



The Maryland State Dental Associations Concerns with HB 1041 – Health Occupation Boards - Uniform Reporting

Submitted by Daniel T. Doherty, Jr. on behalf of The Maryland State Dental Association

While the Maryland Stater Dental Association (MSDA) understands and respects the purpose and intent of HB 1041, it is concerned about an assumption that one size fits all. Some of the information required by HB 1041 may not be appropriate or applicable to some health occupations. For example, is general dentistry to be considered “primary care”? Many general dentists provide advanced dental procedures, such as prosthetics. MSDA would note that there is not a designation of “primary care dentistry”. Further, does §1-225 (B) (2) (II) mean medical pediatric care, or does it include dental care provided to children? MSDA would suggest that subsection (B) (2) (II) be stricken from the bill, or limited to medical practices, or specifically exclude dentistry.

The provisions of §1-225 (B) (3) are of questionable value and are ambiguous. This section could serve as a means for a health occupations board to play “gotcha”. First, if a provider is authorized to prescribe medications it is implicit that the provider will prescribe medications. However, what does an intention to *regularly prescribe medication* mean? Is it daily, weekly, monthly? How many times per day, week, month? This is a totally ambiguous question. Any inquiry should be limited to whether the provider is authorized to prescribe, and no more. That information should be sufficient.

Again, the provisions of §1-225(B) (4) are of concern. First, how does a provider who practices in adjoining jurisdictions, for example Maryland and Delaware, respond if the time spent in one state equals the time spent in the other, or if the time fluctuates over the course of a year?

Finally, §1-225 (E) (1) should be limited to providing “**appropriate information necessary to address the emergency**”.

In conclusion, while MSDA supports the concept to have health occupation boards obtain and maintain some personal and professional information, what information is the issue. What is appropriate information may vary greatly from one health occupation to another. For these reasons, the MSDA urges the Committee to move cautiously before reporting HB 1041 favorably.

Respectfully submitted by:
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