

HOUSE BILL 377

J2

6lr1798
CF 6lr2208

By: **Delegate S. Johnson**

Introduced and read first time: January 19, 2026

Assigned to: Health

A BILL ENTITLED

1 AN ACT concerning

2 **Physician Assistants – Parity With Other Health Care Practitioners**

3 FOR the purpose of altering certain provisions of law to include physician assistants in the
4 health care practitioners who may take certain actions, including actions related to
5 the guardianship of disabled persons, admission of individuals to mental health
6 facilities, the Emergency and Allergy Treatment Program, and the Attendant Care
7 Program; requiring the Maryland Department of Health to cover charges related to
8 examinations by a physician assistant for certain emergency evaluatees; altering the
9 membership and duties of the Statewide Advisory Commission on Immunization;
10 and generally relating to physician assistants.

11 BY repealing and reenacting, with amendments,
12 Article – Correctional Services
13 Section 9–601.1(e)(1)
14 Annotated Code of Maryland
15 (2025 Replacement Volume)

16 BY repealing and reenacting, with amendments,
17 Article – Estates and Trusts
18 Section 13–705(c)(2)
19 Annotated Code of Maryland
20 (2022 Replacement Volume and 2025 Supplement)

21 BY repealing and reenacting, with amendments,
22 Article – Health – General
23 Section 5–606, 10–601(g) and (h), 10–610(c), 10–611(b), (c), and (e), 10–615(6),
24 10–616(a)(1) and (c), 10–619, 10–620(f), 10–622(b) and (d), 10–623(a),
25 10–624(a)(1), 10–628(a)(1), 13–701, 13–705, 13–707(b)(1) and (c),
26 18–214(d)(11) and (12), 19–705.1(b)(1)(vi), and 19–2001(a)(4)
27 Annotated Code of Maryland
28 (2023 Replacement Volume and 2025 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 BY repealing and reenacting, without amendments,
2 Article – Health – General
3 Section 10–601(a), 10–620(a), 18–214(b), 19–705.1(a) and (b)(2), and 19–2001(a)(1)
4 and (b)(1)
5 Annotated Code of Maryland
6 (2023 Replacement Volume and 2025 Supplement)

7 BY adding to
8 Article – Health – General
9 Section 10–601(g) and 18–214(d)(12)
10 Annotated Code of Maryland
11 (2023 Replacement Volume and 2025 Supplement)

12 BY repealing and reenacting, with amendments,
13 Article – Human Services
14 Section 7–404(a)
15 Annotated Code of Maryland
16 (2019 Replacement Volume and 2025 Supplement)

17 BY repealing and reenacting, without amendments,
18 Article – State Personnel and Pensions
19 Section 9–504(a)
20 Annotated Code of Maryland
21 (2024 Replacement Volume and 2025 Supplement)

22 BY repealing and reenacting, with amendments,
23 Article – State Personnel and Pensions
24 Section 9–504(b)
25 Annotated Code of Maryland
26 (2024 Replacement Volume and 2025 Supplement)

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

29 **Article – Correctional Services**

30 9–601.1.

31 (e) (1) A pregnant incarcerated individual who is deemed to need infirmary
32 care shall be admitted to the infirmary on order of a primary care nurse practitioner, A
33 PHYSICIAN ASSISTANT, or AN obstetrician.

34 **Article – Estates and Trusts**

35 13–705.

(c) (2) Notwithstanding the provisions of paragraph (1) of this subsection, a petition for guardianship of a disabled person shall include signed and verified certificates of competency from the following health care professionals who have examined or evaluated the disabled person:

(i) Two licensed physicians; or

(ii) 1. One licensed physician; and

2. A. One licensed psychologist;

B. One licensed certified social worker—clinical; [or]

C. One nurse practitioner; **OR**

D. ONE LICENSED PHYSICIAN ASSISTANT.

Article – Health – General

5–606.

(a) (1) Prior to providing, withholding, or withdrawing treatment for which authorization has been obtained or will be sought under this subtitle, the attending physician and a second physician [or a], nurse practitioner, **OR PHYSICIAN ASSISTANT**, one of whom shall have examined the patient within 2 hours before making the certification, shall certify in writing that the patient is incapable of making an informed decision regarding the treatment. The certification shall be based on a personal examination of the patient.

(2) If a patient is unconscious, or unable to communicate by any means, the certification of a second physician [or a], nurse practitioner, **OR PHYSICIAN ASSISTANT** is not required under paragraph (1) of this subsection.

(3) When authorization is sought for treatment of a mental illness, the second physician [or the], nurse practitioner, **OR PHYSICIAN ASSISTANT** may not be otherwise currently involved in the treatment of the person assessed.

(4) The cost of an assessment to certify incapacity under this subsection shall be considered for all purposes a cost of the patient's treatment.

(b) A health care provider may not withhold or withdraw life-sustaining procedures on the basis of an advance directive where no agent has been appointed or on the basis of the authorization of a surrogate, unless:

(1) The patient's attending physician and a second physician [or a], nurse practitioner, **OR PHYSICIAN ASSISTANT** have certified that the patient is in a terminal condition or has an end-stage condition; or

(2) Two physicians, one of whom is a neurologist, neurosurgeon, or other physician who has special expertise in the evaluation of cognitive functioning, certify that the patient is in a persistent vegetative state.

10-601.

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

(G) "PHYSICIAN ASSISTANT" MEANS AN INDIVIDUAL WHO IS LICENSED UNDER TITLE 15 OF THE HEALTH OCCUPATIONS ARTICLE TO PRACTICE AS A PHYSICIAN ASSISTANT.

[(g)] (H) "Psychiatric nurse practitioner" means an individual who is:

(1) Licensed as a registered nurse and certified as a nurse practitioner under Title 8 of the Health Occupations Article; and

(2) Practicing in the State as a certified registered nurse practitioner-psychiatric mental health.

[(h)] (I) "Psychologist" means an individual who is licensed under Title 18 of the Health Occupations Article to practice psychology.

10-610.

(c) A facility may not admit an individual under this section unless:

(1) The individual has a mental disorder;

(2) The mental disorder is susceptible to care or treatment;

(3) The applicant understands the nature of a request for admission; and

(4) Assent to the admission has been given:

(i) By the admitting physician of the facility; or

(ii) For a child or adolescent unit of a State facility, by:

1. 1 physician and 1 psychologist;

2. 1 PHYSICIAN AND 1 PHYSICIAN ASSISTANT;

[2.] 3.2 physicians;

[3.] 4.1 physician and 1 psychiatric nurse practitioner;

[4.] 5.1 physician and 1 licensed certified social worker—clinical;

or

[5.] 6.1 physician and 1 licensed clinical professional counselor.

10–611.

(b) A disabled person may apply for voluntary admission of the disabled person if:

(1) The disabled person submits a formal, written application that contains the disabled person's personal information and is on the form required by the Administration; and

(2) In accordance with subsections (c) through (e) of this section, either a physician and a psychologist, two physicians, [or] a physician and a psychiatric nurse practitioner, **OR A PHYSICIAN AND A PHYSICIAN ASSISTANT** certify that:

(i) The disabled person has the capacity to execute an application for voluntary admission; and

(ii) The disabled person understands both the criteria for voluntary admission set forth under this section and the procedure for requesting discharge from the facility.

(c) (1) A certificate for voluntary admission of a disabled person under subsection (b) of this section shall:

(i) Be based on the personal examination of the physician, psychologist, [or] psychiatric nurse practitioner, **OR PHYSICIAN ASSISTANT** who signs the certificate; and

(ii) Be in the form that the Secretary of Health adopts, by rule or regulation.

(2) The rules and regulations shall require the form to include an opinion that:

(i) The disabled person has a mental disorder;

(ii) The mental disorder is susceptible to care or treatment;

(iii) The disabled person understands the nature of the request for admission; and

(iv) The disabled person is able to give continuous assent to retention by the facility.

(e) A certificate may not be used for an admission if the physician, psychologist, [or] psychiatric nurse practitioner, **OR PHYSICIAN ASSISTANT** who signed the certificate:

(1) Has a financial interest, through ownership or compensation, in a proprietary facility and admission to that proprietary facility is sought for the disabled person whose status is being certified; or

(2) Is related, by blood or marriage, to the disabled person or the guardian of the person of the disabled person.

10–615.

Each application for involuntary admission to a facility or Veterans' Administration hospital under this part shall:

(6) Be accompanied by the certificates of:

(i) 1 physician and 1 psychologist;

(ii) 2 physicians;

(III) 1 PHYSICIAN AND 1 PHYSICIAN ASSISTANT;

[(iii)] (IV) 1 physician and 1 psychiatric nurse practitioner;

[(iv)] (V) 1 physician and 1 licensed certified social worker—clinical;

or

[(v)] (VI) 1 physician and 1 licensed clinical professional counselor;

and

10–616.

(a) (1) A certificate for involuntary admission of an individual under this part shall:

(i) Be based on the personal examination of the physician, psychologist, psychiatric nurse practitioner, **PHYSICIAN ASSISTANT**, licensed certified

1 social worker—clinical, or licensed clinical professional counselor who signs the certificate;
2 and

3 (ii) Be in the form that the Secretary adopts, by rule or regulation.

4 (c) A certificate may not be used for an admission if the physician, psychologist,
5 psychiatric nurse practitioner, **PHYSICIAN ASSISTANT**, licensed certified social
6 worker—clinical, or licensed clinical professional counselor who signed the certificate:

7 (1) Has a financial interest, through ownership or compensation, in a
8 proprietary facility and admission to that proprietary facility is sought for the individual
9 whose status is being certified; or

10 (2) Is related, by blood or marriage, to the individual or to the applicant.

11 10–619.

12 Within 12 hours of notification by a physician, licensed psychologist, psychiatric
13 nurse practitioner, **PHYSICIAN ASSISTANT**, licensed certified social worker—clinical, or
14 licensed clinical professional counselor who has certified an individual under this part, a
15 facility operated by the Maryland Department of Health shall receive and evaluate the
16 individual certified for involuntary admission if:

17 (1) The individual's involuntary admission is not limited by § 10–617 of
18 this subtitle;

19 (2) An application for admission has been completed;

20 (3) A certifying physician, psychologist, psychiatric nurse practitioner,
21 **PHYSICIAN ASSISTANT**, licensed certified social worker—clinical, or licensed clinical
22 professional counselor is unable to place the individual in a facility not operated by the
23 Department; and

24 (4) The Department is unable to provide for the placement of the person
25 other than in a facility operated by the Department.

26 10–620.

27 (a) In Part IV of this subtitle the following words have the meanings indicated.

28 (f) (1) “Mental disorder” means the behavioral or other symptoms that
29 indicate:

30 (i) To a lay petitioner who is submitting an emergency petition, a
31 clear disturbance in the mental functioning of another individual; and

(ii) To the following health professionals doing an examination, at least one mental disorder that is described in the version of the American Psychiatric Association's "Diagnostic and Statistical Manual – Mental Disorders" that is current at the time of the examination:

1. Physician;
2. Psychologist;
3. Clinical social worker;
4. Licensed clinical professional counselor;
5. Clinical nurse specialist in psychiatric and mental health nursing (APRN/PMH);
6. Psychiatric nurse practitioner (CRNP–PMH);
7. **PHYSICIAN ASSISTANT**; or
- [7.] 8. Licensed clinical marriage and family therapist.

(2) "Mental disorder" does not include intellectual disability.

10–622.

(b) (1) The petition for emergency evaluation of an individual may be made by:

(i) A physician, psychologist, **PHYSICIAN ASSISTANT**, clinical social worker, licensed clinical professional counselor, clinical nurse specialist in psychiatric and mental health nursing, psychiatric nurse practitioner, licensed clinical marriage and family therapist, or health officer or designee of a health officer who has examined the individual;

(ii) A peace officer who personally has observed the individual or the individual's behavior; or

(iii) Any other interested person.

(2) An individual who makes a petition for emergency evaluation under paragraph (1)(i) or (ii) of this subsection may base the petition on:

(i) The examination or observation; or

(ii) Other information obtained that is pertinent to the factors giving rise to the petition.

(d) (1) A petitioner who is a physician, psychologist, **PHYSICIAN ASSISTANT**, clinical social worker, licensed clinical professional counselor, clinical nurse specialist in psychiatric and mental health nursing, psychiatric nurse practitioner, licensed clinical marriage and family therapist, health officer, or designee of a health officer shall give the petition to a peace officer.

(2) The peace officer shall explain to the petitioner:

(i) The serious nature of the petition; and

(ii) The meaning and content of the petition.

10-623.

(a) If the petitioner under Part IV of this subtitle is not a physician, psychologist, **PHYSICIAN ASSISTANT**, clinical social worker, licensed clinical professional counselor, clinical nurse specialist in psychiatric and mental health nursing, psychiatric nurse practitioner, licensed clinical marriage and family therapist, health officer or designee of a health officer, or peace officer, the petitioner shall present the petition to the court for immediate review.

10-624.

(a) (1) A peace officer shall take an emergency evaluatee to the nearest emergency facility if the peace officer has a petition under Part IV of this subtitle that:

(i) Has been endorsed by a court within the last 5 days; or

(ii) Is signed and submitted by a physician, psychologist, **PHYSICIAN ASSISTANT**, clinical social worker, licensed clinical professional counselor, clinical nurse specialist in psychiatric and mental health nursing, psychiatric nurse practitioner, licensed clinical marriage and family therapist, health officer or designee of a health officer, or peace officer.

10-628.

(a) (1) If an emergency evaluatee cannot pay or does not have insurance that covers the charges for emergency services, an initial consultant examination by a physician, **PHYSICIAN ASSISTANT**, or nurse practitioner, and transportation to an emergency facility and, for an involuntary admission of the emergency evaluatee, to the admitting facility, the Department shall pay the appropriate party the actual cost or a reasonable rate for this service, whichever is lower, except that hospitals shall be paid at rates approved by the Health Services Cost Review Commission.

13-701.

1 The Emergency and Allergy Treatment Program is a program in the Department for
2 the purpose of providing a means of authorizing certain individuals to administer
3 life-saving treatment to individuals who have severe adverse reactions to allergens or
4 insect stings when physician, **PHYSICIAN ASSISTANT**, registered nurse practitioner, or
5 emergency medical services are not immediately available in a youth camp.

6 13-705.

7 (a) (1) A registered nurse practitioner, **PHYSICIAN ASSISTANT**, or a physician
8 licensed to practice [medicine] in the State may prescribe emergency use epinephrine in
9 the name of a certificate holder.

10 (2) A registered nurse practitioner, a pharmacist [licensed to practice
11 pharmacy in the State], A **PHYSICIAN ASSISTANT**, or a physician **LICENSED TO**
12 **PRACTICE IN THE STATE** may dispense emergency use epinephrine under a prescription
13 issued to a certificate holder.

14 (b) A certificate holder may:

15 (1) On presentment of a certificate, receive from any registered nurse
16 practitioner, **PHYSICIAN ASSISTANT**, or any physician licensed to practice [medicine] in
17 the State a prescription for emergency use epinephrine and the necessary paraphernalia
18 for the administration of emergency use epinephrine; and

19 (2) Possess and store prescribed emergency use epinephrine and the
20 necessary paraphernalia for the administration of emergency use epinephrine.

21 (c) In an emergency situation when registered nurse practitioner, physician,
22 **PHYSICIAN ASSISTANT**, or emergency medical services are not immediately available, a
23 certificate holder or agent may administer emergency use epinephrine to an individual who
24 is experiencing or believed in good faith by the certificate holder or agent to be experiencing
25 anaphylaxis.

26 13-707.

27 (b) (1) A cause of action may not arise against any physician **OR PHYSICIAN**
28 **ASSISTANT** for any act or omission when the physician **OR PHYSICIAN ASSISTANT** in good
29 faith prescribes or dispenses emergency use epinephrine and the necessary paraphernalia
30 for the administration of emergency use epinephrine to a person certified by the
31 Department under this subtitle.

32 (c) This section does not affect, and may not be construed as affecting, any
33 immunities from civil liability or defenses established by any other provision of the Code or
34 by common law to which a volunteer, registered nurse practitioner, physician, **PHYSICIAN**
35 **ASSISTANT**, or pharmacist may be entitled.

1 18–214.

2 (b) There is a Statewide Advisory Commission on Immunizations.

3 (d) The following members are subject to term limits:

4 (11) One physician member of the American College of Physicians – Internal
5 Medicine Society of Maryland; [and]

6 **(12) ONE PHYSICIAN ASSISTANT MEMBER OF THE MARYLAND**
7 **ACADEMY OF PHYSICIAN ASSISTANTS; AND**

8 [(12)] **(13)** Up to three additional members selected by the Secretary.

9 19–705.1.

10 (a) The Secretary shall adopt regulations that set out reasonable standards of
11 quality of care that a health maintenance organization shall provide to its members.

12 (b) (1) The standards of quality of care shall include:

13 (vi) A requirement that each member shall have an opportunity to
14 select a primary physician, **A PHYSICIAN ASSISTANT**, or a certified nurse practitioner from
15 among those available to the health maintenance organization; and

16 (2) This subsection may not be construed to require that a health
17 maintenance organization include certified nurse practitioners on the health maintenance
18 organization’s provider panel as primary care providers.

19 19–2001.

20 (a) (1) In this subtitle the following words have the meanings indicated.

21 (4) (i) Except as provided in subparagraph (ii) of this paragraph,
22 “health care practitioner” means any individual licensed or certified under the Health
23 Occupations Article who:

24 1. Is a licensed practical nurse, registered nurse, or certified
25 nursing assistant; or

26 2. Practices in an allied health care field, as defined by the
27 Office in regulation.

28 (ii) “Health care practitioner” does not include:

29 1. An acupuncturist;

2. A dentist;
3. A nurse anesthetist;
4. A nurse midwife;
5. A nurse practitioner;
6. A pharmacist;
7. A physician; [or]
8. **A PHYSICIAN ASSISTANT; OR**
- [8.] **9.** A podiatrist.

(b) (1) A health care staff agency shall be licensed by the Office before referring health care practitioners to a health care facility to render temporary health care services at a health care facility in this State.

Article – Human Services

7–404.

(a) (1) The Department shall ensure that at any given time at least 50% of the eligible individuals receiving financial assistance under the Program are:

- (i) gainfully employed;
- (ii) actively seeking employment; or
- (iii) attending an institution of postsecondary or higher education, as defined in § 10–101 of the Education Article.

(2) The remainder of the eligible individuals receiving financial assistance under the Program shall be individuals who:

- (i) reside in a nursing facility or similar institution licensed to provide chronic or intermediate care and who will be deinstitutionalized as a result of the Program; or
- (ii) are certified by an attending physician, **PHYSICIAN ASSISTANT**, or certified nurse practitioner as being at risk of placement in a nursing facility or similar institution licensed to provide chronic or intermediate care if attendant care services are not received in the community.

Article – State Personnel and Pensions

9–504.

(a) An employee who uses sick leave for 5 or more consecutive workdays for personal illness or disability or the illness or disability of a member of the employee's immediate family may not receive payment under this subtitle unless the employee gives the employee's immediate supervisor an original certificate of illness or disability.

(b) The certificate required under subsection (a) of this section shall be signed by one of the following:

(1) a medical doctor who is authorized to practice medicine or surgery by the state in which the doctor practices;

(2) if authorized to practice in a state and performing within the scope of that authority:

(i) a chiropractor;

(ii) a clinical psychologist;

(iii) a dentist;

(iv) a licensed certified social worker – clinical;

(v) a nurse midwife;

(vi) a nurse practitioner;

(vii) an oral surgeon;

(viii) an optometrist;

(ix) a physical therapist;

(X) A PHYSICIAN ASSISTANT;

~~[(x)]~~ **(XI)** a podiatrist; or

~~[(xi)]~~ **(XII)** a licensed professional counselor – clinical;

(3) an accredited Christian Science practitioner; or

(4) a health care provider as defined by the federal Family Medical Leave

Act.

1 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
2 October 1, 2026.