7a - SB 899 - EHEA - MDH - LOSWA.docx.pdf Uploaded by: Heather Shek

Position: FAV



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

February 22, 2022

The Honorable Paul G. Pinksy Chair, Senate Education, Health, and Environmental Affairs Committee 2 West Miller Senate Office Building Annapolis, Maryland 21401

RE: SB 899 - Health Occupations Boards - Authority Over Staffing and Infrastructure Operations - Letter of Support with Amendments

Dear Chair Pinksy and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of support with amendments for Senate Bill (SB) 899 - Health Occupations Boards - Authority Over Staffing and Infrastructure Operations.

The goal of this legislation is to improve constituent and customer service of the boards and make sure that health occupation licensees are able to apply and renew in a prompt and timely manner. Constituent inquiries are often sent to MDH, however under Health Occupations, § 1-203, MDH lacks the statutory authority or oversight over the Boards to ensure they are handled appropriately. From January 20, 2020 to February 3, 2022 MDH received 3,870 constituent inquiries related to the boards. The top three trending inquiry topics were licensing, complaints against licensees, and the lack of customer service from the boards.

SB 899 establishes that the Secretary of Health has authority over the infrastructure operations of health occupations boards (the boards) and provides the Secretary with the ability to appoint the executive directors of the boards with the advice and consent of each board. Additionally, funding for the support of the infrastructure operations will come from MDH general funds. Please note, SB 899 does **not** provide the Secretary with any authority over the core functions of the boards including licensing, discipline, investigations and scope of practice decisions.

As reported by some of the boards there are challenges keeping up with workloads while also performing necessary administrative functions. For example, the Board of Nursing reported in this year's Joint Chairmen's Report that their fiscal, information technology, and human resource systems are not working.¹ The Board of Professional Counselors reported in their annual report

¹ 2021 Joint Chairmen's Report (p. 93) on nursing workload and staffing. http://dlslibrary.state.md.us/publications/JCR/2021/2021_93.pdf

that they still do not have enough staff to handle the backlog of complaints.² This bill will help alleviate those operational and administrative burdens, freeing up current staff to handle complaints and customer inquiries.

Lastly, the Department of Information Technology and MDH are working collaboratively to modernize the board's licensing systems through Maryland OneStop to create a common licensing platform across all boards.³ MDH is eager to provide the OneStop licensing system to all the boards so Marylanders can benefit from this modern and easy-to-use system. MDH has offered to cover the costs of this system to the boards but only one board has signaled their intent to take advantage of this offer.

We support the Sponsor's amendments.

If you have any questions, please contact Heather Shek, Director of Governmental Affairs, at <u>heather.shek@maryland.gov</u> or (443) 695-4218.

Sincerely,

Dennis F. Johnada

Dennis R. Schrader Secretary

² 2021 Joint Chairmen's Report (p. 92) on fee structure of Board of Licensed Professional Counselors and Therapists. <u>http://dlslibrary.state.md.us/publications/JCR/2021/2021_92_2021.pdf</u>

³ 2021 Joint Chairmen's Report (p. 92) on Enterprise License Major Information Technology Project for Health Professionals Boards and Commissions. <u>http://dlslibrary.state.md.us/publications/JCR/2021/2021_92a.pdf</u>

SB899_ Health Occupation Boards Testimony.pdf Uploaded by: Sen. Cheryl Kagan

Position: FAV

CHERYL C. KAGAN *Legislative District 17* Montgomery County

Vice Chair Education, Health, and Environmental Affairs Committee

Joint Audit Committee Joint Committee on Federal Relations



Miller Senate Office Building 11 Bladen Street, Suite 2 West Annapolis, Maryland 21401 301-858-3134 · 410-841-3134 800-492-7122 Ext. 3134 Fax 301-858-3665 · 410-841-3665 Cheryl.Kagan@senate.state.md.us

THE SENATE OF MARYLAND Annapolis, Maryland 21401

SB899: Health Occupations Boards - Authority Over Staffing and Infrastructure Operations

Senate Education, Health, and Environmental Affairs Committee Tuesday, February 22, 2022 | 1pm

Our 20 Health Occupations Boards are composed of medical professionals, many of whom are practicing clinicians with no time to handle administrative duties. This causes the Boards to fall behind on their workload.

The Board of Nursing has the largest number of open Customer Service Inquiries-- 1,186. According to a <u>recent WBAL news article</u>, "On some mornings, the lines at the Maryland Board of Nursing's office in northwest Baltimore stretches around the side of the building with 100 or more people."

A number of constituents have contacted my office, complaining about delays in getting their nursing license. No one should have to ask their legislators to contact the Maryland Department of Health (MDH) in order to finally obtain their earned credentials.

As amended, <u>SB899</u> (cross-filed with Del. Krebs) would take over administrative operations from the Boards and give these responsibilities to MDH in order to reduce their workload. This would include overseeing human resources, information technology, procurement, Budget and Management resources, office space, telecommunications, and audit compliance.

Shifting these tasks to MDH (which has the staff and financial capability to handle the work) would allow Boards to focus on more important matters in a timely fashion, including issuing licenses; collecting fees; investigating complaints; and conducting disciplinary action.

In addition to shifting the administrative tasks, the amended version of this bill will give the Secretary of Health the authority to appoint each Executive Director-- but only with advice and consent of the respective Board. It will also allow the Secretary to set the compensation of Board staff in consultation with the Secretary of Budget and Management. This is in an effort to ensure that the boards are held accountable for their deliverables.

By relieving Board staff of their administrative duties and shifting the burden to MDH, service for our constituents will improve.

I urge a favorable report on SB899.

MPA Testimony 2022 - Unfavorable - SB 899 - Health Uploaded by: Pat Savage

Position: UNF



10480 Little Patuxent Parkway, Ste 910, Columbia, MD 21044. Office 410-992-4258. Fax: 410-992-7732. www.marylandpsychology.org

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EXECUTIVE DIRECTOR Stefanie Reeves, CAE Senator Paul G. Pinsky, Chair Cheryl C. Kagan, Vice Chair Miller Senate Office Building, 2 West Annapolis, MD 21401

RE: SB 899 - Unfavorable

Dear Chair, Vice-Chair, and Members of the Committee:

The Maryland Psychological Association, (MPA), which represents over 1,000 doctoral level psychologists throughout the state, asks the **Senate Education**, **Health**, **and Environmental Affairs Committee to unfavorably report on SB 899**.

We believe that the Board of Examiners of Psychologists can operate with adequate transparency, while best serving the mission of protecting the citizens of Maryland in its current form. Placing the responsibility for determining key members of the Board of Examiners in the hands of the Secretary of Health seems to risk the potential for these individuals to become political appointees which we do not believe would be in the best interest of our citizens nor for psychologists. Having members of the Board of Examiners, i.e., chair and vice chair independently appointed, through a vetting process that involves members of the psychological community and the Governor, has worked well and provides the professional expertise on the board necessary to make complicated decisions required of the BOE to protect our citizens safety.

For these reasons, and many others, the MPA urges the Senate Education, Health, and Environmental Affairs Committee to issue an unfavorable report on SB 899.

Please feel free to contact MPA's Executive Director Stefanie Reeves at <u>exec@marylandpsychology.org</u> if we can be of assistance.

Sincerely,

cc:

Linda McGhee

Linda McGhee, Psy.D., JD President

R. Patrick Savage, Jr.

R. Patrick Savage, Jr., Ph.D. Chair, MPA Legislative Committee

Richard Bloch, Esq., Counsel for Maryland Psychological Association Barbara Brocato & Dan Shattuck, MPA Government Affairs

2022 Joint Testimony from Public Policy Partners' Uploaded by: Robyn Elliott

Position: UNF







То:	Senate Education, Health, and Environmental Affairs Committee
Bill:	SB 899 - Health Occupations Boards – Authority Over Staffing and Infrastructure Operations
Date:	February 22, 2022
Position:	Oppose

We appreciate the opportunity to be able to submit testimony in opposition to *Senate Bill 899 – Health Occupations Boards – Authority Over Staffing and Infrastructure Operations*. Our organizations are the Maryland Nurses Association, Licensed Clinical Professional Counselors of Maryland, American College of Nurse Midwives – Maryland Affiliate, Maryland Occupational Therapy Association, and the National Association of Social Workers – Maryland.

The bill provides for general fund infrastructure support in exchange for the Secretary of Health having more authority over the boards. We agree that there is merit to considering the question of general fund support for licensure boards. These boards are Maryland's front-line in ensuring quality of care, as they have the responsibility for ensuring health care practitioners meet standards for education, experience, and competency. Certain large projects, such as building licensure databases or reinforcing cybersecurity systems, may be appropriate for some level of general funds, rather than be entirely funded from licensure fees.

However, we believe that this bill shifts too much authority over the boards to the Secretary. Occupational licensure boards are intended to have independent authority over licensure, disciplinary, and any policy issues that come before a board. While the bill attempts to shield these core functions from the Secretary's influence, we think that the reality will be different. By giving the Secretary authority to be involved in decision-making about an executive director and other staff, the bill essentially puts the Secretary in a supervisory role. It may be difficult for board staff to truly shield licensure and disciplinary decisions from someone with a level of authority over their employment.

We also question whether the Secretary of Health should be burdened with more management responsibilities over the boards. There are twenty-one health occupation boards, and one Secretary of Health. We want a Secretary of Health to be focused on strengthening the core public health infrastructure at the State- and community-levels. As we have seen during the pandemic, our public health systems are woefully under-resourced.

We ask for an unfavorable report. If we can provide any additional information, please contact Robyn Elliott at <u>relliott@policypartners.net</u> or Scott Tiffin at <u>stiffin@policypartners.net</u>.

7b - SB 899 - EHEA - Health Occ Boards - LOO.docx.

Uploaded by: State of Maryland (MD) Position: UNF



Maryland Health Occupations Boards

4201 Patterson Avenue Baltimore, MD 21215 Maryland Board of Nursing 4140 Patterson Avenue Baltimore, MD 21215

Maryland Board of Occupational Therapy Practice

Spring Grove Hospital Center 55 Wade Avenue, Tuerk Bldg. Baltimore, MD 21228 Maryland Board of Dental Examiners Spring Grove Hospital Center 55 Wade Avenue, Benjamin Rush Bldg. Baltimore, MD 21228

2022 SESSION POSITION PAPER

BILL NO:	SB 899
COMMITTEE:	Education, Health, and Environmental Affairs
POSITION:	Oppose

TITLE: Health Occupations Boards – Authority Over Staffing and Infrastructure Operations

BILL ANALYSIS: This Bill transfers authority over the Health Occupations Boards' "infrastructure operations" from the boards themselves to the Secretary of Health. Additionally, the Bill gives the Secretary the authority to employ a staff for each board and designate one staff member as executive director (both in consultation with the specific board) and grants the Governor the authority to appoint a board member as board chair/president (again in consultation with the specific board). The Bill also includes further changes related to these provisions.

POSITION AND RATIONALE: The State Acupuncture Board; State Board of Examiners for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists and Music Therapists; State Board for Certification of Residential Child Care Program Professionals; State Board of Chiropractic Examiners; State Board of Dental Examiners; State Board of Environmental Health Specialists; State Board of Massage Therapy Examiners; State Board of Morticians and Funeral Directors; State Board of Nursing; State Board of Examiners of Nursing Home Administrators; State Board of Occupational Therapy Practice; State Board of Examiners in Optometry; State Board of Pharmacy; State Board of Physical Therapy Examiners; State Board of Podiatric Medical Examiners; State Board of Professional Counselors and Therapists; State Board of Psychologists; and State Board of Social Work Examiners oppose SB 899.

The Boards understand that the Department of Health and Secretary believe the legislation is necessary to ensure smooth and uniform operations across the 20 Health Occupations boards. The Boards, however, believe the legislation as proposed is vague and overly broad, unnecessarily politicizes the boards' internal governance, decreases the boards' autonomy, and adds additional unintended administrative duties for the Secretary.

1. The proposed legislation transfers authority over "infrastructure operations" from the boards themselves to the Secretary.

SB 899 as proposed transfers the boards' authority over their own "infrastructure operations" – defined as "administrative activities . . . including tools and resources for the use and support of deliberative actions" – to the Secretary. The proposed legislation clarifies that "infrastructure operations" does not include "licensing, investigation, or disciplinary activities," but it does not otherwise define the term "infrastructure operations." Because the term "infrastructure operations" is undefined, the boards are unsure what it is meant to include; the term could include a wide range of board operations, from the everyday acquisition of office supplies to information technology systems to board obligations under the Open Meetings Act and Public Information Act to the boards' core legislative and regulatory operations. The boards believe it may be difficult, if not impossible, to separate "infrastructure operations," from the boards' regulatory and policy-making responsibilities and from their "licensing, investigation, and disciplinary activities." Having two different sources (the Secretary and the Boards) responsible for these two interrelated functions will lead to confusion and conflict. The Boards are concerned that this change could compromise its autonomy where it is most essential – in the policy and practice decisions where the board members' knowledge and expertise is crucial.

Additionally, the Boards note that the overwhelming majority (if not all) of the boards are more than capable of handling their own infrastructure operations without any cause for concern. Although funding can certainly be an issue for some of the smaller boards in particular, we have continually succeeded in carrying out our core functions and responding to any and all customer/consumer/public complaints. The Boards believe that by enacting this change, the Department and the Secretary will be adding a massive workload to their already busy schedules that will not significantly change the user experience with the boards.

2. The proposed legislation changes the boards' officer election process and gives the Governor the power and duty to appoint board chairs/presidents in consultation with the specific board.

The legislation as proposed amends the boards' practice acts to require that the Governor appoint a board chair/president "in consultation with" the board; the proposed legislation further allows the chair/president to select a vice chair/vice president and authorizes the boards to establish a process for the election of any further officers that may be necessary. Currently, the overwhelming majority of boards elect a chair/president from among their peers based on who is in the best position to lead the board in the coming year, a decision based not on seniority or political affiliation, but based on dedication to the board and its mission, the time and wherewithal to represent the board's interests throughout the year (including in Annapolis), and a sufficient knowledge of board functions to allow a smooth transition and continued board effectiveness year-to-year. Unlike board members, the Governor is simply not in the position to observe and determine who is best suited and qualified to lead the board. The Boards are concerned that this change will turn a board chair/president into a political appointment, determined based on political party and a particular Governor's goals and policy beliefs, rather than knowledge of administrative operations, foresight related to the practice standards, and the continued smooth operation of the boards. Additionally, the Boards note that changing the selection process for the boards' chairs/presidents does not address any underlying issues related to infrastructure operations, including a lack of funding and staffing. The Boards appreciate that the Governor would have to at least consult each board regarding the appointment; however, consultation does not require approval or agreement, and the Boards believe the boards themselves are uniquely qualified to select a chair/president.

3. The proposed legislation gives the Secretary authority over the boards' staffing, including the hiring, evaluation, and retention of executive directors.

The proposed legislation further amends the boards' practice acts to allow the Secretary, rather than the boards themselves, to employ a staff for each board and designate one of the staff members as executive director, again in consultation with the specific board. Currently, the vast majority of executive directors serve at the pleasure of the board and are hired and evaluated by the board. As with the chair/president position, the boards hire executive directors who have the skills and experiences necessary to lead the specific board's mission and day-to-day operations based on the particular demands of that board and that practice. Again, the Secretary is simply not in the same position as the boards to make such a decision for that practice, nor does the Secretary have as much time as the boards do to dedicate to the hiring and evaluation process. In addition, the Boards note that, as above, changing the appointment process does not address any underlying structural issues related to a lack of funding and staffing. Although the Boards once again appreciate that each board would at least be consulted on these decisions, the Boards again note that consultation is not approval or agreement and believes that the boards should be fully empowered to employ their own staff.

Importantly, the Boards note that Md. Code Ann. Health Occ. § 1-217 already provides that the Secretary "shall confirm the appointment of each administrator or executive director to each health occupations board authorized to issue a license or certificate under this article." Essentially, the law already provides the Secretary veto power over the boards' employment of an executive director, which provides the Department with direct input on the boards' hiring decisions.

In situations in which the Secretary would act with respect to a board's function, the Bill does not address circumstances in which the Secretary has a conflict of interest or has communicated with people outside of an official board proceeding. The major concern of the Boards is that involvement by the Secretary can inject political influence into the boards' processes. This concern is only enhanced if the Bill does not require the Secretary's recusal in cases in which the Secretary has a conflict of interest or has been influenced by communications outside of a board's proceeding.

The Boards are also concerned that the Secretary having control over staffing the boards could eventually lead to the consolidation of staff across boards, particularly in times of state budget constraints. Most boards, however, are dealing with a shortage of appropriate staff, not an overabundance, and the particular intricacies of each board's statutes and regulations make sharing staff an especially difficult undertaking. Further, the Boards note that the Secretary is also a political appointee, and it would be difficult, if not impossible, to ensure smooth board operations if the entire staff is at risk of being replaced every four years. The Boards are concerned that all boards' decisions, which should be focused at all times on the health, safety, and welfare of the people of Maryland, could be compromised if the boards are turned into fully political bodies.

Finally, the Boards note that another relevant bill, SB 440 (cross-filed with HB 625), has already been considered by this Committee. That Bill, entitled "Commission to Study the Health Care Workforce Crisis in Maryland – Establishment," establishes a commission to study various issues potentially affecting the number of health care workers working in Maryland. Among the issues the commission would be empowered to study and report on would be the boards' licensing system and processes and "the relationship between the health occupations boards and the Maryland Department of Health," including

the Secretary's authority over the boards and additional services the Department could provide to the boards. Given the scope of the commission's study, the Boards believe SB 899 is premature.

The Boards appreciate the Committee's consideration of its concerns and reservations about this Bill and strongly believes any concerns the General Assembly has about the operations of the boards can be more readily addressed under the existing board structure, without further complicating or politicizing the boards' operations.

For all of these reasons, the State Acupuncture Board; State Board of Examiners for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists and Music Therapists; State Board for Certification of Residential Child Care Program Professionals; State Board of Chiropractic Examiners; State Board of Dental Examiners; State Board of Environmental Health Specialists; State Board of Massage Therapy Examiners; State Board of Morticians and Funeral Directors; State Board of Nursing; State Board of Examiners of Nursing Home Administrators; State Board of Occupational Therapy Practice; State Board of Examiners in Optometry; State Board of Pharmacy; State Board of Physical Therapy Examiners; State Board of Podiatric Medical Examiners; State Board of Professional Counselors and Therapists; State Board of Psychologists; and State Board of Social Work Examiners, respectfully urges the Committee to vote unfavorably on SB 899.

Thank you for your consideration. If you have a question for a specific board, please contact Lillian Reese, the legislative liaison for the Boards, at 443-794-4757 or at <u>lillian.reese@maryland.gov</u> who will provide you with their contact information.

The opinion of the Boards expressed in this document does not reflect that of the Department of Health or the Administration.

SB 899_R. Jones 1199SEIU_UNFAV Final.pdf Uploaded by: Stephanie Anderson

Position: UNF



Testimony of Ricarra Jones, Political Director of 1199 SEIU on

SB 899 Authority Over Staffing and Infrastructure Operations Act

Position: UNFAVORABLE

February 22, 2022

Dear Chair Paul G. Pinsky and Members of the Education, Health, and Environmental Affairs Committee:

1199SEIU Healthcare Workers East is the largest healthcare union in the country with, with over 450,000 members throughout Massachusetts, New York, New Jersey, Maryland, Florida and Washington, D.C. We oppose SB 899.

SB 899 The Authority Over Staffing and Infrastructure Operations bill removes key decisionmaking autonomy from numerous specialized State health licensing boards to the detriment of those entities and the Maryland workers they serve, and negatively impacts funding for certain board operations.

Under current law, members of numerous State health licensing boards are granted the authority to appoint executive officers and make internal determinations on compensation for members. Members of these licensing boards address very specific areas of the healthcare industry and have the expertise and knowledge necessary to make important decisions about the membership and operation of their own boards.

SB 899 The Authority Over Staffing and Infrastructure Operations bill takes decision making autonomy away from on-the-ground subject matter experts and instead, requires health licensing boards to consult with entities such as the Governor and the Secretary of Health on important matters such as appointment of board executive officers, setting service terms for those executive officers, and setting compensation amounts for certain board employees.

Further, SB 899 The Authority Over Staffing and Infrastructure Operations bill would require staffing for health licensing boards to be in accordance with the State budget rather than the budget of those boards, and consultation with outside State entities is mandatory.

Not only will health licensing boards lose their current management autonomy under SB 899 The Authority Over Staffing and Infrastructure Operations, board will also lose access to funding for certain internal operations.

SB 899 The Authority Over Staffing and Infrastructure Operations would not allow funds currently managed by health licensing boards to be used to pay for "infrastructure operations", which are defined as "administrative activities of a board or commission...including tools and resources for the use and support of deliberative actions".

Maryland's numerous specialized health licensing boards should not lose their current autonomy to act independently on staffing and membership matters, and should not lose access to funding for administrative activities which are necessary for boards to fulfill their statutory and regulatory duties. Maryland's health licensing boards must continue to have the ability to manage internal operations using the best judgment of expert board members, without unnecessary pressure and interference from powerful state actors which may not appreciate important issues affecting different boards.

Further, it seems extremely likely that requiring involvement by entities such as the Governor and the Secretary of Health will lead to substantial delay in key areas of the operations of many, many health licensing boards. Delays in healthcare licensing will have a negative affect on many Marylanders.

For these reasons, we **OPPOSE SB 899** and ask for an **UNFAVORABLE** report.

Sincerely,

Ricarra Jones Maryland/DC Political Director 1199SEIU United Healthcare Workers- East Cell: 443-844-6513

7c - SB 899 - EHEA - BOP - LOI.docx.pdf Uploaded by: Maryland Department of Health Office of Governmental Affairs Position: INFO



Board of Physicians

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Damean W.E. Freas, D.O., Chair

2022 SESSION POSITION PAPER

BILL NO.:SB 899 – Health Occupations Boards – Authority Over Staffing and
Infrastructure OperationsCOMMITTEE:Education, Health, and Environmental Affairs
POSITION:Letter of Information

TITLE:Health Occupations Boards – Authority Over Staffing and
Infrastructure Operations

BILL ANALYSIS: This bill establishes authority by the Secretary of Health over infrastructure operations of health occupations boards and commissions. Specifically, regarding the Maryland Board of Physicians (the Board), the bill adds certain provisions to Health Occupations (H.O.) Article, Titles 1 and 14.

POSITION AND RATIONALE:

The Board wishes to provide the following information:

- The Board believes that the definition of "Infrastructure Operations," which is being added to H.O. § 1-203, is too broad. The term "administrative activities" and the phrase "tools and resources for the use and support of deliberative actions" utilized in the definition could have different meanings for each health occupations board. As the term "deliberative actions" is not defined, the Board is unclear regarding which operational costs would be considered in support of deliberative actions, and what would be considered licensing, investigation, or disciplinary activities.
- The bill adds to H.O. § 14-207 language that states that the Board of Physicians Fund "...may not be used to pay for infrastructure operations..." The Board seeks clarity on whether the Board would be required to funnel through the Maryland Department of Health (MDH) all requests for purchases related to "infrastructure operations." Given the broad definition of "infrastructure operations," if all operational costs and purchase requests first must be approved by MDH, this process will represent a significant loss of autonomy for the Board.
- The Board also seeks clarity on how the bill impacts the indirect costs of "infrastructure operations." For example, the Board pays for the salaries of 13.5 positions with the Office of the Attorney General. However, among the individuals who perform work for the Board,

only one assistant attorney general is assigned exclusively to the Board. Therefore, the Board is subsidizing work for other health occupations boards. In addition, the Board has indirect costs related to Board staffing, procurement, and information technology matters. The Board requests clarification regarding how SB 899 would revise the process for the handling of indirect costs, as the Board currently is assessed these costs by MDH and the Department of Information Technology.

• The bill adds language to H.O. § 14-203(a), permitting the Board chair to appoint a vice-chair. This already is a current practice of the Board.

Thank you for your consideration. For more information, please contact Matthew Dudzic, Health Policy Analyst, Maryland Board of Physicians, 410-764-5042.

Sincerely,

Dana WEM

Damean W. E. Freas, D.O. Chair, Maryland Board of Physicians

The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.