FILING OF CHARGES OR NOTICE OF INITIAL (1) 10 DENIAL OF A LICENSE APPLICATION, DISCLOSE THE FILING TO THE PUBLIC ON THE **BOARD'S WEBSITE:** 11 **(2)** 12Provide appropriate and accessible Internet links from the Board's [Internet site] WEBSITE: 13 14 (i) To the extent available, to the appropriate portion of the 15 [Internet site] WEBSITE of each health maintenance organization licensed in this State which will allow the public to ascertain the names of the physicians affiliated with the 16 17 health maintenance organization; and 18 To the appropriate portion of the [Internet site] WEBSITE of the (ii) 19 American Medical Association; 20 [(2)] (3) Include a statement on each licensee's profile of information to 21be taken into consideration by a consumer when viewing a licensee's profile, including 22factors to consider when evaluating a licensee's malpractice data, and a disclaimer stating 23 that a charging document does not indicate a final finding of guilt by a disciplinary panel; 24and Provide on the Board's [Internet site] WEBSITE: 25[(3)] **(4)** 26 Notification that a person may contact the Board by telephone, 27 electronic mail, or written request to find out whether the number of medical malpractice 28 settlements involving a particular licensee totals three or more with a settlement amount 29 of \$150,000 or greater within the most recent 5-year period as reported to the Board; and 30 A telephone number, electronic mail address, and physical address through which a person may contact the Board to request the information required 31 32 to be provided under item (i) of this item.

33

(d)

The Board:

- 1 (1) On receipt of a written request for a licensee's profile from any person, shall forward a written copy of the profile to the person;
- 3 (2) Shall maintain a website that serves as a single point of entry where 4 all physician **AND ALLIED HEALTH PROFESSIONAL** profile information is available to the 5 public on the Internet; and
- 6 (3) On receipt of a verbal, electronic, or written request in accordance with subsection [(c)(3)] (C)(4) of this section, shall provide the information within 2 business days of the request.
- 9 14-413.
- 10 **(A)** A person may not make any false statement, report, or representation to the 11 Board or a disciplinary panel.
- 12 **(B) (1)** A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 15 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 17 14–416.
- 18 (a) Each court shall report to the Board each conviction of or entry of a plea of guilty or nolo contendere by a [physician] LICENSEE for any crime involving moral turpitude.
- 21 **14–417.**
- 22 (A) (1) EACH LICENSEE SHALL NOTIFY THE SECRETARY OF THE BOARD 23 IN WRITING OF ANY CHANGE IN THE LICENSEE'S NAME OR ADDRESS WITHIN 60 DAYS 24 AFTER THE CHANGE.
- 25 (2) If A LICENSEE FAILS TO NOTIFY THE SECRETARY OF THE BOARD WITHIN THE TIME REQUIRED UNDER THIS SECTION, THE LICENSEE IS SUBJECT TO AN ADMINISTRATIVE PENALTY OF \$100.
- 28 (B) A DISCIPLINARY PANEL MAY IMPOSE A CIVIL PENALTY OF UP TO \$100
  29 PER CONTINUING MEDICAL EDUCATION CREDIT IN LIEU OF A SANCTION FOR A FIRST
  30 OFFENSE FOR THE FAILURE OF A LICENSEE TO OBTAIN THE CONTINUING MEDICAL
  31 EDUCATION CREDITS REQUIRED BY THE BOARD.

1	14–503.					
2 3	(c) (1) this section.	The	Board shall adopt rules and regulations to delineate the scope of			
4 5 6	(2) Before it adopts any rule or regulation under this section, the Boar shall invite and consider proposals from any individual or health group that could be affected by the rule or regulation.					
7 8	` '	-	otherwise provided in this section, an individual may perform icense TO PRACTICE MEDICINE only if the duties:			
9	(1)	Do n	ot include:			
10		(i)	Computerized or noncomputerized tomography;			
11		(ii)	Fluoroscopy;			
12		(iii)	Invasive radiology;			
13		(iv)	Mammography;			
14		(v)	Nuclear medicine;			
15		(vi)	Radiation therapy; or			
16		(vii)	Xerography;			
17	(2)	Are l	imited to X-ray procedures of the:			
18		(i)	Chest, anterior–posterior and lateral;			
19		(ii)	Spine, anterior–posterior and lateral; or			
20 21	head; and	(iii)	Extremities, anterior-posterior and lateral, not including the			
22	(3)	Are p	performed:			
23 24	X–ray duties;	(i)	By an individual who is not employed primarily to perform			
25 26	and	(ii)	In the medical office of the physician who delegates the duties;			
27		(iii)	1. By an individual who, before October 1, 2002, has:			

- A. Taken a course consisting of at least 30 hours of training in performing X-ray procedures approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; and
- B. Successfully passed an examination based on that course that has been approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; or
- 2. By a licensed physician assistant who has completed a course that includes anterior—posterior and lateral radiographic studies of extremities on at least 20 separate patients under the direct supervision of the delegating physician or radiologist using a mini C—arm or similar low—level radiation machine to perform nonfluoroscopic X—ray procedures, if the duties:
- 12 A. Include only the X–ray procedures described in paragraph 13 (2)(iii) of this subsection; and
- B. Are performed pursuant to a Board-approved delegation agreement that includes a request to perform advanced duties under [§ 15–302(c)(2)] § 14–5H–08(C)(2) of this [article] TITLE.
- 17 **14–504.**
- 18 (A) TO QUALIFY FOR A LICENSE TO PRACTICE MEDICINE AS A PHYSICIAN IN 19 THE STATE, AN APPLICANT SHALL BE AN INDIVIDUAL WHO MEETS THE 20 REQUIREMENTS OF § 14–301 OF THIS TITLE AND THIS SECTION.
- 21 **(B)** EXCEPT AS PROVIDED IN § 14–505 OF THIS SUBTITLE, THE APPLICANT 22 SHALL:
- 23 (1) (I) HAVE A DEGREE OF DOCTOR OF MEDICINE FROM A 24 MEDICAL SCHOOL THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION THAT 25 THE BOARD RECOGNIZES IN ITS REGULATIONS; AND
- 26 (II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF
  27 SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL
  28 TRAINING PROGRAM THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION
  29 THAT THE BOARD RECOGNIZES IN ITS REGULATIONS; OR
- 30 (2) (I) HAVE A DEGREE OF DOCTOR OF OSTEOPATHY FROM A
  31 SCHOOL OF OSTEOPATHY IN THE UNITED STATES, ITS TERRITORIES OR
  32 POSSESSIONS, PUERTO RICO, OR CANADA THAT HAS STANDARDS FOR GRADUATION
  33 EQUIVALENT TO THOSE ESTABLISHED BY THE AMERICAN OSTEOPATHIC
  34 ASSOCIATION; AND

1	(II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF
$\overline{2}$	SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL
3	TRAINING PROGRAM ACCREDITED BY AN ACCREDITING ORGANIZATION THAT THE
4	BOARD RECOGNIZES IN ITS REGULATIONS.
<b>T</b>	DOALD RECOGNIZES IN 115 REGULATIONS.
5	(C) IF AN EXAMINATION IS REQUIRED FOR A LICENSE TO PRACTICE
6	MEDICINE, AN OTHERWISE QUALIFIED APPLICANT WHO PASSES THE EXAMINATION
7	AFTER HAVING FAILED THE EXAMINATION OR ANY PART OF THE EXAMINATION
8	THREE OR MORE TIMES MAY QUALIFY FOR A LICENSE ONLY IF THE APPLICANT:
Ü	
9	(1) HAS SUCCESSFULLY COMPLETED 2 OR MORE YEARS OF A
0	RESIDENCY OR FELLOWSHIP ACCREDITED BY THE ACCREDITATION COUNCIL ON
1	GRADUATE MEDICAL EDUCATION OR THE AMERICAN OSTEOPATHIC ASSOCIATION
2	(2) (I) HAS A MINIMUM OF 5 YEARS OF CLINICAL PRACTICE OF
13	MEDICINE:
4	1. IN THE UNITED STATES OR IN CANADA;
15	2. WITH AT LEAST 3 OF THE 5 YEARS HAVING OCCURRED
6	WITHIN 5 YEARS OF THE DATE OF THE APPLICATION; AND
7	3. That occurred under a full unrestricted
8	LICENSE TO PRACTICE MEDICINE; AND
9	(II) HAS NO DISCIPLINARY ACTION PENDING AND HAS HAD NO
20	DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT THAT WOULD BE GROUNDS
21	FOR DISCIPLINE UNDER § 14-515 OF THIS SUBTITLE; OR
22	(3) IS BOARD CERTIFIED.
23	(D) (1) THE BOARD SHALL LICENSE AN APPLICANT TO PRACTICE
24	MEDICINE IF:
25	(I) THE APPLICANT:
-	
06	1 RECAME I ICENSED OF CERTIFIED AS A DUVSICIAN IN

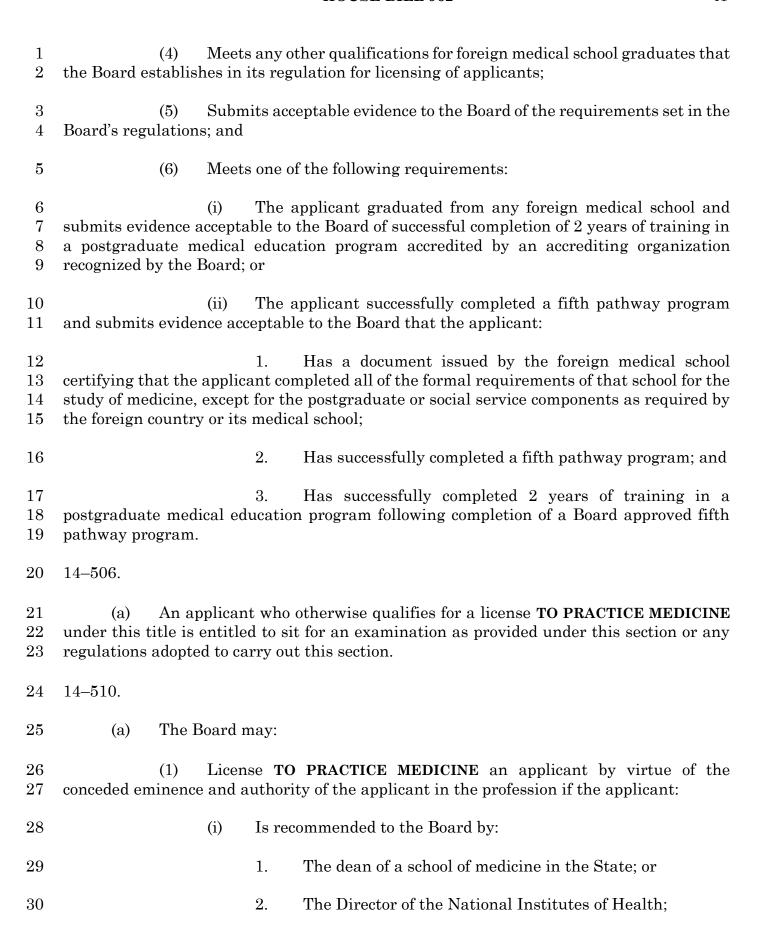
ANOTHER JURISDICTION UNDER REQUIREMENTS THAT THE BOARD DETERMINES ARE SUBSTANTIALLY EQUIVALENT TO THE LICENSING REQUIREMENTS OF THIS

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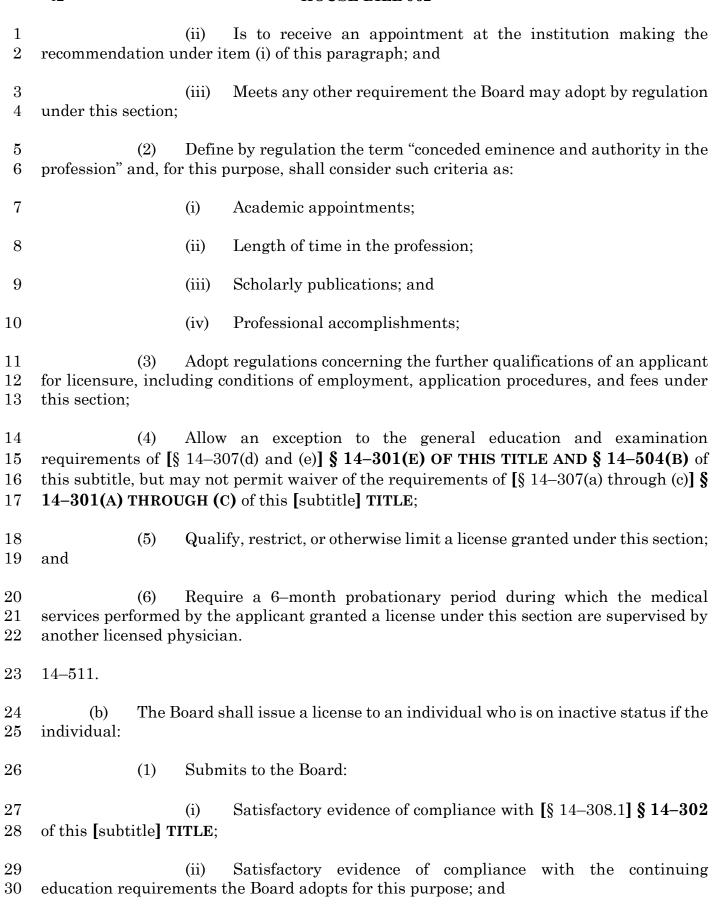
28 29

TITLE;

- 1 2. IS IN GOOD STANDING UNDER THE LAWS OF THE 2 OTHER JURISDICTION;
- 3. SUBMITS AN APPLICATION TO THE BOARD ON A FORM
  4 THAT THE BOARD REQUIRES; AND
- 5 4. Pays to the Board an application fee set by 6 the Board; and
- 7 (II) THE JURISDICTION IN WHICH THE APPLICANT IS LICENSED 8 OR CERTIFIED OFFERS A SIMILAR RECIPROCAL LICENSING PROCESS FOR 9 INDIVIDUALS LICENSED TO PRACTICE MEDICINE BY THE BOARD.
- 10 **(2)** The Board shall adopt regulations to implement this 11 subsection.
- 12 **(E) (1)** IN ESTABLISHING ANY CONTINUING EDUCATION REQUIREMENTS
  13 FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL EVALUATE EXISTING
  14 METHODS, DEVICES, AND PROGRAMS IN USE AMONG THE VARIOUS MEDICAL
  15 SPECIALTIES AND OTHER RECOGNIZED MEDICAL GROUPS.
- 16 (2) THE BOARD SHALL ADOPT REGULATIONS THAT ALLOW A
  17 LICENSEE SEEKING RENEWAL TO RECEIVE UP TO FIVE CONTINUING EDUCATION
  18 CREDITS PER RENEWAL PERIOD FOR PROVIDING UNCOMPENSATED, VOLUNTARY
  19 MEDICAL SERVICES DURING EACH RENEWAL PERIOD.
- 20 (3) THE BOARD MAY NOT ESTABLISH OR ENFORCE THESE 21 REQUIREMENTS IF THEY WOULD SO REDUCE THE NUMBER OF PHYSICIANS IN A 22 COMMUNITY AS TO JEOPARDIZE THE AVAILABILITY OF ADEQUATE MEDICAL CARE IN 23 THAT COMMUNITY.
- 24 14-505.
- 25 (b) An applicant for a license **TO PRACTICE MEDICINE** is exempt from the educational requirements of [§ 14–307] § 14–301 OF THIS TITLE AND § 14–504 of this subtitle, if the applicant:
- 28 (1) Has studied medicine at a foreign medical school;
- 29 (2) Is certified by the Educational Commission for Foreign Medical 30 Graduates or by its successor as approved by the Board;
- 31 (3) Passes a qualifying examination for foreign medical school graduates 32 required by the Board;



(iii)



A reinstatement fee set by the Board; and

- 1 (2) Is otherwise entitled to be licensed.
- 2 14-513.
- 3 (C) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS GUILTY
- 4 OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING
- 5 **\$500**.
- 6 (D) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 7 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 8 **14–514**.
- 9 (A) IF AN ALLEGATION OF GROUNDS FOR DISCIPLINARY OR OTHER ACTION
- 10 IS MADE BY A PATIENT OR A FAMILY MEMBER OF A PATIENT BASED ON §
- 11 14-515(A)(22) OF THIS SUBTITLE AND A FULL INVESTIGATION RESULTS FROM THAT
- 12 ALLEGATION, THE FULL INVESTIGATION SHALL INCLUDE AN OFFER OF AN
- 13 INTERVIEW WITH THE PATIENT OR A FAMILY MEMBER OF THE PATIENT WHO WAS
- 14 PRESENT AT OR ABOUT THE TIME THAT THE INCIDENT THAT GAVE RISE TO THE
- 15 ALLEGATION OCCURRED.
- 16 (B) (1) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBSECTION, AFTER
- 17 BEING ASSIGNED A COMPLAINT UNDER § 14-401.1 OF THIS TITLE, THE
- 18 **DISCIPLINARY PANEL MAY:**
- 19 (I) REFER AN ALLEGATION FOR FURTHER INVESTIGATION TO
- 20 THE ENTITY THAT HAS CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF
- 21 THIS SECTION; OR
- 22 (II) TAKE ANY APPROPRIATE AND IMMEDIATE ACTION AS
- 23 NECESSARY.
- 24 (2) (I) IF, AFTER BEING ASSIGNED A COMPLAINT AND
- 25 COMPLETING THE PRELIMINARY INVESTIGATION, THE DISCIPLINARY PANEL FINDS
- 26 THAT THE LICENSEE MAY HAVE VIOLATED § 14–515(A)(22) OF THIS SUBTITLE, THE
- 27 DISCIPLINARY PANEL SHALL REFER THE ALLEGATION TO THE ENTITY OR ENTITIES
- 28 THAT HAVE CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF THIS
- 29 SECTION FOR FURTHER INVESTIGATION AND PHYSICIAN PEER REVIEW WITHIN THE
- 30 INVOLVED MEDICAL SPECIALTY OR SPECIALTIES.
- 31 (II) A DISCIPLINARY PANEL SHALL OBTAIN TWO PEER REVIEW
- 32 REPORTS FROM THE ENTITY OR INDIVIDUAL WITH WHOM THE BOARD CONTRACTED

- 1 UNDER SUBSECTION (D) OF THIS SECTION FOR EACH ALLEGATION THE
- 2 DISCIPLINARY PANEL REFERS FOR PEER REVIEW.
- 3 (3) IF, AFTER BEING ASSIGNED A COMPLAINT, THE DISCIPLINARY
- 4 PANEL DETERMINES THAT AN ALLEGATION INVOLVING FEES FOR PROFESSIONAL OR
- 5 ANCILLARY SERVICES DOES NOT CONSTITUTE GROUNDS FOR DISCIPLINARY OR
- 6 OTHER ACTION, THE DISCIPLINARY PANEL SHALL OFFER THE COMPLAINANT AND
- 7 THE LICENSEE AN OPPORTUNITY TO MEDIATE THE DISPUTE.
- 8 (C) COUNTY MEDICAL SOCIETIES SHALL REFER TO THE BOARD ALL
- 9 COMPLAINTS THAT SET FORTH ALLEGATIONS OF GROUNDS FOR DISCIPLINARY
- 10 ACTION UNDER § 14–515 OF THIS SUBTITLE.
- 11 (D) (1) IN ACCORDANCE WITH § 14–401.1(C) OF THIS TITLE, THE BOARD
- 12 SHALL ENTER INTO A WRITTEN CONTRACT WITH AN ENTITY OR INDIVIDUAL FOR
- 13 CONFIDENTIAL PHYSICIAN PEER REVIEW OF ALLEGATIONS BASED ON §
- 14 **14–515(A)(22)** OF THIS SUBTITLE.
- 15 (2) A PEER REVIEWER SHALL:
- 16 (I) BE BOARD CERTIFIED;
- 17 (II) HAVE SPECIAL QUALIFICATIONS TO JUDGE THE MATTER AT
- 18 **HAND**;
- 19 (III) HAVE RECEIVED A SPECIFIED AMOUNT OF MEDICAL
- 20 EXPERIENCE AND TRAINING;
- 21 (IV) HAVE NO FORMAL ACTIONS AGAINST THE PEER REVIEWER'S
- 22 OWN LICENSE;
- 23 (V) RECEIVE TRAINING IN PEER REVIEW;
- 24 (VI) HAVE A STANDARD FORMAT FOR PEER REVIEW REPORTS;
- 25 AND
- 26 (VII) TO THE EXTENT PRACTICABLE, BE LICENSED AND ENGAGED
- 27 IN THE PRACTICE OF MEDICINE IN THE STATE.
- 28 (3) THE BOARD MAY CONSULT WITH THE APPROPRIATE SPECIALTY
- 29 HEALTH CARE PROVIDER SOCIETIES IN THE STATE TO OBTAIN A LIST OF PHYSICIANS
- 30 QUALIFIED TO PROVIDE PEER REVIEW SERVICES.

1	14–515.					
2 3 4 5	(a) Subject to the hearing provisions of § 14–405 of this [subtitle] TITLE, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:					
6 7	(1) Fraudulently or deceptively obtains or attempts to obtain a license for the applicant or licensee or for another;					
8	(2) Fraudulently or deceptively uses a license;					
9	(3) Is guilty of:					
0	(i) Immoral conduct in the practice of medicine; or					
1	(ii) Unprofessional conduct in the practice of medicine;					
2	(4) Is professionally, physically, or mentally incompetent;					
13	(5) Solicits or advertises in violation of [§ 14–503] <b>§ 14–513</b> of this [title] <b>SUBTITLE</b> ;					
15	(6) Abandons a patient;					
6	(7) Habitually is intoxicated;					
17 18	(8) Is addicted to, or habitually abuses, any narcotic or controlled dangerous substance as defined in § 5–101 of the Criminal Law Article;					
9	(9) Provides professional services:					
20	(i) While under the influence of alcohol; or					
21 22 23	(ii) While using any narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law Article, or other drug that is in excess of therapeutic amounts or without valid medical indication;					
24 25	(10) Promotes the sale of drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;					
26 27	(11) Willfully makes or files a false report or record in the practice of medicine;					

Willfully fails to file or record any medical report as required under law,

willfully impedes or obstructs the filing or recording of the report, or induces another to fail

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to file or record the report;

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- (13)On proper request, and in accordance with the provisions of Title 4, 1 2 Subtitle 3 of the Health – General Article, fails to provide details of a patient's medical 3 record to the patient, another physician, or hospital; 4 Solicits professional patronage through an agent or other person or 5 profits from the acts of a person who is represented as an agent of the physician; 6 Pays or agrees to pay any sum to any person for bringing or referring a 7 patient or accepts or agrees to accept any sum from any person for bringing or referring a 8 patient:
- 9 (16) Agrees with a clinical or bioanalytical laboratory to make payments to 10 the laboratory for a test or test series for a patient, unless the licensed physician discloses 11 on the bill to the patient or third—party payor:
- 12 (i) The name of the laboratory;
- 13 (ii) The amount paid to the laboratory for the test or test series; and
- 14 (iii) The amount of procurement or processing charge of the licensed 15 physician, if any, for each specimen taken;
- 16 (17) Makes a willful misrepresentation in treatment;
- 17 (18) Practices medicine with an unauthorized person or aids an 18 unauthorized person in the practice of medicine;
- 19 (19) Grossly overutilizes health care services;
- 20 (20) Offers, undertakes, or agrees to cure or treat disease by a secret 21 method, treatment, or medicine;
- (21) Is disciplined by a licensing or disciplinary authority or convicted or disciplined by a court of any state or country or disciplined by any branch of the United States uniformed services or the Veterans' Administration for an act that would be grounds for disciplinary action under this section;
  - (22) Fails to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in this State;
- 29 (23) Willfully submits false statements to collect fees for which services are 30 not provided;

- 1 Was subject to investigation or disciplinary action by a licensing or 2 disciplinary authority or by a court of any state or country for an act that would be grounds 3 for disciplinary action under this section and the licensee: 4 (i) Surrendered the license issued by the state or country to the 5 state or country; or 6 Allowed the license issued by the state or country to expire or (ii) 7 lapse; 8 (25)Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article; 9 10 Fails to educate a patient being treated for breast cancer of alternative 11 methods of treatment as required by § 20–113 of the Health – General Article; 12 (27)Sells, prescribes, gives away, or administers drugs for illegal or 13 illegitimate medical purposes; 14 (28)Fails to comply with the provisions of § 12–102 of this article; 15 Refuses, withholds from, denies, or discriminates against an individual 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 18 Except as to an association that has remained in continuous existence 19 since July 1, 1963: 20 Associates with a pharmacist as a partner or co-owner of a 21pharmacy for the purpose of operating a pharmacy; 22(ii) Employs a pharmacist for the purpose of operating a pharmacy; 23or 24 (iii) Contracts with a pharmacist for the purpose of operating a 25pharmacy; 26 Except in an emergency life-threatening situation where it is not 27 feasible or practicable, fails to comply with the Centers for Disease Control and Prevention's guidelines on universal precautions: 28 29 Fails to display the notice required under [§ 14–415] § 14–519 of this (32)30 subtitle;
- 31 (33) Fails to cooperate with a lawful investigation conducted by the Board 32 or a disciplinary panel;

- 1 Is convicted of insurance fraud as defined in § 27–801 of the Insurance (34)2 Article; 3 Is in breach of a service obligation resulting from the applicant's or licensee's receipt of State or federal funding for the licensee's medical education; 4 5 Willfully makes a false representation when seeking or making 6 application for licensure or any other application related to the practice of medicine; 7 By corrupt means, threats, or force, intimidates or influences, or 8 attempts to intimidate or influence, for the purpose of causing any person to withhold or 9 change testimony in hearings or proceedings before the Board or a disciplinary panel or 10 those otherwise delegated to the Office of Administrative Hearings; 11 By corrupt means, threats, or force, hinders, prevents, or otherwise 12 delays any person from making information available to the Board or a disciplinary panel 13 in furtherance of any investigation of the Board or a disciplinary panel; 14 Intentionally misrepresents credentials for the purpose of testifying or 15 rendering an expert opinion in hearings or proceedings before the Board or a disciplinary panel or those otherwise delegated to the Office of Administrative Hearings; 16 17 (40)Fails to keep adequate medical records as determined by appropriate 18 peer review; 19 Performs a cosmetic surgical procedure in an office or a facility that is (41)20 not: Accredited by: 21(i) 221. The American Association for Accreditation of Ambulatory Surgical Facilities; 23 242. The Accreditation Association for Ambulatory Health 25Care; or The Joint Commission on the Accreditation of Healthcare 26 3. 27 Organizations; or 28 Certified to participate in the Medicare program, as enacted by (ii) 29 Title XVIII of the Social Security Act;
- 30 (42) Fails to complete a criminal history records check under [§ 14–308.1] § 31 **14–302** of this title;

- 1 (43) Except for the licensure process described under Subtitle 3A of this title, 2 violates any provision of this title, any rule or regulation adopted by the Board, or any State 3 or federal law pertaining to the practice of medicine;
- 4 (44) Fails to meet the qualifications for licensure under THIS SUBTITLE 5 AND Subtitle 3 of this title;
- 6 (45) Fails to comply with § 1–223 of this article; or
- 7 (46) Fails to comply with the requirements of the Prescription Drug 8 Monitoring Program under Title 21, Subtitle 2A of the Health General Article.
- 9 14-516.
- 10 THE PUBLIC INDIVIDUAL PROFILE FOR A LICENSED PHYSICIAN CREATED AND
- 11 MAINTAINED UNDER § 14–411.1 OF THIS TITLE SHALL INCLUDE, AS REPORTED TO
- 12 THE BOARD BY THE LICENSEE, EDUCATION AND PRACTICE INFORMATION ABOUT
- 13 THE LICENSEE INCLUDING:
- 14 (1) THE NAME OF ANY MEDICAL SCHOOL THAT THE LICENSEE
- 15 ATTENDED AND THE DATE ON WHICH THE LICENSEE GRADUATED FROM THE
- 16 SCHOOL;
- 17 (2) A DESCRIPTION OF ANY INTERNSHIP AND RESIDENCY TRAINING;
- 18 (3) A DESCRIPTION OF ANY SPECIALTY BOARD CERTIFICATION BY A
- 19 RECOGNIZED BOARD OF THE AMERICAN BOARD OF MEDICAL SPECIALTIES OR THE
- 20 AMERICAN OSTEOPATHIC ASSOCIATION:
- 21 (4) THE NAME OF ANY HOSPITAL WHERE THE LICENSEE HAS MEDICAL
- 22 PRIVILEGES:
- 23 (5) THE LOCATION OF THE LICENSEE'S PRIMARY PRACTICE SETTING;
- 24 (6) WHETHER THE LICENSEE PARTICIPATES IN THE MARYLAND
- 25 MEDICAL ASSISTANCE PROGRAM;
- 26 (7) WHETHER THE LICENSEE MAINTAINS MEDICAL PROFESSIONAL
- 27 LIABILITY INSURANCE; AND
- 28 (8) THE NUMBER OF MEDICAL MALPRACTICE FINAL COURT
- 29 JUDGMENTS AND ARBITRATION AWARDS AGAINST THE LICENSEE WITHIN THE MOST
- 30 RECENT 10-YEAR PERIOD.

1 14-517.

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- 2 (a) (1) Each hospital and related institution shall submit to the Board a report 3 within 10 days after:
  - (i) The hospital or related institution denied the application of a physician for staff privileges or limited, reduced, otherwise changed, or terminated the staff privileges of a physician, or the physician resigned whether or not under formal accusation, if the denial, limitation, reduction, change, termination, or resignation is for reasons that might be grounds for disciplinary action under [§ 14–404] § 14–515 of this subtitle;
- 9 (ii) The hospital or related institution took any disciplinary action against a salaried, licensed physician without staff privileges, including termination of employment, suspension, or probation, for reasons that might be grounds for disciplinary action under [§ 14–404] § 14–515 of this subtitle:
- 13 (iii) A licensed physician voluntarily resigned from the staff, employ, 14 or training program of the hospital or related institution for reasons that might be grounds 15 for disciplinary action under [§ 14–404] § 14–515 of this subtitle; or
- 16 (iv) The hospital or related institution placed any other restrictions 17 or conditions on any of the licensed physicians as listed in items (i) through (iii) of this 18 paragraph for any reasons that might be grounds for disciplinary action under [§ 14–404] 19 **§ 14–515** of this subtitle.
- 20 14-518.
- 21 (a) (1) Each alternative health system as defined in § 1–401 of this article shall 22 submit to the Board a report within 10 days after:
- 23 (i) The alternative health system denied the formal application of a physician to contract with the alternative health system or limited, reduced, otherwise changed, or terminated the contract of a physician, or the physician resigned whether or not under formal accusation, if the denial, limitation, reduction, change, termination, or resignation is for reasons that might be grounds for disciplinary action under [§ 14–404] § 14–515 of this subtitle; or
- 29 (ii) The alternative health system placed any other restrictions or 30 conditions on any licensed physician for any reasons that might be grounds for disciplinary 31 action under [§ 14–404] § 14–515 of this subtitle.
- 32 14-521.
- 33 (C) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS 34 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT 35 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.

- 1 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 2 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 3 14-524.
- 4 (B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS 5 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT 6 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 7 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 8 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 9 [(b)] (C) (1) The Board shall investigate any alleged violation of this section or [§ 14–507] § 14–523 of this [title] SUBTITLE and may enforce any provision of this title by injunction or other appropriate proceedings.
- [(c)] (2) An action under this [section] SUBSECTION is in addition to and not instead of criminal prosecution under [§ 14–606 of this subtitle] SUBSECTION (B) OF THIS SECTION.
- 15 14-525.
- 16 (D) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS
  17 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT
  18 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 19 (2) A PERSON WHO IS REQUIRED TO GIVE NOTICE UNDER THIS 20 SECTION, AND WHO FAILS TO GIVE THE REQUIRED NOTICE, IS LIABLE FOR A CIVIL PENALTY OF NOT MORE THAN \$100.
- 22 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 23 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 24 14-527.
- 25 **(A)** Except as otherwise provided in this title, a person may not practice, attempt 26 to practice, or offer to practice medicine in this State unless licensed by the Board.
- 27 (B) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A PERSON WHO VIOLATES THIS SECTION IS:

- 1 (I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A
  2 FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR
  3 BOTH; AND
- 4 (II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO 5 BE LEVIED BY A DISCIPLINARY PANEL.
- 6 (2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO
  7 NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER
  8 § 14–306 OF THIS TITLE IF:
- 9 (I) LESS THAN **60** DAYS HAVE ELAPSED SINCE THE EXPIRATION 10 OF THE LICENSE; AND
- 11 (II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE 12 REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.
- 13 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 15 14-528.
- 16 (c) An unlicensed individual who acts under [§ 14–302 or § 14–306] **§ 14–502 OR**17 **§ 14–503** of this [title] **SUBTITLE** may use the word "physician" together with another
  18 word to describe the occupation of the individual as in phrases such as "physician's
  19 assistant" or "physician's aide".
- 20 **(D) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A** 21 **PERSON WHO VIOLATES THIS SECTION IS:**
- 22 (I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A
  23 FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR
  24 BOTH; AND
- 25 (II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO 26 BE LEVIED BY A DISCIPLINARY PANEL.
- 27 (2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO
  28 NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER
  29 § 14–306 OF THIS TITLE IF:
- 30 (I) Less than 60 days have elapsed since the expiration  $31\,$  of the license; and

- 1 (II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE 2 REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.
- 3 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 4 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 5 14-5A-01.
- 6 (a) In this subtitle the following words have the meanings indicated.
- 7 (c) "Committee" means the Respiratory Care [Professional Standards] 8 **ADVISORY** Committee established under § 14–5A–05 of this subtitle.
- 9 14-5A-05.
- There is a Respiratory Care [Professional Standards] **ADVISORY** Committee within the Board.
- 12 14–5A–06.
- 13 (E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.
- 14 14-5A-09.
- 15 **(**(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.
- 17 (b) The applicant shall be of good moral character.
- 18 (c) The applicant shall be at least 18 years old.
- 19 (d) The applicant] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE 20 REQUIREMENTS UNDER § 14–301 OF THIS TITLE, AN APPLICANT shall [:
- 21 (1) Meet] MEET any educational, training, or examination requirements 22 established by the Board including:
- 23 **[(i)] (1)** Graduation from an appropriate educational program as 24 determined by the Board; and
- [(ii)] (2) Certification by a national certifying board approved by the Board[; and
- 27 (2) Demonstrate oral and written competency in English as required by the 28 Board.

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to file or record a report;

1 The applicant shall complete a criminal history records check in accordance (e) 2 with 14-308.1 of this title. 3 14-5A-17. 4 Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, (a) on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a 5 license to any applicant, reprimand any licensee, place any licensee on probation, or 6 suspend or revoke a license, if the [applicant or] licensee: 7 8 Fraudulently or deceptively obtains or attempts to obtain a license for 9 the applicant, licensee, or for another; 10 (2) Fraudulently or deceptively uses a license: 11 (3)Is guilty of unprofessional or immoral conduct in the practice of 12 respiratory care; Is professionally, physically, or mentally incompetent; 13 (4) 14 Abandons a patient; (5)Is habitually intoxicated; 15 (6) 16 Is addicted to or habitually abuses any narcotic or controlled dangerous substance as defined in § 5–101 of the Criminal Law Article; 17 18 (8)Provides professional services while: Under the influence of alcohol: or 19 (i) 20 Using any narcotic or controlled dangerous substance as defined 21in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic 22amounts or without valid medical indication: 23 Promotes the sale of services, drugs, devices, appliances, or goods to a 24patient so as to exploit the patient for financial gain; 25(10)Willfully makes or files a false report or record in the practice of 26 respiratory care;

Willfully fails to file or record any report as required under law,

willfully impedes or obstructs the filing or recording of a report, or induces another to fail

(12) Breaches patient confidentiality;

1 Pays or agrees to pay any sum or provide any form of remuneration or 2 material benefit to any person for bringing or referring a patient or accepts or agrees to accept any sum or any form of remuneration or material benefit from an individual for 3 4 bringing or referring a patient; 5 (14)Knowingly makes a misrepresentation while practicing respiratory 6 care; 7 Knowingly practices respiratory care with an unauthorized individual 8 or aids an unauthorized individual in the practice of respiratory care; 9 (16)Offers, undertakes, or agrees to cure or treat disease by a secret 10 method, treatment, or medicine; 11 Is disciplined by a licensing or disciplinary authority or is convicted or disciplined by a court of any state or country or is disciplined by any branch of the United 12 13 States uniformed services or the Veterans' Administration for an act that would be grounds 14 for disciplinary action under the Board's disciplinary statutes; 15 Fails to meet appropriate standards for the delivery of respiratory care performed in any inpatient or outpatient facility, office, hospital or related institution, 16 17 domiciliary care facility, patient's home, or any other location in this State; 18 (19)Knowingly submits false statements to collect fees for which services 19 are not provided; 20 (20)(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: 241. Surrendered the license issued by the state or country; or 252. Allowed the license issued by the state or country to expire 26or lapse; 27 Knowingly fails to report suspected child abuse in violation of § 5–704 (21)28 of the Family Law Article; 29 Sells, prescribes, gives away, or administers drugs for illegal or 30 illegitimate medical purposes; 31 (23)Practices or attempts to practice beyond the authorized scope of

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practice;

- 1 (24) 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 (25) Practices or attempts to practice a respiratory care procedure or uses or 5 attempts to use respiratory care 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 (26) Fails to cooperate with a lawful investigation conducted by the Board 8 or a disciplinary panel;
- 9 (27) Fails to practice under the supervision of a physician or violates a 10 supervisory order of a supervising physician; or
- 11 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 12 **14–302** of this title.
- 13 14-5B-05.
- 14 (F) A QUORUM OF THE COMMITTEE CONSISTS OF FIVE MEMBERS.
- 15 14-5B-07.
- 16 (a) (2) The failure of a licensed physician to properly supervise a licensee is unprofessional conduct in the practice of medicine under [§ 14–404(a)(3)] § 14–515(A)(3) 18 of this title.
- 19 14–5B–09.
- 20 (a) [To qualify for a license, an applicant shall be an individual who meets the 21 requirements of this section.
- 22 (b)] Except as provided in subsection [(c)] (B) of this section, [the] TO QUALIFY 23 FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS 24 TITLE, AN applicant shall [:
- 25 (1) Be of good moral character;
- 26 (2) Be at least 18 years old;
- 27 (3) Demonstrate oral and written competency in English as required by the 28 Board;
- 29 (4) Meet] MEET any educational, training, or examination requirements 30 established by the Board, including:

- 1 **[(i)] (1)** Graduation from an appropriate educational program as 2 determined by the Board; and
- 3 [(ii)] (2) Certification[; and
- 4 (5) Complete a criminal history records check in accordance with § 5 14–308.1 of this title].
- 6 **[(c)] (B)** To qualify for a license to practice as a radiologist assistant, an applicant shall:
- 8 (1) Be issued a general license to perform radiography;
- 9 (2) Complete an advanced academic program with a nationally recognized 10 radiology curriculum that results in a baccalaureate degree, post baccalaureate certificate, 11 or graduate degree and incorporates a radiologist—directed clinical preceptorship;
- 12 (3) Be certified in advanced cardiac life support; and
- 13 (4) Be certified as a radiologist assistant by the American Registry of Radiologic Technologists.
- [(d)] (C) Except for requirements adopted by the Board for license renewal under [§ 14–5B–12 of this subtitle] § 14–306 OF THIS TITLE, nothing in this subtitle may be construed to require an individual who is certified by the Board as a radiation oncology/therapy technologist, medical radiation technologist, or nuclear medicine technologist as of October 1, 2008, to meet additional education, training, or examination requirements.
- 21 14–5B–11.
- 22 (a) Licensure as a radiation therapist authorizes an individual to practice 23 radiation therapy IN THE STATE while the license is effective.
- 24 (b) Licensure as a radiographer authorizes an individual to practice radiography 25 IN THE STATE while the license is effective.
- 26 (c) Licensure as a nuclear medicine technologist authorizes an individual to practice nuclear medicine technology IN THE STATE while the license is effective.
- 28 (d) Licensure as a radiologist assistant authorizes an individual to practice 29 radiology assistance IN THE STATE while the license is effective.
- 30 14–5B–14.

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1 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: (1) 5 Fraudulently or deceptively obtains or attempts to obtain a license for 6 the applicant, licensed individual, 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 radiation therapy, radiography, nuclear medicine technology, or radiology assistance; 10 Is professionally, physically, or mentally incompetent; (4) 11 Abandons a patient; (5)12 (6) Is habitually intoxicated; Is addicted to or habitually abuses any narcotic or controlled dangerous 13 (7)substance as defined in § 5–101 of the Criminal Law Article; 14 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 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic 18 19 amounts or without valid medical indication; 20 Promotes the sale of services, drugs, devices, appliances, or goods to a 21patient so as to exploit the patient for financial gain; 22Willfully makes or files a false report or record in the practice of 23 radiation therapy, radiography, nuclear medicine technology, or radiology assistance; 24Willfully fails to file or record any report as required under law, 25willfully impedes or obstructs the filing or recording of a report, or induces another to fail 26 to file or record a report; (12)27Breaches patient confidentiality; 28(13)Pays or agrees to pay any sum or provide any form of remuneration or

material benefit to any person for bringing or referring a patient or accepts or agrees to accept any sum or any form of remuneration or material benefit from an individual for bringing or referring a patient;

- 1 Knowingly makes a misrepresentation while practicing radiation 2 therapy, radiography, nuclear medicine technology, or radiology assistance; 3 Knowingly practices radiation therapy, radiography, nuclear medicine 4 technology, or radiology assistance with an unauthorized individual or aids an 5 unauthorized individual in the practice of radiation therapy, radiography, nuclear medicine 6 technology, or radiology assistance; 7 (16)Offers, undertakes, or agrees to cure or treat disease by a secret 8 method, treatment, or medicine; Is disciplined by a licensing or disciplinary authority or is convicted or 9 disciplined by a court of any state or country or is disciplined by any branch of the United 10 States uniformed services or the Veterans' Administration for an act that would be grounds 11 12 for disciplinary action under the Board's disciplinary statutes; 13 Fails to meet appropriate standards for the delivery of quality radiation (18)14 therapy, radiography, nuclear medicine technology, or radiology assistance care performed 15 in any outpatient surgical facility, office, hospital or related institution, or any other 16 location in this State: 17 (19)Knowingly submits false statements to collect fees for which services 18 are not provided; 19 Has been subject to investigation or disciplinary action by a (20)20 licensing or disciplinary authority or by a court of any state or country for an act that would 21be grounds for disciplinary action under the Board's disciplinary statutes; and 22 (ii) Has: 231. Surrendered the license issued by the state or country; or 242. Allowed the license issued by the state or country to expire 25or lapse; 26 (21)Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article; 27 28 Sells, prescribes, gives away, or administers drugs for illegal or (22)illegitimate medical purposes; 29 30 Practices or attempts to practice beyond the authorized scope of (23)31 practice;
- 32 (24) Refuses, withholds from, denies, or discriminates against an individual 33 with regard to the provision of professional services for which the licensee is licensed and 34 qualified to render because the individual is HIV positive;

- 1 (25) Practices or attempts to practice a radiation therapy, radiography, 2 nuclear medicine technology, or radiology assistance procedure or uses radiation therapy, 3 radiography, nuclear medicine technology, or radiology assistance equipment if the 4 applicant or licensee has not received education, internship, training, or experience in the 5 performance of the procedure or the use of the equipment;
- 6 (26) Fails to cooperate with a lawful investigation conducted by the Board 7 or a disciplinary panel;
- 8 (27) Fails to practice under the supervision of a physician or violates a supervisory order of a supervising physician; or
- 10 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 11 **14–302** of this title.
- 12 14-5C-01.
- 13 (a) In this subtitle the following words have the meanings indicated.
- 14 (c) "Committee" means the Polysomnography [Professional Standards] 15 **ADVISORY** Committee established under § 14–5C–05 of this subtitle.
- 16 14-5C-05.
- There is a Polysomnography [Professional Standards] **ADVISORY** Committee within the Board.
- 19 14-5C-06.
- 20 (E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.
- 21 14-5C-08.
- 22 (b) This section does not apply to a student enrolled in an education program
- under [§ 14-5C-09(c)(3)] § 14-5C-09(3) of this subtitle while practicing polysomnography
- 24 in that program.
- 25 14-5C-09.
- [(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.
- 28 (b) The applicant shall:
- 29 (1) Be of good moral character;

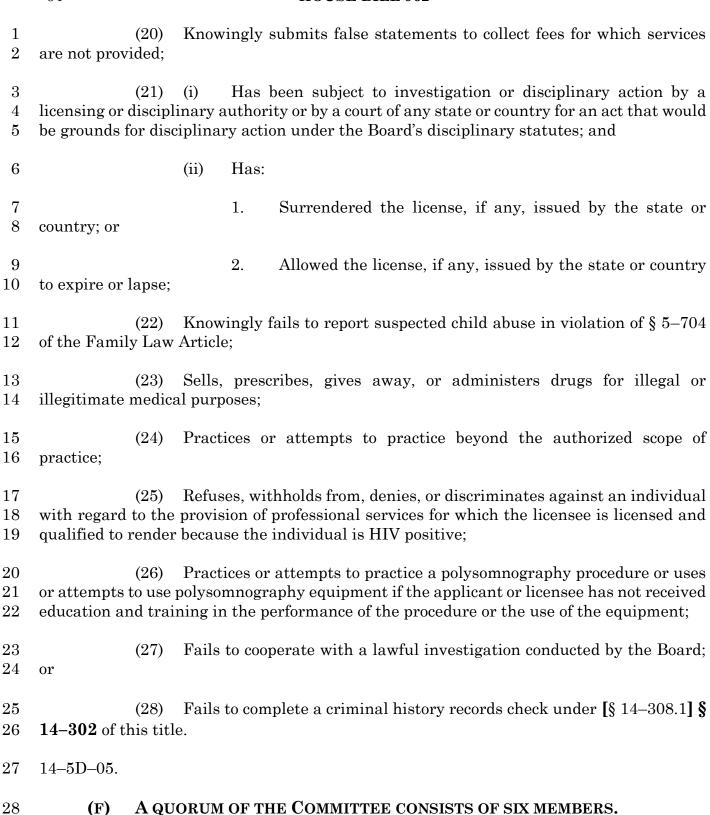
1	(2) Be at least 18 years old; and
2 3	(3) Complete a criminal history records check in accordance with $\S 14-308.1$ of this title.
4 5 6	(c) An] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS SET FORTH IN § 14–301 OF THIS TITLE, AN applicant for a polysomnographic technologist license shall:
7 8 9	(1) Have passed the national certifying examination given by the Board of Registered Polysomnographic Technologists or another examination approved by the Board;
10 11	(2) Submit to the Board proof of certification as a registered polysomnographic technologist or other national certification approved by the Board;
12 13 14	(3) (i) 1. Have graduated from a polysomnographic educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; or
15 16	2. A. Have graduated from a sleep technologist educational program that is accredited by the American Academy of Sleep Medicine; and
17 18	B. Have completed a clinical component of an educational program as established by the Committee and approved by the Board;
19 20 21	(ii) 1. Have graduated from a respiratory care educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; and
22 23 24	2. Have completed the Committee on Accreditation for Respiratory Care's curriculum for a polysomnography certificate that is accredited by the Commission on Accreditation of Allied Health Education Programs; or
25 26 27	(iii) 1. Have graduated from an electroneuro-diagnostic educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; and
28 29 30	2. Have completed additional units, modules, and courses of instruction focused on polysomnographic technology that are accredited by the Commission on Accreditation of Allied Health Education Programs; and
31 32	(4) Meet any other educational or clinical requirements established by the Committee and approved by the Board.

33 14-5C-10.

- 1 [(a)] The Board shall waive the education requirement under [§ 14–5C–09(c)(3)] § 2 14-5C-09(3) of this subtitle if on or before September 30, 2013, an individual: 3 Has passed the national certifying examination by the Board of (1) 4 Registered Polysomnographic Technologists or another examination approved by the Board: 5 6 Is certified by the Board of Registered Polysomnographic Technologists 7 as a registered polysomnographic technologist; 8 (3)Has submitted an application for licensure to the Board; and 9 Meets all of the requirements under [§ 14–5C–09(b) and (c)(1) and (2)] **(4)** § 14-301(B), (C), AND (D) OF THIS TITLE AND § 14-5C-09(1) AND (2) of this subtitle. 10 If an individual has not satisfied the requirements under subsection (a) 11 12 of this section on or before September 30, 2013, the individual may petition the Board for 13 an extension. 14 (2)The Board shall determine whether to grant an extension under this 15 subsection on a case-by-case basis. 16 14-5C-17.17 Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, (a) on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a 18 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 the applicant, licensee, or for another; 2223(2) Fraudulently or deceptively uses a license; 24(3)Is guilty of unprofessional or immoral conduct in the practice of 25polysomnography; Is professionally, physically, or mentally incompetent; 26 (4) 27 Abandons a patient; (5)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;

1		(8)	Provid	les prof	essional	service	es while:				
2			(i)	Under	the influ	aence o	f alcohol;	or			
3 4 5	in § 5–101 or amounts or v		Crimina	al Law	Article o	or any o		_			e as defined therapeutic
6 7	patient so as	(9) to exp						devices,	applia	inces, o	r goods to a
8 9	polysomnogr	(10) aphy;	Willfu	lly mal	kes or f	iles a	false rep	oort or 1	record	in the	practice of
10 11 12	willfully imp		r obstr	•			•	-		-	under law, other to fail
13		(12)	Breacl	hes pati	ient conf	fidentia	lity;				
14 15 16 17	material ben accept any s bringing or r	um or	any p	erson form of	or bring	ing or 1	referring	a patier	nt or a	ccepts	_
18 19	polysomnogr	(14) aphy;	Knowi	ingly	makes	a	misrepi	resentati	on	while	practicing
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22 23	individual;	(16)	Knowi	ingly d	lelegates	s a po	lysomno	graphic	duty	to an	unlicensed
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26 27 28 29	disciplined b States unifor be grounds for	med s	urt of a ervices	ny stat or the	e or cou U.S. Dep	ntry or partmen	is discipant of Vete	lined by erans Aff	any br fairs fo	anch of r an act	
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center;



30 (b) This section does not apply to:

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14-5D-07.

1 An individual employed by the federal government as an athletic (1) 2 trainer while the individual is practicing within the scope of that employment; 3 An individual employed by or under contract with an entity located in 4 another state who represents that entity: 5 (i) At an athletic event in the State; 6 (ii) For a period of time not to exceed 45 days within a calendar year; 7 and providing athletic 8 (iii) By training services to individuals 9 representing the entity at the event; or 10 (3)A student enrolled in an education program that meets the criteria of 11 [§ 14-5D-08(c)(2)] § 14-5D-08(A)(2) of this subtitle while engaged in an unpaid, clinical educational experience of athletic training. 12 13 14-5D-08. 14 (a) To qualify for a license, an applicant shall be an individual who meets the 15 requirements of this section. 16 (b) The applicant shall: 17 Be of good moral character: (1) 18 (2) Be at least 18 years old; and 19 Complete a criminal history records check in accordance with § (3) 20 14–308.1 of this title. 21[(c)] **(A)** [The] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE 22**REQUIREMENTS UNDER § 14–301 OF THIS TITLE, AN** applicant shall: 23 Have a current certification by a national certifying board approved by (1) 24the Board; AND 25Have received a bachelor's or master's degree from an athletic training 26educational program that is accredited by the Commission on Accreditation of Athletic 27 Training Education or its successor[; 28 (3) Demonstrate oral and written competency in English as required by the 29 Board: and

Meet any other requirements established by the Board.

**(4)** 

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- 1 [(d)] **(B)** The Board shall waive the education requirements under this section if 2 an individual was certified by the National Athletic Trainers' Association Board of 3 Certification, Inc., on or before October 1, 2012, and is currently in good standing. 4 14-5D-10. 5 An athletic trainer license authorizes the licensee to practice athletic training 6 services IN THE STATE while the license is effective. 7 14-5D-14. 8 Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 9 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a license to any applicant, reprimand any licensee, place any licensee on probation, or 10 suspend or revoke a license, if the [applicant or] licensee: 11 12 (1) Fraudulently or deceptively obtains or attempts to obtain a license for 13 the applicant, licensee, or for another; 14 (2)Fraudulently or deceptively uses a license; Is guilty of unprofessional or immoral conduct in the practice of athletic 15 (3) 16 training; 17 Is professionally, physically, or mentally incompetent; (4) 18 (5)Abandons a patient; 19 Habitually is intoxicated; (6)20 Is addicted to, or habitually abuses, any narcotic or controlled 21dangerous substance as defined in § 5–101 of the Criminal Law Article; 22(8)Provides professional services while: 23 Under the influence of alcohol; or (i) 24Using any narcotic or controlled dangerous substance as defined 25 in § 5–101 of the Criminal Law Article, or any other drug that is in excess of therapeutic amounts or without valid medical indication; 26
- 29 (10) Willfully makes or files a false report or record in the practice of athletic 30 training;

patient so as to exploit the patient for financial gain;

Promotes the sale of services, drugs, devices, appliances, or goods to a

1 2 3	(11) Willfully fails to file or record any report as required under law, rillfully impedes or obstructs the filing or recording of the report, or induces another to fail o file or record the report;					
4	(12) Breaches patient confidentiality;					
5 6 7 8	(13) Pays or agrees to pay any sum or provide any form of remuneration or material benefit to any individual for bringing or referring a patient or accepts or agrees to accept any sum or any form of remuneration or material benefit from an individual for bringing or referring a patient;					
9 10	(14) Knowingly makes a misrepresentation while practicing athletic training;					
11 12	(15) Knowingly practices athletic training with an unauthorized individual or aids an unauthorized individual in the practice of athletic trainer services;					
13 14	(16) Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine;					
15 16 17 18	(17) Is disciplined by a licensing, certifying, or disciplinary authority or is convicted or disciplined by a court of any state or country or is disciplined by any branch of the United States uniformed services or the Veterans Administration for an act that would be grounds for disciplinary action under this section;					
19 20	(18) Fails to meet appropriate standards for the delivery of athletic training services;					
21 22	(19) Knowingly submits false statements to collect fees for which services have not been provided;					
23 24 25	(20) (i) Has been subject to investigation or disciplinary action by a licensing or disciplinary authority or by a court of any state or country for an act that would be grounds for disciplinary action under the Board's disciplinary statutes; and					
26	(ii) Has:					
27	1. Surrendered the license issued by the state or country; or					
28 29	2. Allowed the license issued by the state or country to expire or lapse;					
30 31	(21) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;					

- 1 (22) Sells, prescribes, gives away, or administers drugs for illegal or 2 illegitimate medical purposes;
- 3 (23) Practices or attempts to practice beyond the authorized scope of 4 practice;
- 5 (24) Refuses, withholds from, denies, or discriminates against an individual 6 with regard to the provision of professional services for which the licensee is licensed and 7 qualified to render because the individual is HIV positive;
- 8 (25) Practices or attempts to practice an athletic training procedure or uses 9 or attempts to use athletic training equipment if the applicant or licensee has not received 10 education and training in the performance of the procedure or the use of the equipment;
- 11 (26) Fails to cooperate with a lawful investigation conducted by the Board 12 or a disciplinary panel;
- 13 (27) Fails to practice under the supervision of a physician or violates the approved evaluation and treatment protocol;
- 15 (28) Violates an order of the Board or a disciplinary panel, including any 16 condition of probation; or
- 17 (29) Fails to complete a criminal history records check under [§ 14–308.1] § 18 **14–302** of this title.
- 19 14–5E–01.
- 20 (a) In this subtitle the following words have the meanings indicated.
- 21 (g) "Student" means an individual who, in accordance with [§ 14-5E-09(c)] § 22 14-5E-09 of this subtitle, is:
- 23 (1) Enrolled in an accredited educational program to qualify for a license 24 under this subtitle; and
- 25 (2) Performing perfusion services within the accredited program under the supervision of a licensed perfusionist and without compensation.
- 27 14-5E-06.
- 28 (E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.
- 29 14–5E–08.

- 1 (b) This section does not apply to a student enrolled in an education program 2 under [§ 14–5E–09(c)(2)] § 14–5E–09(2) of this subtitle while practicing perfusion in that 3 program.
- 4 14–5E–09.
- 5 **(a)** To qualify for a license, an applicant shall be an individual who meets the requirements of this section.
- 7 (b) The applicant shall:
- 8 (1) Be of good moral character;
- 9 (2) Be at least 18 years old; and
- 10 (3) Complete a criminal history records check in accordance with § 11 14–308.1 of this title.
- 12 (c) An] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS
  13 UNDER § 14–301 OF THIS TITLE, AN applicant for a license to practice perfusion shall:
- 14 (1) (i) Submit to the Board satisfactory evidence of certification as a 15 certified perfusionist or other national certification approved by the Board; and
- 16 (ii) Meet any other educational or clinical requirements established 17 by the Committee and approved by the Board; or
- 18 (2) (i) Submit to the Board satisfactory evidence of graduation from a 19 perfusion educational program that is accredited by the Commission on Accreditation of 20 Allied Health Education Programs, or the Commission's predecessor or successor; and
- 21 (ii) Meet any other educational or clinical requirements established 22 by the Committee and approved by the Board.
- 23 14-5E-10.
- 24 (a) Except as provided in subsection (b) of this section, an applicant who otherwise qualifies for a license under [§ 14–5E–09(c)(2)] § 14–5E–09(2) of this subtitle is entitled to be licensed for a single 2–year term before taking the national certifying examination given by the American Board of Cardiovascular Perfusion or its successor organization or another examination given or approved by the Board.
- 29 14-5E-13.
- [(a) (1) A license expires on a date set by the Board, unless the license is renewed for an additional term as provided in this section.

1	(2) The term of a license issued by the Board may not exceed 3 year	ırs.				
2 3	(b) At least 1 month before a license expires, the Board shall send to the licensed perfusionist a renewal notice that states:					
4	(1) The date on which the current license expires;	The date on which the current license expires;				
5 6	• • • • • • • • • • • • • • • • • • • •					
7	(3) The amount of the renewal fee; and]	The amount of the renewal fee; and]				
8 9 10 11 12	[(4)] (A) For licensees who qualified for an initial license under [§ 14–5E–09(c)(2)] § 14–5E–09(2) of this subtitle, THE NOTIFICATION SENT TO LICENSEES UNDER § 14–306(B) OF THIS TITLE SHALL INCLUDE A STATEMENT that the licensee must submit satisfactory evidence of a passing score on the examination as required under subsection [(c)(2)] (B) of this section.					
13 14						
15	(i) Otherwise is entitled to be licensed;					
16	(ii) Is of good moral character;					
17	(iii) Pays to the Board a renewal fee set by the Board; and					
18 19		submits				
20 21	11	equires;				
22 23 24	education or competency requirements and other requirements set under this sec	_				
25 26 27 28 29	14-5E-09(c)(2)] § 14-5E-09(2) of this subtitle shall submit to the Board sati evidence of a passing score on the national certifying examination given by the A Board of Cardiovascular Perfusion or its successor organization or another examples.	sfactory merican				

1 2 3	[(d) In addition to any other qualifications and requirements established by the Board, the Board shall establish continuing education or competency requirements as a condition of the renewal of a license under this section.]					
4 5		Board shall renew the license of each licensee who meets the ND § 14–306 OF THIS TITLE.				
6 7 8	(2) The Board may not renew the license of a licensee who fails to submit satisfactory evidence of a passing score on the examination as required under subsection <b>[</b> (c)(2) <b>] (B)</b> of this section.					
9 10	[(f) The Board shall reinstate the license of an individual who has failed to renew the license for any reason if the individual:					
11	1 (1) Applies for	reinstatement after the date the license expires;				
12	2 (2) Meets the	renewal requirements of this section; and				
13	3 (3) Pays to the	Board the reinstatement fee set by the Board.				
14 15		October 1, 2016, the Board shall require a criminal history th § 14–308.1 of this title for:				
16 17	· ·	ewal applicants as determined by regulations adopted by the				
18 19	` '	n former licensee who files for reinstatement under				
20 21 22 23	forwarded to the Board in accordance disciplinary action should be	of the criminal history record information of a licensee rdance with § 14–308.1 of this title, in determining whether taken, based on the criminal history record information, d or reinstated a license, the Board shall consider:				
24	4 (i) The	age at which the crime was committed;				
25	5 (ii) The	nature of the crime;				
26	6 (iii) The	circumstances surrounding the crime;				
27	7 (iv) The	length of time that has passed since the crime;				
28	8 (v) Subs	sequent work history;				
29	9 (vi) Emp	oloyment and character references; and				

(6)

Is habitually intoxicated;

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1 Other evidence that demonstrates whether the licensee poses a 2 threat to the public health or safety. 3 The Board may renew or reinstate a license only if the licensee or applicant attests that the licensee or applicant has submitted to a criminal history records 4 check under § 14-308.1 of this title. 5 6 A disciplinary panel may impose a civil penalty of up to \$100 per continuing (h) 7 education credit in lieu of a sanction under § 14-5E-16 of this subtitle, for a first offense 8 for failure of a licensee to obtain the continuing education credits required by the Board. 9 14-5E-14.10 A licensed perfusionist shall notify the Board in writing of a change in I(a)(1) 11 name or address within 60 days after the change. 12 A licensed perfusionist who fails to comply with the requirements of paragraph (1) of this subsection is subject to an administrative penalty of \$100. 13 14 (b) Each licensed perfusionist shall: 15 (1) Keep a copy of the license in the licensee's employment file; and 16 Make the license available for inspection on request. (2)17 14-5E-16. 18 Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, (a) 19 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a 20 license to any applicant, reprimand any licensee, place any licensee on probation, or 21suspend or revoke a license, if the [applicant or] licensee: 22 Fraudulently or deceptively obtains or attempts to obtain a license for 23 the applicant or 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 perfusion; 27 Is professionally, physically, or mentally incompetent; (4) 28(5)Abandons a patient;

1 Is addicted to or habitually abuses any narcotic or controlled dangerous (7)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 Using any narcotic or controlled dangerous substance as defined (ii) 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 perfusion; 11 12 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 to file or record a report; 14 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 perfusion; 21(15)Knowingly practices perfusion with an unauthorized individual or aids 22an unauthorized individual in the practice of perfusion; 23Knowingly delegates a perfusion duty to an unlicensed individual; (16)24(17)Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine; 2526 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 28States uniformed services or the U.S. Department of Veterans Affairs for an act that would 29be grounds for disciplinary action under the Board's disciplinary statutes; 30 (19)Fails to meet appropriate standards for the delivery of perfusion 31 services:

1 (20) Knowingly submits false statements to collect fees for which services 2 are not provided;
3 (21) (i) Has been subject to investigation or disciplinary action by a licensing or disciplinary authority or by a court of any state or country for an act that would

be grounds for disciplinary action under the Board's disciplinary statutes; and

- 6 (ii) Has:
- 7 1. Surrendered the license, if any, issued by the state or 8 country; or
- 9 2. Allowed the license, if any, issued by the state or country 10 to expire or lapse;
- 11 (22) Knowingly fails to report suspected child abuse in violation of § 5–704 12 of the Family Law Article;
- 13 (23) Sells, prescribes, gives away, or administers drugs for illegal or 14 illegitimate medical purposes;
- 15 (24) Practices or attempts to practice beyond the authorized scope of 16 practice;
- 17 (25) Refuses, withholds from, denies, or discriminates against an individual 18 with regard to the provision of professional services for which the licensee is licensed and 19 qualified to render because the individual is HIV positive;
- 20 (26) Practices or attempts to practice a perfusion procedure or uses or attempts to use perfusion equipment if the applicant or licensee has not received education 22 and training in the performance of the procedure or the use of the equipment;
- 23 (27) Fails to cooperate with a lawful investigation of the Board or a 24 disciplinary panel; or
- 25 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 26 **14–302** of this title.
- 27 14-5F-07.
- 28 (G) A QUORUM OF THE COMMITTEE CONSISTS OF THREE MEMBERS.
- 29 14-5F-11.
- 30 (a) [To] IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS 31 TITLE, TO qualify for a license, an [applicant shall be an individual who meets the 32 requirements of this section.

- The applicant shall be of good moral character. 1 (b) 2 The applicant shall be at least 21 years old. (c) 3 [(d)] **(B)** Except as provided in § 14–5F–12 of this subtitle, the applicant shall: 4 (1) Have a doctorate in naturopathic medicine from an approved 5 naturopathic medical program; and 6 (2)competency-based Pass the national naturopathic licensing 7 examination Part I and Part II administered by the North American Board of Naturopathic Examiners, or its successor agency that has been nationally recognized to administer a 8 9 naturopathic examination that represents federal standards of education and training. 10 [(e)] **(C)** An applicant shall be physically and mentally capable of safely 11 practicing naturopathic medicine with or without reasonable accommodation. 12 [(f)] **(**D**)** If an applicant is licensed, certified, or registered to practice 13 naturopathic medicine or any other health occupation in another state, the applicant shall 14 be in good standing with the applicable state licensing, certification, or registration 15 authority. 16 An applicant shall complete a criminal history records check in accordance [g]with 14-308.1 of this title. 17 18 14-5F-12.19 To apply for a license, an applicant shall: 20 Complete a criminal history records check in accordance with § (1)2114-308.1 of this title; 22Submit an application to the Board on a form that the Board requires: (2)23Pay to the Board an application fee set by the Board; (3)
- 26 (i) Any disciplinary action taken or any administrative penalties 27 assessed against the applicant by the appropriate state licensing, certification, or 28 registration authority; and

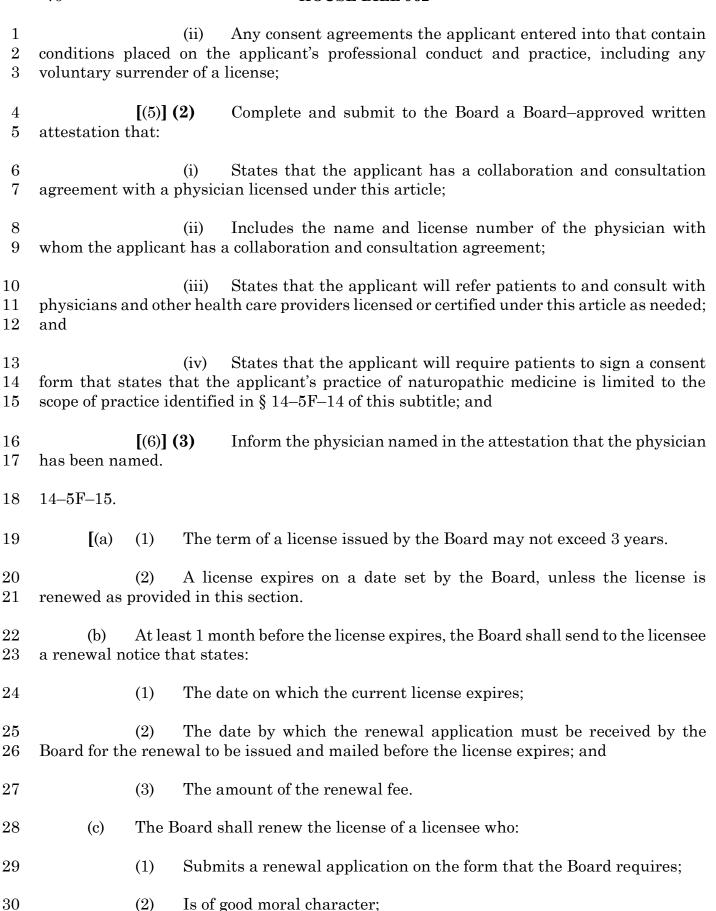
practice naturopathic medicine in another state, submit all evidence relating to:

If the applicant has been licensed, certified, or registered to

24

25

[(4)] (1)



1	(3)	Pays	a renewal fee set by the Board;		
2	(4)	Is oth	nerwise entitled to be licensed;		
3 4	(5) and	Meet	s the continuing education requirements adopted by the Board;		
5 6 7	(6) Provides] IN ADDITION TO MEETING THE LICENSE RENEWAL REQUIREMENTS UNDER § 14–306 OF THIS TITLE, THE LICENSEE SHALL PROVIDE evidence of biennial cardiopulmonary resuscitation certification.				
8 9	[(d) (1) records check in	_	nning October 1, 2016, the Board shall require a criminal history nce with § 14–308.1 of this title for:		
10 11	Board; and	(i)	Renewal applicants as determined by regulations adopted by the		
12 13	14–5F–16(b) of th	(ii) nis subt	Each former licensee who files for reinstatement under § itle.		
14 15 16 17	(2) On receipt of the criminal history record information of a licensee forwarded to the Board in accordance with § 14–308.1 of this title, in determining whether disciplinary action should be taken, based on the criminal history record information, against a licensee who renewed or reinstated a license, the Board shall consider:				
18		(i)	The age at which the crime was committed;		
19		(ii)	The nature of the crime;		
20		(iii)	The circumstances surrounding the crime;		
21		(iv)	The length of time that has passed since the crime;		
22		(v)	Subsequent work history;		
23		(vi)	Employment and character references; and		
24 25	threat to the pub	(vii) lic heal	Other evidence that demonstrates whether the licensee poses a th or safety.		
26 27 28	(3) applicant attests check under § 14	that th	Board may renew or reinstate a license only if the licensee or e licensee or applicant has submitted to a criminal history records of this title.		

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

- 1 14-5F-16.
- 2 (a) [(1)] The Board may place a licensee on inactive status if the licensee 3 submits to the Board:
- 4 [(i)] (1) An application for inactive status on the form required by 5 the Board; and
- 6 [(ii)] (2) The inactive status fee set by the Board.
- 7 **[**(2)**] (B)** The Board shall issue a license to a naturopathic doctor who is on inactive status if the individual is otherwise entitled to be licensed under this subtitle and submits to the Board:
- 10 [(i)] (1) Satisfactory evidence of compliance with the requirements 11 of [§ 14–308.1] § 14–302 of this title;
- 12 **[(ii)] (2)** Satisfactory evidence of compliance with the continuing 13 education requirements the Board adopts for this purpose; and
- [(iii)] (3) A reinstatement fee set by the Board.
- 15 **(**(b) The Board shall reinstate the license of a naturopathic doctor who has failed to renew the license for any reason if the naturopathic doctor:
- 17 (1) Meets the renewal requirements of § 14–5F–15 of this subtitle;
- 18 (2) Pays to the Board a reinstatement fee set by the Board; and
- 19 (3) Submits to the Board satisfactory evidence of compliance with the 20 qualifications and requirements adopted by the Board under this subtitle for license 21 reinstatements.]
- 22 14-5F-18.
- 23 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 24 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a 25 license to any applicant,] reprimand any licensee, place any licensee on probation, or 26 suspend or revoke a license of any licensee if the [applicant or] licensee:
- 27 (1) Is habitually intoxicated, or is addicted to or habitually abuses any 28 narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law 29 Article, or any drug without a valid prescription or indication, or provides professional 30 services while under the influence of alcohol or using any narcotic or controlled dangerous 31 substance, as defined in § 5–101 of the Criminal Law Article;

1 (2)Has been found to be mentally incompetent by a physician if the mental 2 incompetence impairs the ability of the applicant or licensee to undertake the practice of 3 naturopathic medicine in a manner consistent with the safety of the public; Has entered into a consent agreement with or has been assessed an 4 (3)administrative penalty by a licensing authority in another state; 5 6 Fraudulently or deceptively obtains, attempts to obtain, or uses a **(4)** 7 license for the applicant, the licensee, or another; 8 (5)Has a license revoked or suspended, or was otherwise acted against, 9 including the denial of licensure, by the licensing authority of another state; 10 (6) Uses false, deceptive, or misleading advertising; 11 (7) Advertises, practices, or attempts to practice under a name other than 12 the applicant's or licensee's own name; 13 Aids, assists, employs, or advises any unlicensed individual to practice naturopathic medicine in violation of this subtitle; 14 15 (9)Willfully makes or files a false report or record in the practice of 16 naturopathic medicine; 17 Willfully or negligently fails to file a report or record as required by law, 18 willfully impedes or obstructs the filing or recording of a report, or induces another to fail 19 to file or record a report; 20 Pays or receives any commission, bonus, kickback, or rebate, or engages 21in any split-fee arrangement in any form with a licensed physician, organization, agency, 22or other person, either directly or indirectly, for patients referred to health care providers; 23Exercises influence within a patient-doctor relationship for purposes of (12)24engaging a patient in sexual activity; 25(13)Engages in sexual misconduct with a patient; 26 Fails to keep written medical records justifying the course of treatment (14)27 of a patient; 28Engages in an act or omission that does not meet generally accepted

standards of practice of naturopathic medicine or of safe care of patients, whether or not

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actual injury to a patient is established;

- 1 (16) Delegates professional responsibilities to an individual when the 2 licensee delegating the responsibilities knows or has reason to know that the individual is 3 not qualified by training, experience, or licensure to perform the responsibilities;
- 4 (17) Promotes the sale of services, drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;
- 6 (18) Breaches patient confidentiality;
- 7 (19) Is guilty of unprofessional or immoral conduct in the practice of 8 naturopathic medicine;
- 9 (20) Offers, undertakes, or agrees to cure or treat a disease by a secret 10 method, treatment, or medicine;
- 11 (21) Knowingly fails to report suspected child abuse in violation of § 5–704 12 of the Family Law Article;
- 13 (22) Sells, prescribes, gives away, or administers drugs for illegal or 14 illegitimate purposes;
- 15 (23) Denies or discriminates against an individual with regard to the 16 provision of professional services for which the licensee is licensed and qualified to render 17 because the individual is HIV positive;
- 18 (24) Fails to cooperate with a lawful investigation of the Board;
- 19 (25) Abandons a patient;
- 20 (26) Violates any provision of this title or any regulation adopted by the 21 Board; or
- 22 (27) Fails to complete a criminal history records check under [§ 14–308.1] § 23 14–302 of this title.
- 24 14-5F-21.
- [(a) The Board shall give notice and hold a hearing in accordance with the Administrative Procedure Act.
- 27 (b) The individual may be represented at the hearing by counsel.
- 28 (c) Over the signature of an officer or the administrator of the Board, the Board or a disciplinary panel may issue subpoenas and administer oaths in connection with any investigation under this subtitle and any hearings or proceedings before the Board or a disciplinary panel.

- 1 (d) If, without lawful excuse, a person disobeys a subpoena from the Board or a 2 disciplinary panel or an order by the Board or a disciplinary panel to take an oath or to 3 testify or answer a question, then, on petition of the Board, a court of competent jurisdiction 4 may punish the person as for contempt of court.
- 5 (e) If, after due notice, the individual against whom the action is contemplated 6 fails or refuses to appear, the Board or a disciplinary panel may hear and determine the 7 matter.
- 8 (f)] If, after a hearing IN ACCORDANCE WITH THE ADMINISTRATIVE 9 PROCEDURE ACT, an individual is found in violation of § 14–5F–18 of this subtitle, the 10 individual shall pay the costs of the hearing as specified in a regulation adopted by the 11 Board.
- 12 14-5F-24.
- 13 (c) A disciplinary panel may not reinstate a surrendered or revoked license that 14 has been surrendered or revoked for a period of more than 1 year unless the licensee:
- 15 (1) Meets the requirements for reinstatement as established under this 16 title; and
- 17 (2) Completes a criminal history records check in accordance with [§ 18 14–308.1] § 14–302 of this title.
- 19 14–5G–09.
- 20 (a) To qualify for a license to practice genetic counseling, an applicant shall be an individual who meets the requirements of this section **AND § 14–301 OF THIS TITLE**.
- (b) [The applicant must be of good moral character.
- 23 (c) The applicant must be at least 18 years old.
- 24 (d)] The applicant must be a graduate of an appropriate education program 25 approved by the Board.
- [(e)] (C) Except as provided in subsection [(f)] (D) of this section, the applicant shall submit to the Board satisfactory evidence of certification by a national certifying organization approved by the Board.
- [(f)] (D) If an applicant does not meet the requirement under subsection [(e)] (C) of this section, the applicant may qualify for licensure if the applicant:
- 31 (1) Has worked as a genetic counselor for:

14-5G-18.

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- 1 (i) At least 10 years before January 1, 2024; and 2 At least 5 consecutive years immediately preceding the date on (ii) 3 which the applicant submits the application for licensure; 4 (2) Has graduated from an education program approved by the Board: Submits to the Board three letters of recommendation from licensed 5 (3) 6 physicians who have been licensed for at least 5 years or certified genetic counselors eligible 7 for licensure and who: 8 Have worked with the applicant in an employment or 9 professional setting for 3 years before the applicant submits the application for licensure; 10 and 11 Can attest to the applicant's competency in providing genetic (ii) 12 counseling services; and 13 **(4)** Applies for initial licensure on or before December 31, 2024. 14 The applicant shall complete a criminal history records check in accordance 15 with § 14–308.1 of this title.] 16 [(h)] **(E)** The applicant shall meet any additional education, training, or 17 examination requirements established by the Board. 18 14-5G-14. 19 A supervised genetic counselor is subject to discipline under [§ 14–5G–19] § 20 14-5G-18 of this subtitle to the same extent as a genetic counselor. 14-5G-17. 2122A disciplinary panel may issue a cease and desist order for [: 23(1) Practicing genetic counseling without a license or with an unauthorized 24person; or 25(2)Supervising SUPERVISING or aiding an unauthorized person in the practice of genetic counseling. 26
- 28 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 29 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a

license to any applicant, reprimand any licensee, place any licensee on probation, or 1 2 suspend or revoke a license, if the [applicant or] licensee: 3 Fraudulently or deceptively obtains or attempts to obtain a license for 4 the applicant or licensee or for another; 5 (2)Fraudulently or deceptively uses a license; 6 (3) Is guilty of unprofessional or immoral conduct while practicing genetic 7 counseling; Is professionally, physically, or mentally incompetent; 8 **(4)** 9 (5)Abandons a patient; 10 (6) Is habitually intoxicated; Is addicted to or habitually abuses any narcotic or controlled dangerous 11 12 substance as defined in § 5–101 of the Criminal Law Article; 13 (8)Provides professional services while: 14 (i) Under the influence of alcohol; or 15 Using any narcotic or controlled dangerous substance as defined (ii) 16 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic amounts or without valid medical indication; 17 Promotes the sale of services, drugs, devices, appliances, or goods to a 18 19 patient so as to exploit the patient for financial gain; 20(10)Willfully makes or files a false report or record in the practice of genetic 21counseling; 22 Willfully fails to file or record any report as required under law, 23 willfully impedes or obstructs the filing or recording of a report, or induces another to fail 24to file or record a report; 25Breaches patient confidentiality; (12)26 Pays or agrees to pay any sum or provide any form of remuneration or (13)27 material benefit to any person for bringing or referring a patient or accepts or agrees to 28 accept any sum or any form of remuneration or material benefit from an individual for 29 bringing or referring a patient; 30 Knowingly makes a misrepresentation while practicing genetic (14)

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counseling:

- Knowingly practices genetic counseling with an unauthorized 1 (15)2 individual or aids an unauthorized individual in practicing genetic counseling: 3 (16)Knowingly delegates a genetic counseling duty to an unlicensed individual; 4 Grossly overutilizes health care services; 5 (17)6 (18)Offers, undertakes, or agrees to cure or treat disease by a secret 7 method, treatment, or medicine: 8 Is disciplined by a licensing or disciplinary authority or is convicted or 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 12 Fails to meet appropriate standards for the delivery of genetic (20)13 counseling services; Knowingly submits false statements to collect fees for which services 14 (21)15 are not provided; 16 (22)(i) Has been subject to investigation or disciplinary action by a 17 licensing or disciplinary authority or by a court of any state or country for an act that would 18 be grounds for disciplinary action under the Board's disciplinary statutes; and Has: 19 (ii) 20 1. Surrendered the license, if any, issued by the state or 21country; or 22 2. Allowed the license, if any, issued by the state or country 23to expire or lapse; 24(23)Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article: 2526 Practices or attempts to practice beyond the authorized scope of (24)27 practice; 28Refuses, withholds from, denies, or discriminates against an individual 29 with regard to the provision of professional services for which the licensee is licensed and
- 31 (26) Practices or attempts to practice genetic counseling procedures or uses 32 or attempts to use genetic assessments if the applicant or licensee has not received

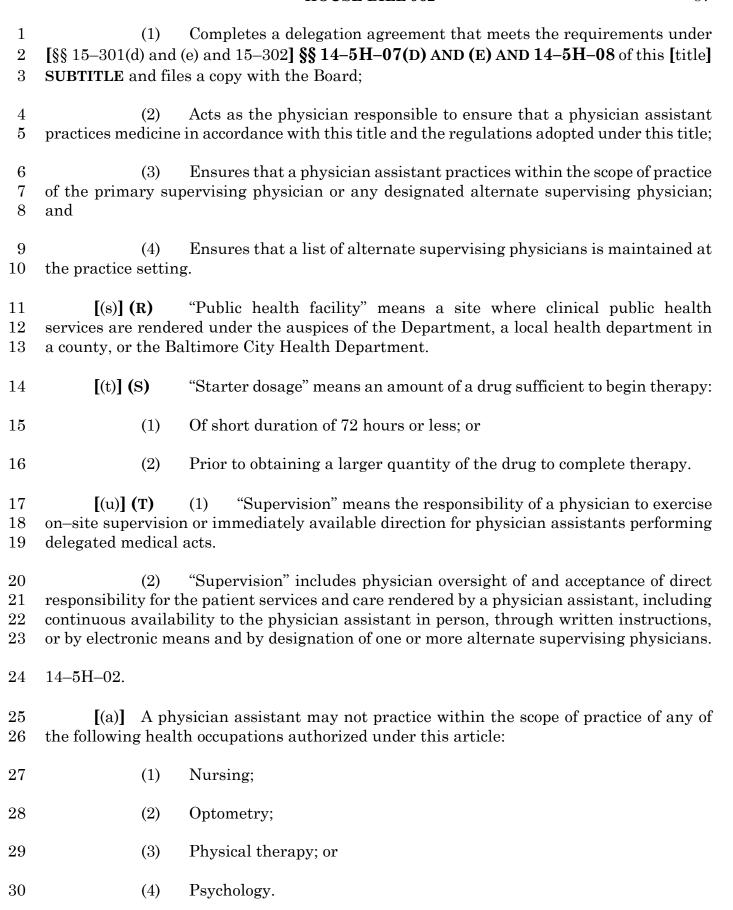
qualified to render because the individual is HIV positive;

- education and training in the performance of the procedure or the use of the genetic assessment;
- 3 (27) Fails to cooperate with a lawful investigation of the Board or a 4 disciplinary panel;
- 5 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 6 14–302 of this title; or
- 7 (29) Violates any provision of this title or any rule or regulation pertaining 8 to genetic counseling that is adopted by the Board, the State, or the federal government.

## 9 SUBTITLE 5H. PHYSICIAN ASSISTANTS.

- 10 14-5H-01.
- 11 (a) In this [title] **SUBTITLE** the following words have the meanings indicated.
- [(d) "Board" means the State Board of Physicians, established under § 14–201 of this article.]
- 14 [(e)] (D) "Committee" means the Physician Assistant Advisory Committee.
- 15 [(f)] (E) "Controlled dangerous substances" has the meaning stated in § 5–101 16 of the Criminal Law Article.
- 17 [(g)] **(F)** "Correctional facility" includes a State or local correctional facility.
- [(h)] (G) "Delegated medical acts" means activities that constitute the practice of medicine delegated by a physician under [Title 14 of this article] THIS TITLE.
- [(i)] (H) "Delegation agreement" means a document that is executed by a primary supervising physician and a physician assistant containing the requirements of [§ 15–302] § 14–5H–08 of this [title] SUBTITLE.
- [(i-1) "Disciplinary panel" means a disciplinary panel of the Board established under § 14-401 of this article.]
- 25 [(j)] (I) "Dispense" or "dispensing" has the meaning stated in § 12–101 of this 26 article.
- [(k)] (J) "Drug sample" means a unit of a prescription drug that is intended to promote the sale of the drug and is not intended for sale.
- 29 [(l)] **(K)** "Hospital" means:

1	(1)	A hospital as defined under § 19–301 of the Health – General Article;				
2	(2)	A comprehensive care facility that:				
3 4	facility under fede	(i) Meets the requirements of a hospital-based skilled nursing leral law; and				
5		(ii) Offers acute care in the same building; and				
6 7 8	(3) freestanding med General Article.	An emergency room that is physically connected to a hospital or a lical facility that is licensed under Title 19, Subtitle 3A of the Health –				
9 10	[(m)] (L) under this title.	"License" means a license issued by the Board to a physician assistant				
11 12 13	[(n)] (M) "National certifying examination" means the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants or its successor.					
14 15	[(o)] (N) "Physician assistant" means an individual who is licensed under this title to practice medicine with physician supervision.					
16 17	[(p)] (O) acts that are:	"Practice as a physician assistant" means the performance of medical				
18	(1)	Delegated by a supervising physician to a physician assistant;				
19	(2)	Within the supervising physician's scope of practice; and				
20 21	(3) experience.	Appropriate to the physician assistant's education, training, and				
22 23	[(q)] (P) "Prescriptive authority" means the authority delegated by a primary or alternate supervising physician to a physician assistant to:					
24 25	(1) drugs, medical de	Prescribe and administer controlled dangerous substances, prescription vices, and the oral, written, or electronic ordering of medications; and				
26 27	(2) 14-5H-10(B), (C	Dispense as provided under [§ 15–302.2(b), (c), and (d)] § (2), AND (D) of this [title] SUBTITLE.				
28	[(r)] (Q)	"Primary supervising physician" means a physician who:				



- 1 **[**(b) This title does not limit the right of an individual to practice a health 2 occupation that the individual is authorized to practice under this article.]
- 3 14-5H-03.

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- (c) Except as otherwise provided under subsections (b) and (d) of this section, a hospital, a related institution, an alternative health care system, or an employer of a physician assistant shall report to the Board any limitation, reduction, or other change of the terms of employment of the physician assistant or any termination of employment of the physician assistant for any reason that might be grounds for disciplinary action under [§ 15–314] § 14–5H–16 of this [title] SUBTITLE.
- 10 (d) A hospital, related institution, alternative health care system, or employer that has reason to know that a physician assistant has committed an action or has a condition that might be grounds for reprimand or probation of the physician assistant or suspension or revocation of the license of the physician assistant under [§ 15–314] § 14–5H–16 of this [title] SUBTITLE because the physician assistant is alcohol— or drug—impaired is not required to report to the Board if:
- 16 (1) The hospital, related institution, alternative health care system, or 17 employer knows that the physician assistant is:
- 18 (i) In an alcohol or drug treatment program that is accredited by the 19 Joint Commission [on the Accreditation of Healthcare Organizations] or is certified by the 20 Department; or
- 21 (ii) Under the care of a health care practitioner who is competent 22 and capable of dealing with alcoholism and drug abuse;
- 23 (2) The hospital, related institution, alternative health care system, or employer is able to verify that the physician assistant remains in the treatment program until discharge; and
- 26 (3) The action or condition of the physician assistant has not caused injury to any person while the physician assistant is practicing as a licensed physician assistant.
- (e) (1) If the physician assistant enters, or is considering entering, an alcohol or drug treatment program that is accredited by the Joint Commission [on Accreditation of Healthcare Organizations] or that is certified by the Department, the physician assistant shall notify the hospital, related institution, alternative health care system, or employer of the physician assistant's decision to enter the treatment program.
- 33 14-5H-06.
- 34 (a) In addition to the powers set forth elsewhere in this title, the Committee, on 35 its initiative or on the Board's request, may:

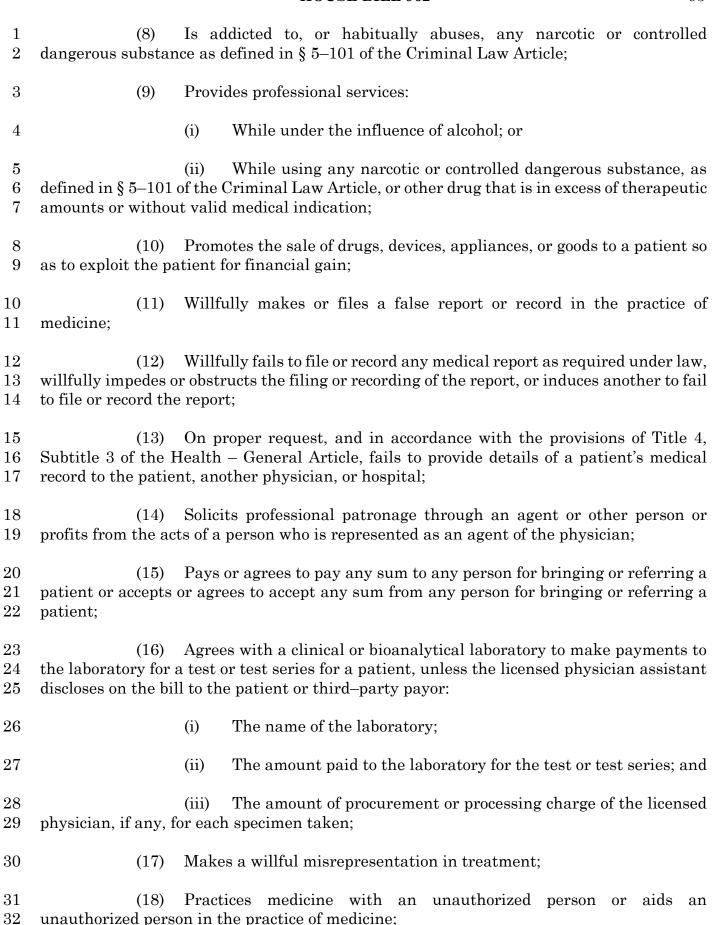
$\frac{1}{2}$	this title;	(1)	Recor	mmend to the Board regulations for carrying out the provisions of		
3 4	application t	(2) Recommend to the Board approval, modification, or disapproval of an lication for licensure or a delegation agreement;				
5 6 7			(3) Report to the Board any conduct of a supervising physician or a sistant that may be cause for disciplinary action under this [title] SUBTITLE 4–404 of this article] § 14–515 OF THIS TITLE; and			
8 9	assistant.	(4)	Repor	rt to the Board any alleged unauthorized practice of a physician		
10	14–5H–07.					
11	(c)	Patie	nt serv	rices that may be provided by a physician assistant include:		
12		(1)	(i)	Taking complete, detailed, and accurate patient histories; and		
13 14	status repor	ts;	(ii)	Reviewing patient records to develop comprehensive medical		
15 16	data;	(2)	Perfo	rming physical examinations and recording all pertinent patient		
17 18 19		(3) Interpreting and evaluating patient data as authorized by the primary or alternate supervising physician for the purpose of determining management and reatment of patients;				
20 21	by pertinent	(4) data		ting requests for or performing diagnostic procedures as indicated authorized by the supervising physician;		
22 23	patients;	(5)	Provi	ding instructions and guidance regarding medical care matters to		
24 25 26	of services to including:	(6) patie		ting the primary or alternate supervising physician in the delivery o require medical care in the home and in health care institutions,		
27			(i)	Recording patient progress notes;		
28			(ii)	Issuing diagnostic orders; and		
29 30	primary or a	alterna	(iii) ite sup	Transcribing or executing specific orders at the direction of the ervising physician; and		

- 1 (7) Exercising prescriptive authority under a delegation agreement and in 2 accordance with [§ 15–302.2] § 14–5H–10 of this subtitle.
- 3 14-5H-08.
- (c) (2) (ii) 1. Before a physician assistant may perform X-ray duties authorized under [§ 14–306(e)] § 14–503(E) of this [article] TITLE in the medical office of the physician delegating the duties, a primary supervising physician shall obtain the Board's approval of a delegation agreement that includes advanced duties in accordance with subsubparagraph 2 of this subparagraph.
- 9 (g) If the Board determines that a primary or alternate supervising physician or physician assistant is practicing in a manner inconsistent with the requirements of this title [or Title 14 of this article], the Board on its own initiative or on the recommendation of the Committee may demand modification of the practice, withdraw the approval of the delegation agreement, or refer the matter to a disciplinary panel for the purpose of taking other disciplinary action under [§ 14–404 or § 15–314] § 14–5H–16 OF THIS SUBTITLE OR § 14–515 of this [article] TITLE.
- 16 (k) Subject to the [notice] NOTIFICATION required under [§ 15–103] § 17 14–5H–03 of this [title] SUBTITLE, a physician assistant may terminate a delegation agreement filed with the Board under this subtitle at any time.
- (l) (2) If there is no designated alternate supervising physician or the designated alternate supervising physician does not agree to supervise the physician assistant, the physician assistant may not practice until the physician assistant receives approval of a new delegation agreement under [§ 15–302.1] § 14–5H–09 of this subtitle.
- 23 (m) A physician assistant whose delegation agreement is terminated may not 24 practice as a physician assistant until the physician assistant receives preliminary 25 approval of a new delegation agreement under [§ 15–302.1] § 14–5H–09 of this subtitle.
- 26 14-5H-09.

- 27 (a) If a delegation agreement does not include advanced duties or the advanced 28 duties have been approved under [§ 15–302(c)(1)] § 14–5H–08(C)(1) of this subtitle, a 29 physician assistant may assume the duties under a delegation agreement on the date that 30 the Board acknowledges receipt of the completed delegation agreement.
- 31 (b) In this section, "pending" means that a delegation agreement that includes 32 delegation of advanced duties in a setting that does not meet the requirements under [§ 33 15–302(c)(1)] § 14–5H–08(C)(1) of this subtitle has been executed and submitted to the 34 Board for its approval, but:
  - (1) The Committee has not made a recommendation to the Board; or

- 1 (2) The Board has not made a final decision regarding the delegation 2 agreement.
- 3 14–5H–10.
- 4 (e) Before a physician assistant may renew a license for an additional 2-year 5 term under [§ 15-307] § 14-306 of this [subtitle] TITLE, the physician assistant shall 6 submit evidence to the Board of successful completion of 8 category 1 hours of pharmacology 6 education within the previous 2 years.
- 8 14-5H-12.
- 9 (a) [To] IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS 10 TITLE, TO qualify for a license, an applicant shall:
- [(1) Complete a criminal history records check in accordance with § 12 14–308.1 of this article;
- 13 (2) Be of good moral character;
- 14 (3) Demonstrate oral and written competency in the English language as 15 required by the Board;
- 16 (4) Be at least 18 years old; and
- 17 (5) (i)] (1) Be a graduate of a physician assistant training program 18 approved by the Board; or
- [(ii)] (2) Have passed the physician assistant national certifying examination administered by the National Commission on Certification of Physician Assistants prior to 1986, maintained all continuing education and recertification requirements, and been in continuous practice since passage of the examination.
- 23 14-5H-14.
- [(a)] Each licensee shall keep a license and delegation agreement for inspection at the primary place of business of the licensee.
- [(b) (1) Each licensee shall give the Board written notice of any change of name or address within 60 days of the date of the change.
- 28 (2) A licensee who fails to comply with this subsection is subject to an 29 administrative penalty of \$100.]
- 30 14-5H-15.

1 [(1)] Except as otherwise provided under § 10–226 of the State Government 2 Article, before the Board takes any action to reject or modify a delegation agreement or 3 advanced duty, the Board shall give the licensee the opportunity for a hearing before the 4 Board. [(2)] **(B)** The Board shall give notice and hold the hearing under Title 10, 5 6 Subtitle 2 of the State Government Article. 7 The Board may administer oaths in connection with any [(3)] **(C)** 8 proceeding under this section. 9 At least 14 days before the hearing, the hearing notice shall be [(4)] (D) 10 sent to the last known address of the applicant or licensee. 11 Any licensee aggrieved under this subtitle by a final decision of the Board 12 rejecting or modifying a delegation agreement or advanced duty may petition for judicial 13 review as allowed by the Administrative Procedure Act. 14 14-5H-16. 15 (a) Subject to the hearing provisions of [§ 15–315] § 14–405 of this [subtitle] 16 TITLE, a disciplinary panel, on the affirmative vote of a majority of the quorum, may 17 reprimand any physician assistant, place any physician assistant on probation, or suspend 18 or revoke a license if the physician assistant: 19 Fraudulently or deceptively obtains or attempts to obtain a license for 20 the applicant or licensee or for another; 21(2) Fraudulently or deceptively uses a license; 22(3) Is guilty of: Immoral conduct in the practice of medicine; or 23(i) Unprofessional conduct in the practice of medicine; 24(ii) 25(4) Is professionally, physically, or mentally incompetent; 26(5)Solicits or advertises in violation of [§ 14–503] § 14–5H–13 of this [article] SUBTITLE; 2728(6) Abandons a patient; 29 (7)Habitually is intoxicated;



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(30)

since July 1, 1963:

1 (19)Grossly overutilizes health care services; 2 (20)Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine; 3 4 Is disciplined by a licensing or disciplinary authority or convicted or disciplined by a court of any state or country or disciplined by any branch of the United 5 6 States uniformed services or the Veterans' Administration for an act that would be grounds 7 for disciplinary action under this section; 8 Fails to meet appropriate standards for the delivery of quality medical 9 and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in this State: 10 11 (23)Willfully submits false statements to collect fees for which services are 12 not provided; 13 Was subject to investigation or disciplinary action by a licensing or disciplinary authority or by a court of any state or country for an act that would be grounds 14 for disciplinary action under this section and the licensee: 15 16 (i) Surrendered the license issued by the state or country to the 17 state or country; or 18 Allowed the license issued by the state or country to expire or (ii) 19 lapse; 20 (25)Knowingly fails to report suspected child abuse in violation of § 5–704 21of the Family Law Article; 22Fails to educate a patient being treated for breast cancer of alternative 23methods of treatment as required by § 20–113 of the Health – General Article; 24 Sells, prescribes, gives away, or administers drugs for illegal or (27)25illegitimate medical purposes; 26 Fails to comply with the provisions of § 12–102 of this article; (28)27 Refuses, withholds from, denies, or discriminates against an individual (29)28with regard to the provision of professional services for which the physician assistant is licensed and qualified to render because the individual is HIV positive; 29

Except as to an association that has remained in continuous existence

- 1 Associates with a pharmacist as a partner or co-owner of a (i) 2 pharmacy for the purpose of operating a pharmacy; 3 (ii) Employs a pharmacist for the purpose of operating a pharmacy; 4 or 5 (iii) Contracts with a pharmacist for the purpose of operating a 6 pharmacy; 7 Except in an emergency life-threatening situation where it is not (31)8 feasible or practicable, fails to comply with the Centers for Disease Control and 9 Prevention's guidelines on universal precautions; 10 Fails to display the notice required under [§ 14–415] § 14–519 of this 11 [article] TITLE; 12 Fails to cooperate with a lawful investigation conducted by the Board (33)13 or a disciplinary panel; 14 (34)Is convicted of insurance fraud as defined in § 27–801 of the Insurance 15 Article; 16 Is in breach of a service obligation resulting from the applicant's or (35)17 licensee's receipt of State or federal funding for the physician assistant's medical education; 18 Willfully makes a false representation when seeking or making application for licensure or any other application related to the practice of medicine; 19 20By corrupt means, threats, or force, intimidates or influences, or 21 attempts to intimidate or influence, for the purpose of causing any person to withhold or 22change testimony in hearings or proceedings before the Board or a disciplinary panel or 23those otherwise delegated to the Office of Administrative Hearings; 24(38)By corrupt means, threats, or force, hinders, prevents, or otherwise 25delays any person from making information available to the Board or a disciplinary panel 26 in furtherance of any investigation of the Board or a disciplinary panel; 27 Intentionally misrepresents credentials for the purpose of testifying or 28 rendering an expert opinion in hearings or proceedings before the Board or a disciplinary 29panel or those otherwise delegated to the Office of Administrative Hearings;
- 30 (40) Fails to keep adequate medical records;
- 31 (41) Performs delegated medical acts beyond the scope of the delegation 32 agreement filed with the Board or after notification from the Board that an advanced duty 33 has been disapproved;

- 1 (42) Performs delegated medical acts without the supervision of a physician;
- 2 (43) Fails to complete a criminal history records check under [§ 14–308.1] § 3 14–302 of this [article] TITLE;
- 4 (44) Fails to comply with the requirements of the Prescription Drug 5 Monitoring Program in Title 21, Subtitle 2A of the Health General Article;
- 6 (45) Fails to comply with the requirements of the Prescription Drug 7 Monitoring Program under Title 21, Subtitle 2A of the Health – General Article; or
- 8 (46) Fails to comply with any State or federal law pertaining to the practice 9 as a physician assistant.
- 10 (C) IF, AFTER A HEARING UNDER § 14–405 OF THIS TITLE, A DISCIPLINARY 11 PANEL FINDS THAT THERE ARE GROUNDS FOR DISCIPLINE UNDER SUBSECTION (A) 12 OF THIS SECTION TO SUSPEND OR REVOKE A LICENSE OF A PHYSICIAN ASSISTANT, 13 REPRIMAND A LICENSED PHYSICIAN ASSISTANT, OR PLACE THE LICENSED 14 PHYSICIAN ASSISTANT ON PROBATION, THE DISCIPLINARY PANEL MAY IMPOSE A FINE SUBJECT TO THE BOARD'S REGULATIONS IN ADDITION TO SUSPENDING OR 15 REVOKING THE LICENSE, REPRIMANDING THE LICENSEE, OR PLACING THE 16 17 LICENSEE ON PROBATION.
- 18 (D) THE BOARD SHALL PAY ANY FINES COLLECTED UNDER THIS SECTION 19 INTO THE GENERAL FUND OF THE STATE.
- 20 (E) IN ADDITION TO ANY SANCTION AUTHORIZED UNDER THIS SUBTITLE, A
  21 DISCIPLINARY PANEL MAY REQUIRE A LICENSEE TO COMPLY WITH SPECIFIED
  22 TERMS AND CONDITIONS DETERMINED BY THE DISCIPLINARY PANEL.
- 23 14-5H-21.
- 24 (a) A person who violates [§ 15–401 or § 15–402] **§ 14–5H–18 OR § 14–5H–19** 25 of this subtitle:
- 26 (1) Is guilty of a misdemeanor and on conviction is subject to a fine not exceeding \$5,000 or imprisonment not exceeding 5 years or both; and
- 28 (2) Shall lose licensure as a physician assistant under this title.
- 29 (b) (1) In addition to the penalties under subsection (a) of this section, a person 30 who violates [§ 15–401] § 14–5H–18 of this subtitle may be subject to a civil penalty 31 assessed by a disciplinary panel in an amount not exceeding \$5,000.

- 1 (2) In addition to the penalties under paragraph (1) of this subsection, a 2 person who violates [§ 15–309] § 14–5H–14 of this [title] SUBTITLE may be subject to a 3 civil penalty assessed by a disciplinary panel in an amount not exceeding \$100.
- 4 (3) The Board shall pay any civil penalty collected under this subsection 5 into the Board of Physicians Fund.
- 6 14-5H-22.
- 7 This [title] **SUBTITLE** may be cited as the "Maryland Physician Assistants Act".
- 8 14-5H-23.
- Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act, this [title] **SUBTITLE** and all regulations adopted under this [title] **SUBTITLE** shall terminate and be of no effect after July 1, 2030.

# 12 Article – Transportation

- 13 13-616.
- 14 (a) (1) In this subtitle the following words have the meanings indicated.
- 15 (7) "Licensed physician assistant" means an individual who is licensed 16 under Title [15] **14**, **SUBTITLE 5H** of the Health Occupations Article to practice medicine 17 with physician supervision.
- SECTION 4. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

# 20 Article - Health Occupations

- 21 14-3A-01.
- The Interstate Medical Licensure Compact is enacted into law and entered into with all other states legally joining in it in the form substantially as it appears in this section as follows:

#### 25 SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE

(b) (3) (i) The member board within the state selected as the state of principal license shall, in the course of verifying eligibility, require the applicant to obtain a criminal background check as required under [§ 14–308.1] § 14–302 of this title, including the use of the results of fingerprint or other biometric data checks compliant with the requirements of the Federal Bureau of Investigation, with the exception of federal employees who have suitability determination in accordance with U.S. C.F.R. § 731.202.

SECTION 5. AND BE IT FURTHER ENACTED, That the Laws of Maryland read 2 as follows:

3 Article – Tax – General

4 10-752.

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- 5 (a) (1) In this section the following words have the meanings indicated.
- 6 "Health care practitioner" means an individual who:
- 7 (i) is licensed to practice medicine under Title 14 of the Health 8 Occupations Article;
- 9 (ii) is a physician assistant, as defined in [§ 15–101] **§ 14–5H–01** of the Health Occupations Article; or
- 11 (iii) is a registered nurse practitioner, as defined in § 8–101 of the 12 Health Occupations Article.
- 13 (d) (7) The Fund consists of:
- 14 (i) revenue distributed to the Fund under [§ 15–206] **§ 14–207** of 15 the Health Occupations Article;
- 16 (ii) money appropriated in the State budget to the Fund; and
- 17 (iii) any other money from any other source accepted for the benefit 18 of the Fund.
- SECTION 6. AND BE IT FURTHER ENACTED, That the publisher of the Annotated Code of Maryland, in consultation with and subject to the approval of the Department of Legislative Services, shall correct, with no further action required by the General Assembly, cross—references and terminology rendered incorrect by this Act. The publisher shall adequately describe any correction that is made in an editor's note following the section affected.

SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2023. Section 4 of this Act shall remain effective until the taking effect of the termination provision specified in Section 5 of Chapter 470 of the Acts of the General Assembly of 2018. If that termination provision takes effect, Section 4 of this Act shall be abrogated and of no further force and effect. Section 5 of this Act shall remain effective until the taking effect of the termination provision specified in Section 6 of Chapters 153 and 154 of the Acts of the General Assembly of 2021. If that termination provision takes effect, Section 5 of this Act shall be abrogated and of no further force and effect. This Act may not be interpreted to have any effect on those termination provisions.