

TO: The Honorable Shane E. Pendergrass, Chair  
House Health and Government Operations Committee

FROM: Carolyn Applegate, MGC, CGC  
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Department of Genetic Medicine

DATE: February 2, 2021

On behalf of Johns Hopkins University and Medicine, thank you for the opportunity to support **HB0299 State Board of Physicians – Genetic Counselors – Licensing**. I am the genetic counselor manager in the Department of Genetic Medicine at Johns Hopkins University. I am also representing my genetic counselors as the vice-chair of the public policy committee of the Maryland and DC Society of Genetic Counselors. This bill would bring the state of Maryland in line with 29 other states that have statutes licensing qualified genetic counselors. Maryland genetic counselors unanimously support this bill.

Last session, the Education, Health, and Environmental Affairs Committee voted in favor of the bill. Since then we have worked with the Board of Physicians (the “Board”) to address their concerns as the Board submitted unfavorable testimony. We made significant progress, but the Board is requesting amendments that I do not believe are in the public’s best interest. One concern is the noted lack of a direct “nexus” between physicians and genetic counselors. We acquiesced to this concern and added language to the bill that licensed genetic counselors will refer patients to a licensed physician or appropriate healthcare provider, see 14-5G-12(B). One of the main purposes of this legislation is to increase access for Marylanders to qualified genetic counselors. Adding a referral requirement or collaborative agreement creates a barrier for individuals seeking genetic counseling services. There are clinical scenarios, such as testing for a familial mutation and carrier testing, where genetic counseling, not medical intervention, is sought by the patient. Efficient and direct access to genetic counseling services is in the public’s best interest.

The Board is also requesting to strike language that waives the requirement for licensure for one year after graduation from an accredited program. This language was also the result of a compromise. Last session’s bill created a temporary license for new graduates, which the Board argued was too administratively burdensome. Thus, we agreed to waive licensing requirements for one year with the stipulation that under this time-limited waiver, the genetic counselor will be directly supervised by a licensed physician or genetic counselor. This stipulation was made to protect the public.

It is absolutely imperative that new graduates from accredited programs have the ability

to practice immediately after graduation. Genetic counseling students have multiple rigorous clinical rotations and a requirement for graduation is demonstration of competency to practice independently. The certification exam is only given twice a year, in August and February, and there is no discussion at this time to increase the frequency; just ten years ago, the exam was given once every three years. There is already a shortage of genetic counselors, so preventing competent genetic counselors from practicing immediately after graduation decreases the public's access. Maryland is the home of two nationally recognized genetic counseling graduate programs of excellence. As states neighboring Maryland have temporary licenses, a waiver of licensing requirements is necessary to attract and retain the best graduates in order to expand the availability of genetic counseling services.

In Maryland, most genetic counselors work in tertiary care centers, but the field of genetics and genomics is expanding rapidly. Genetic counselors outside of Maryland have used telemedicine for years, referred to as "telegenetics". With the COVID-19 pandemic and associated telemedicine waivers, Maryland genetic counselors began providing telegenetics to Marylanders. In addition to being an effective and efficient means of providing care, providers and patients experienced the increase in access that results from telemedicine. Gratitude was expressed by many of our patients who have always driven from Western Maryland and the Eastern Shore to receive genetics services in the past. However, the lack of licensure left Marylanders vulnerable to receive services from individuals that have not met the minimum education requirements defined by this bill. This bill ensures accountability of providers by adding an investigative process of complaint and disciplinary action. This ensures that consumers receiving medical care in Maryland receive the same quality of care as they would receive in neighboring states where licensure exists.

Lastly, in this time of economic uncertainty, it is important to highlight that 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. Several studies suggest that 30% of genetic tests ordered by providers without specialized training are inappropriate.

It is my hope that this year, Maryland -- home of some of the greatest genetics research and clinical care in the world from Hopkins, the University of Maryland and the NIH -- put statutes in place to permit highly educated, licensed and Board-certified genetic counselors to provide services to the thousands of patients who need them. Therefore, we urge a favorable report on HB0299.

Sincerely,



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