

## E. ALBERT REECE, MD, PhD, MBA

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**Senator Clarence K. Lam, MD**Miller Senate Office Building, Room 420

Miller Senate Office Building, Room 420 11 Bladen St., Annapolis, MD 21401

**Delegate Alfred C. Carr, Jr.**House Office Building, Room 222
6 Bladen St, Annapolis, MD 21401

Dear Maryland Elected Officials:

On behalf of the University of Maryland, School of Medicine we write to thank you for your leadership as original sponsors of the bipartisan S.B. 34, and H.B. 299, the "State Board of Physicians- Genetic Counselors- Licensing." Currently, Maryland does not legally specify who may use the title of genetic counselor. Licensure for genetic counselors is an important mechanism to help consumers identify appropriately qualified genetic counseling providers. We strongly support this legislation to license genetic counselors in the state of Maryland.

The rapid growth of medical genetics has affected virtually all areas of medicine. This specialized expertise aids physicians, patients, and families by providing a significant role in education surrounding the genetic contributions to disease and the implications for an individual's health – both medical and psychological – and the health of family members. In short, genetic counselors empower providers by providing genetic services and interpretation, which is vital in the goal of precision medicine. As personalized medicine becomes increasingly important given the vast array of research findings available, so does the role of the genetic counselor in the care continuum.

Genetic counselors are Master's-trained healthcare professionals who provide consumers with information, education, counseling, advocacy, and emotional support for medical conditions that have genetic indications. Licensure for genetic counselors is essential to ensuring that genetic counseling providers are appropriately trained and credentialed so that individuals receive proper information and care. Licensure of genetic counselors serves as a title protection to prevent non-genetic counseling trained individuals from



attempting to and ordering genetic tests or targeting vulnerable patient populations, such as Medicare patients or patients whose family members are impacted by genetic disease.

The bill will result in cost savings of healthcare dollars via identification of accurate testing on appropriate individuals. Studies show that healthcare providers without training in genetics often order more expensive genetic testing than is medically indicated, amounting to unnecessary health care expenditures. A number of studies suggest that 30% of genetic tests ordered by providers without specialized training are inappropriate.

The University of Maryland School of Medicine seeks to further the nation's understanding of human heredity and genetic medicine through innovative teaching, patient care and research in human and medical genetics as well as providing national and international leadership in genetic medicine. We are proud to be the first genetic counseling training program in the state of Maryland. Since 1996, the University of Maryland Master's in Genetic Counseling training program has successfully graduated over 150 genetic counselors, many of whom chose to remain in Maryland and provide genetic counseling services to the citizens of Maryland. Currently, there are 15 genetic counselors working in clinical, research and laboratory positions across the institution. The counselors work within the clinical specialties of adult genetic medicine, GYN/OB, maternal fetal medicine, cardiology, neurology, oncology, and pediatrics.

Licensure would strengthen the collaborative relationship of genetic counselors and treating physicians insofar as they will be working within a multidisciplinary setting and improving access and timeliness to genetic information. As genomics is increasingly becoming a vital part of patient care, integration of genetic counselors at every aspect of clinical care will be vital. In our opinion, absence of licensure for these highly trained professionals—our genetic counselors—will directly restrict provision of strongly needed clinical genetics services to patients; a need that is ever-increasing in Medicine today.

For these reasons, we respectfully ask that the Committee consider championing/supporting legislation for genetic counselor licensure in Maryland by recommending favorably SB34 and HB 299.

Thanking you kindly.

Sincerely yours,

E. Albert Reece, MD, PhD, MBA

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