$\begin{array}{c} \rm J2 \\ \rm CF~HB~1252 \end{array}$

By: Senator Reilly

Introduced and read first time: February 15, 2022

Assigned to: Rules

A BILL ENTITLED

1 AN ACT concerning

2

Physicians and Allied Health Professions - Reorganization and Revisions

FOR the purpose of repealing obsolete and redundant language in, clarifying language in, and reorganizing certain provisions of law governing the State Board of Physicians and the regulation of physicians, physician assistants, and allied health professionals; authorizing the Board to regulate the allied health committees; repealing the requirement that the Board provide a certain data sheet; and generally relating to the State Board of Physicians and the regulation of physicians, physician assistants, and allied health professionals.

10 BY repealing

11 Article – Health Occupations

12 Section 14–101(n), 14–401.1(b) through (d), 14–405(f), 14–5A–02 through 14–5A–04, 13 14-5A-13, 14-5A-14, 14-5A-16, 14-5A-17.1, 14-5A-10, 14-5A-11, 14 14-5A-18.1, 14-5A-19, 14-5B-02 through 14-5B-04, 14-5B-10, 14-5B-12, 15 14-5B-12.1, 14-5B-13, 14-5B-14.1, 14-5B-15.1, 14-5B-16, 14-5C-0216 through 14–5C–04, 14–5C–11, 14–5C–12, 14–5C–14, 14–5C–14.1, 14–5C–16, 17 14-5C-18.1, 14-5C-19, 14-5D-02, 14-5D-03, 14-5D-09, 14-5D-12, 18 14-5D-12.1, 14-5D-13, 14-5D-15, 14-5D-16, 14-5D-16.1, 14-5E-02through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1, 14-5E-19, 19 20 14-5F-05, 14-5F-13, 14-5F-15.1, 14-5F-17, 21 14-5G-02 through 14-5G-04, 14-5G-10, 14-5G-11, 14-5G-13, 14-5G-15, 22 14-5G-16, 14-5G-19, 14-5G-21, 14-5G-22, 15-203, 15-204, 15-206, 23 15-304, 15-305, 15-307, 15-308, 15-310 through 15-312, and 15-315 24 through 15–316.1

25 Annotated Code of Maryland

26 (2021 Replacement Volume)

27 BY renumbering

28 Article – Health Occupations

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1
          Section 14–206, 14–206.1, 14–301, 14–302, 14–306, 14–307, 14–308, 14–308.1,
 2
                14-309, 14-311, 14-312, 14-313, 14-313, 14-314, 14-315, 14-316, 14-317,
 3
                14-318 through 14-320, 14-322, 14-404, 14-413 through 14-415, 14-502,
 4
                14-503, 14-504, 14-505, 14-506, 14-507, 14-508, 14-509, 14-601, 14-602,
 5
                14-603, 14-605, 14-607, 15-101 through 15-103, 15-201, 15-202, 15-205,
 6
                15-301, 15-302, 15-302.1 through 15-302.3, 15-303, 15-306, 15-309, 15-313,
 7
                15–314, 15–317, 15–401, 15–402, 15–402.1, 15–403, 15–501, and 15–502,
 8
                respectively
 9
          to be Section 14-401.2, 14-401.3, 14-501, 14-502, 14-503, 14-301, 14-505,
10
                14-302, 14-303, 14-506, 14-507, 14-304, 14-529, 14-305, 14-508, 14-306,
                14-307, 14-509 through 14-511, 14-512, 14-515, 14-517 through 14-519,
11
12
                14-414, 14-513, 14-526, 14-525, 14-415, 14-523, 14-520, 14-522, 14-527,
                14-528, 14-413, 14-521, 14-524, 14-5H-01 through 14-5H-03, 14-5H-04,
13
14
                14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08, 14-5H-09 through 14-5H-11,
                           14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16,
15
                14-5H-12,
                                                                              14-5H-17,
                14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23,
16
17
                respectively
18
          Annotated Code of Maryland
19
          (2021 Replacement Volume)
20
    BY repealing and reenacting, with amendments,
21
          Article - Correctional Services
22
          Section 9-603(d)(2)
23
          Annotated Code of Maryland
24
          (2017 Replacement Volume and 2021 Supplement)
25
    BY repealing and reenacting, with amendments,
26
          Article – Courts and Judicial Proceedings
27
          Section 5-106(r), 5-715(d), and 10-205(b)
          Annotated Code of Maryland
28
29
          (2020 Replacement Volume and 2021 Supplement)
30
    BY repealing and reenacting, without amendments.
31
          Article – Health – General
          Section 4-201(a), 5-601(a), and 13-3301(a)
32
33
          Annotated Code of Maryland
34
          (2019 Replacement Volume and 2021 Supplement)
35
    BY repealing and reenacting, with amendments,
36
          Article – Health – General
37
          Section 4–201(s), 5–601(v), 13–3301(d), and 18–214.1(b)
          Annotated Code of Maryland
38
          (2019 Replacement Volume and 2021 Supplement)
39
40
    BY repealing and reenacting, with amendments.
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Article – Health Occupations

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1
           Section
                     1-302(g),
                                  1-306(e),
                                               8-205(a)(3),
                                                              11–404.2(h),
                                                                              12-102(c)(2),
 2
                 14–101(a–1), (g), (i), and (o), 14–102(a), 14–205, 14–207(b) through (d) and (f),
 3
                 14-3A-01 Section 5(b)(3)(i), 14-401.1(a)(5) and (e) through (k), 14-402(a), (c),
 4
                 (e), and (f), 14–405(a) and (g), 14–406, 14–409(a) and (c), 14–411(d), (g), (h),
 5
                 (j), (k), and (p), 14–411.1(b) through (d), 14–416(a), 14–5A–01(c), 14–5A–05,
 6
                 14-5A-09, 14-5A-17(a), 14-5B-07(a)(2), 14-5B-09, 14-5B-11, 14-5B-14(a),
 7
                 14-5C-01(c), 14-5C-05, 14-5C-08(b), 14-5C-09, 14-5C-10, 14-5C-17(a),
 8
                                14-5D-08.
                                             14-5D-10(a), 14-5D-14(a),
                 14-5D-07(b).
                                                                             14-5E-01(g).
 9
                 14-5E-08(b), 14-5E-09, 14-5E-10(a), 14-5E-13, 14-5E-14, 14-5E-16(a),
10
                 14-5F-11, 14-5F-12, 14-5F-15, 14-5F-16, 14-5F-18(a),
                                                                               14-5F-21,
                 14-5F-24(c), 14-5G-09, 14-5G-14(h), 14-5G-17, and 14-5G-18(a)
11
12
           Annotated Code of Maryland
13
           (2021 Replacement Volume)
14
    BY repealing and reenacting, without amendments,
15
          Article – Health Occupations
16
           Section 14–101(a), 14–5A–01(a), 14–5C–01(a), and 14–5E–01(a)
17
           Annotated Code of Maryland
18
           (2021 Replacement Volume)
19
    BY adding to
20
           Article – Health Occupations
21
           Section 14–101(a–2), (n), and (q), 14–404, 14–417, 14–504, 14–514, 14–516,
22
                 14-5A-06(e), 14-5B-05(f), 14-5C-06(e), 14-5D-05(f), 14-5E-06(e), and
23
                 14-5F-07(g)
24
           Annotated Code of Maryland
25
           (2021 Replacement Volume)
26
    BY repealing and reenacting, with amendments,
27
          Article – Health Occupations
28
           Section 14-301, 14-303, 14-304(b), 14-305, 14-306, 14-307, 14-401.2(e), and
29
                 14-413; 14-503(c) and (e), 14-505(b), 14-506(a), 14-510(a), 14-511(b),
                 14-515(a), 14-517(a)(1), 14-518(a)(1), 14-524(b) and (c), 14-527, and
30
                 14-528(c) to be under the amended subtitle "Subtitle 5. Physicians"; and
31
                 14-5H-01(e) through (i) and (j) through (u), 14-5H-02, 14-5H-03(c), (d), and
32
33
                 (e)(1), 14-5H-06(a), 14-5H-07(c), 14-5H-08(c)(2)(ii)1., (g), (k), (l)(2), and (m),
                 14-5H-09(a) and (b), 14-5H-10(e), 14-5H-12(a), 14-5H-14, 14-5H-15,
34
35
                 14–5H–16(a), and 14–5H–21 through 14–5H–23
36
           Annotated Code of Maryland
37
          (2021 Replacement Volume)
38
           (As enacted by Section 2 of this Act)
    BY adding to
39
40
          Article – Health Occupations
           Section 14-513(c) and (d), 14-521(c), 14-524(b), 14-525(d), and 14-528(d); and
41
42
                 14-5H-16(c) through (e) to be under the new subtitle "Subtitle 5H. Physician
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Assistants"

$\frac{1}{2}$	Annotated Code of Maryland (2021 Replacement Volume)
3	(As enacted by Section 2 of this Act)
4	BY repealing and reenacting, without amendments,
5	Article – Health Occupations
6	Section 14–5H–01(a)
7	Annotated Code of Maryland
8	(2021 Replacement Volume)
9	(As enacted by Section 2 of this Act)
10	BY repealing
11	Article – Health Occupations
12	Section 14–5H–01(d) and (i–1)
13	Annotated Code of Maryland
14	(2021 Replacement Volume)
15	(As enacted by Section 2 of this Act)
16	BY repealing and reenacting, without amendments,
17	Article - Transportation
18	Section 13–616(a)(1)
19	Annotated Code of Maryland
20	(2020 Replacement Volume and 2021 Supplement)
21	BY repealing and reenacting, with amendments,
22	Article - Transportation
23	Section 13–616(a)(7)
24	Annotated Code of Maryland
25	(2020 Replacement Volume and 2021 Supplement)
26	BY repealing and reenacting, without amendments,
27	Article - Tax - General
28	Section 10–752(a)(1)
29	Annotated Code of Maryland
30	(2016 Replacement Volume and 2021 Supplement)
31	BY repealing and reenacting, with amendments,
32	Article – Tax – General
33	Section 10–752(a)(3) and (d)(7)
34	Annotated Code of Maryland
35	(2016 Replacement Volume and 2021 Supplement)
36	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
37	That Section(s) 14–101(n), 14–401.1(b) through (d), 14–405(f), 14–5A–02 through
38	14-5A-04, 14-5A-10, 14-5A-11, 14-5A-13, 14-5A-14, 14-5A-16, 14-5A-17.1, 14-5A-18, 14
39	$14 - 5A - 18.1, \ 14 - 5A - 19, \ 14 - 5B - 02 \ through \ 14 - 5B - 04, \ 14 - 5B - 10, \ 14 - 5B - 12, \ 14 - 5B - 12.1, \ 14 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -$
40	14-5B-13, 14-5B-14.1, 14-5B-15.1, 14-5B-16, 14-5C-02 through 14-5C-04, 14-5C-11,

- 1 14-5C-12, 14-5C-14, 14-5C-14.1, 14-5C-16, 14-5C-18.1, 14-5C-19, 14-5D-02
- 2 14-5D-03, 14-5D-09, 14-5D-12, 14-5D-12.1, 14-5D-13, 14-5D-15, 14-5D-16,
- 3 14-5D-16.1, 14-5E-02 through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17, 14-5E-18.1,
- $4 \quad 14-5E-19, \ 14-5F-04, \ 14-5F-05, \ 14-5F-13, \ 14-5F-15.1, \ 14-5F-17, \ 14-5F-23, \ 14-5G-02$
- 5 through 14–5G–04, 14–5G–10, 14–5G–11, 14–5G–13, 14–5G–15, 14–5G–16, 14–5G–19,
- $6 \quad 14-5G-21, \quad 14-5G-22, \quad 15-203, \quad 15-204, \quad 15-206, \quad 15-304, \quad 15-305, \quad 15-307, \quad 15-307$
- 7 15-308, 15-310 through 15-312, and 15-315 through 15-316.1 of Article Health
- 8 Occupations of the Annotated Code of Maryland be repealed.
- 9 SECTION 2. AND BE IT FURTHER ENACTED, That Section(s) 14–206, 14–206.1,
- $10 \quad 14 301, \ 14 302, \ 14 306, \ 14 307, \ 14 308, \ 14 308.1, \ 14 309, \ 14 311, \ 14 312, \ 14 313, \ 14 312, \ 14 313,$
- 11 14-313.1, 14-314, 14-315, 14-316, 14-317, 14-318 through 14-320, 14-322, 14-404,
- 12 14-413 through 14-415, 14-502, 14-503, 14-504, 14-505, 14-506, 14-507, 14-508,
- 13 14-509, 14-601, 14-602, 14-603, 14-605, 14-607, 15-101 through 15-103, 15-201,
- $14 \quad 15-202, \ 15-205, \ 15-301, \ 15-302, \ 15-302.1 \ through \ 15-302.3, \ 15-303, \ 15-306, \ 15-309, \ 15-306, \ 15-309, \ 15-306, \ 15-309$
- 15 15–313, 15–314, 15–317, 15–401, 15–402, 15–402.1, 15–403, 15–501, and 15–502,
- 16 respectively, of Article Health Occupations of the Annotated Code of Maryland be
- 17 renumbered to be Section(s) 14–401.2, 14–401.3, 14–501, 14–502, 14–503, 14–301, 14–505,
- 18 14-302, 14-303, 14-506, 14-507, 14-304, 14-529, 14-305, 14-508, 14-306, 14-307,
- 19 14–509 through 14–511, 14–512, 14–515, 14–517 through 14–519, 14–414, 14–513, 14–526,
- $20 \quad 14 525, \ 14 415, \ 14 523, \ 14 520, \ 14 522, \ 14 527, \ 14 528, \ 14 413, \ 14 521, \ 14 524,$
- 21 14-5H-01 through 14-5H-03, 14-5H-04, 14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08,
- 22 14-5H-09 through 14-5H-11, 14-5H-12, 14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16,
- 23 14-5H-17, 14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23,
- 24 respectively.
- 25 SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read
- as follows:

27 Article – Correctional Services

- 28 9-603.
- 29 (d) (2) If an assessment conducted under paragraph (1) of this subsection
- 30 indicates opioid use disorder, an evaluation of the inmate shall be conducted by a health
- 31 care practitioner with prescriptive authority authorized under Title 8[,] OR Title 14[, or
- 32 Title 15] of the Health Occupations Article.

Article - Courts and Judicial Proceedings

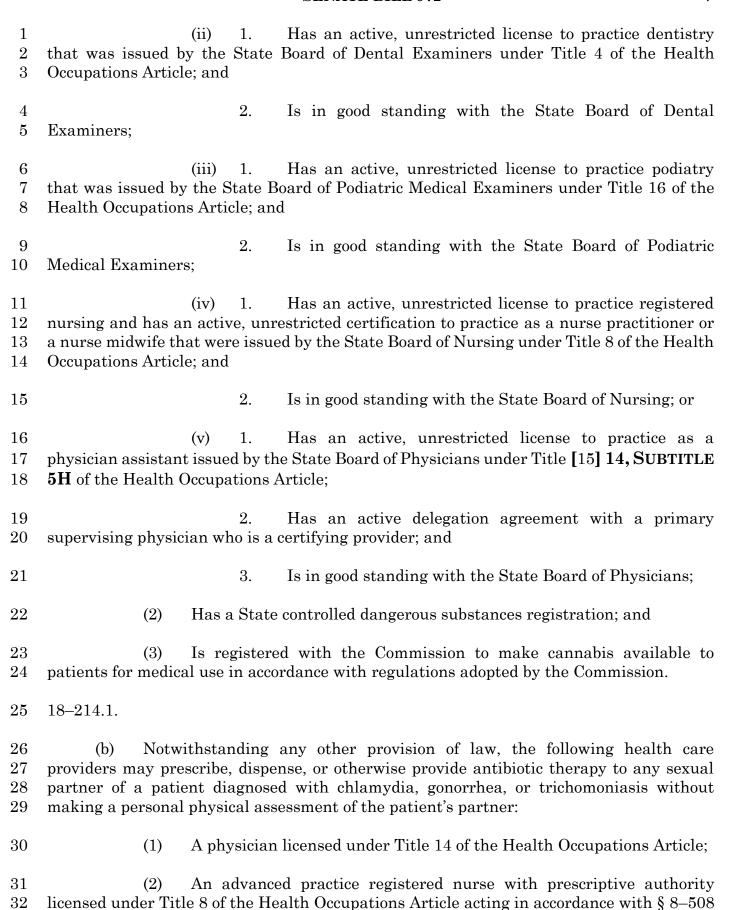
34 5–106.

- 35 (r) A prosecution for an offense under [§ 14-601] § 14-527 of the Health
- 36 Occupations Article of practicing, attempting to practice, or offering to practice medicine
- 37 without a license shall be instituted within 3 years after the offense was committed.
- 38 5–715.

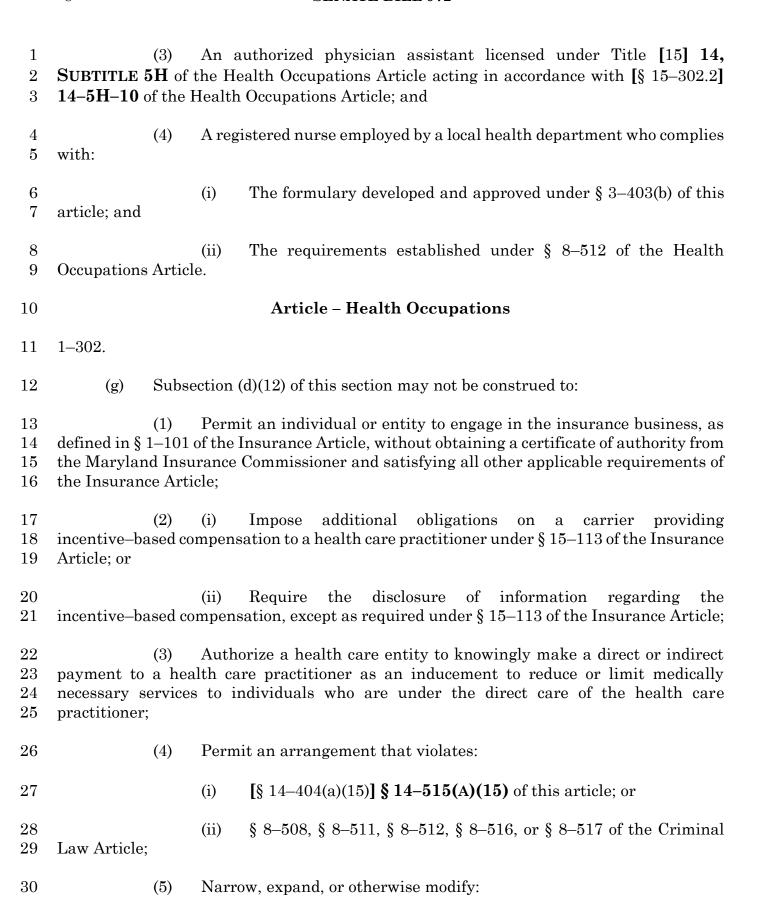
1 (d) Any person who acts in good faith is not civilly liable for giving any of the 2 information required under [§ 14–413 or § 14–414] § 14–517 OR § 14–518 of the Health 3 Occupations Article. 4 10-205.5 Records, reports, statements, notes, or information assembled or obtained by (b) 6 the Maryland Department of Health, the Maryland Commission to Study Problems of Drug 7 Addiction, the Medical and Chirurgical Faculty or its allied medical societies, the Maryland 8 Institute for Emergency Medical Services Systems, an in-hospital staff committee, or a 9 national organized medical society or research group that are declared confidential by § 4-102 of the Health - General Article or [§ 14-506] § 14-415 of the Health Occupations 10 Article, are not admissible in evidence in any proceeding. 11 12 Article - Health - General 4-201.13 In this subtitle the following words have the meanings indicated. 14 (a) "Physician assistant" means an individual who is licensed under Title [15] 14, 15 SUBTITLE 5H of the Health Occupations Article to practice medicine with physician 16 17 supervision. 18 5-601. In this subtitle the following words have the meanings indicated. 19 (a) 20 "Physician assistant" means an individual who is licensed under Title [15] 14, 21SUBTITLE 5H of the Health Occupations Article to practice medicine with physician 22supervision. 2313-3301. 24In this subtitle the following words have the meanings indicated. (a) "Certifying provider" means an individual who: 25(d) 26 Has an active, unrestricted license to practice medicine (1) (i) 1. 27 that was issued by the State Board of Physicians under Title 14 of the Health Occupations 28Article; and

Is in good standing with the State Board of Physicians;

2.



of the Health Occupations Article:



- 1 Any definition in § 1–301 of this subtitle, including the definition (i) 2 of "in-office ancillary services"; or 3 (ii) Any exception in subsection (d)(4) of this section including the exception for referrals for in-office ancillary services or tests; or 4 5 Require a compensation arrangement to comply with the provisions of 6 subsection (d)(12) of this section if the compensation arrangement is exempt under any 7 other provision of subsection (d) of this section. 8 1 - 306. 9 (e) This section does not prohibit: 10 (1) A referring laboratory from billing for anatomic pathology services or 11 histologic processing if the referring laboratory must send a specimen to another clinical 12 laboratory for histologic processing or anatomic pathology consultation; and 13 A health care practitioner who takes a Pap test specimen from a patient (2)and who orders but does not supervise or perform an anatomic pathology service on the 14 15 specimen, from billing a patient or payor for the service, provided the health care practitioner complies with: 16 17 The disclosure of [§ 14-404(a)(16) § (i) requirements **14–515(A)(16)** of this article; and 18 19 (ii) The ethics policies of the American Medical Association that 20 relate to referring physician billing for laboratory services. 218-205.22 In addition to the powers and duties set forth elsewhere in this title, the Board 23 has the following powers and duties: 24 To adopt rules and regulations for the performance of delegated medical 25functions that are recognized jointly by the State Board of Physicians and the State Board of Nursing, under [§ 14–306(d)] § 14–503(D) of this article: 26 27 11-404.2.28(h) A therapeutically certified optometrist shall be:
- 29 Held to the same standard of care as an ophthalmologist who is licensed under Title 14 of this article and who is providing similar services; and 30
- 31 Required to comply with the notice requirement under [§ 14–508] § 32 **14–520** of this article.

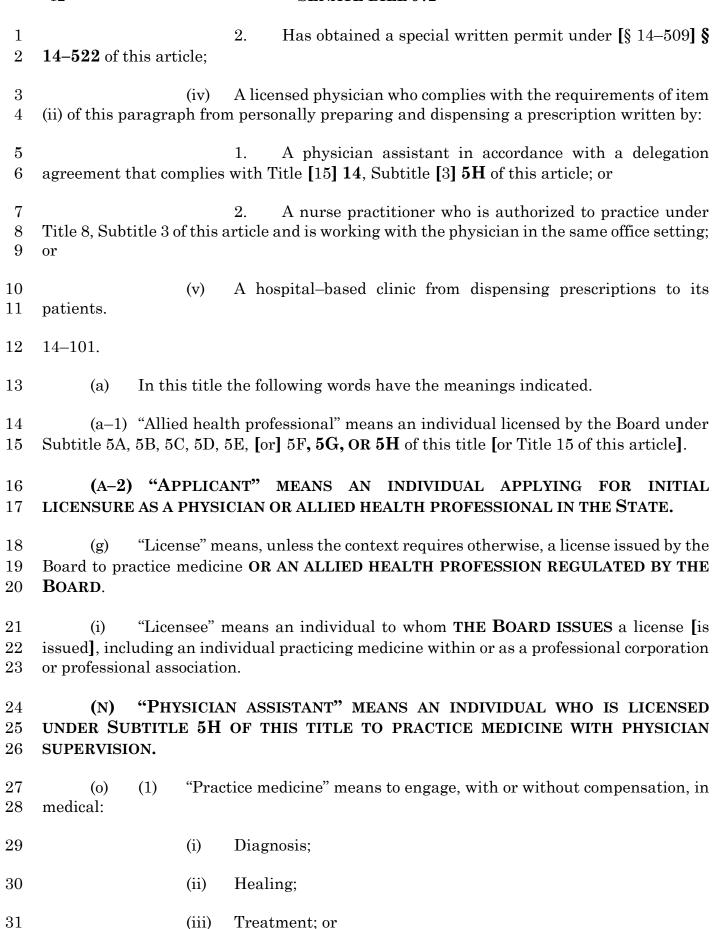
on the patient's chart;

1	12–102.					
2	(c) (2) This title does not prohibit:					
3	(i) A licensed veterinarian from:					
4 5	1. Personally preparing and dispensing the veterinarian's prescriptions; or					
6 7 8	2. Dispensing, in accordance with § 2–313(c) of the Agriculture Article, compounded nonsterile preparations or compounded sterily preparations provided by a pharmacy;					
9 10	(ii) A licensed dentist, physician, or podiatrist from personally preparing and dispensing the dentist's, physician's, or podiatrist's prescriptions when:					
11	1. The dentist, physician, or podiatrist:					
12 13	A. Has applied to the board of licensure in this State which licensed the dentist, physician, or podiatrist;					
14 15 16	B. Has demonstrated to the satisfaction of that board that the dispensing of prescription drugs or devices by the dentist, physician, or podiatrist is in the public interest;					
17 18 19	C. Has received a written permit from that board to dispense prescription drugs or devices except that a written permit is not required in order to dispense starter dosages or samples without charge; and					
20 21 22	regarding the process for resolving incorrectly filled prescriptions or includes writte					
23 24	2. The person for whom the drugs or devices are prescribed is a patient of the prescribing dentist, physician, or podiatrist;					
25 26	3. The dentist, physician, or podiatrist does not have a substantial financial interest in a pharmacy; and					
27	4. The dentist, physician, or podiatrist:					
28 29	A. Complies with the dispensing and labeling requirements of this title;					
30	B. Records the dispensing of the prescription drug or device					

1 2 3	C. Allows the Office of Controlled Substances Administration to enter and inspect the dentist's, physician's, or podiatrist's office at all reasonable hours and in accordance with § 12–102.1 of this subtitle;
4 5 6	D. On inspection by the Office of Controlled Substances Administration, signs and dates an acknowledgment form provided by the Office of Controlled Substances Administration relating to the requirements of this section;
7 8 9	E. Except for starter dosages or samples without charge, provides the patient with a written prescription, maintains prescription files in accordance with § 12–403(c)(13) of this title, and maintains a separate file for Schedule II prescriptions;
10 11	F. Does not direct patients to a single pharmacist or pharmacy in accordance with $\S 12-403(c)(8)$ of this title;
12 13	G. Does not receive remuneration for referring patients to a pharmacist or pharmacy;
14 15	H. Complies with the child resistant packaging requirements regarding prescription drugs under Title 22, Subtitle 3 of the Health – General Article;
16	I. Complies with drug recalls;
17 18 19	J. Maintains biennial inventories and complies with any other federal and State record–keeping requirements relating to controlled dangerous substances;
20 21 22	K. Purchases prescription drugs from a pharmacy or wholesale distributor who holds a permit issued by the Board of Pharmacy, as verified by the Board of Pharmacy;
23 24 25	L. Annually reports to the respective board of licensure whether the dentist, physician, or podiatrist has personally prepared and dispensed prescription drugs within the previous year; and
26 27 28 29	M. Completes ten continuing education credits over a 5-year period relating to the preparing and dispensing of prescription drugs, offered by the Accreditation Council for Pharmacy Education (ACPE) or as approved by the Secretary, in consultation with each respective board of licensure, as a condition of permit renewal;
30 31 32	(iii) A licensed physician from dispensing a topical medication without obtaining the permit required under item (ii)1C of this paragraph or completing the continuing education required under item (ii)4M of this paragraph when the physician:

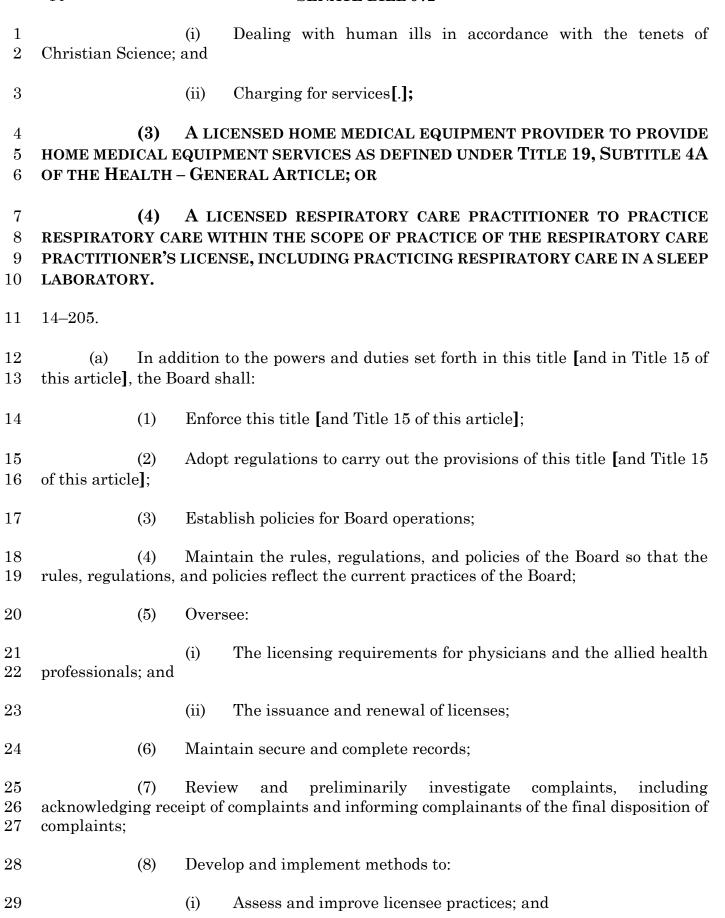
33

1. Otherwise complies with item (ii) of this paragraph; and



1		(iv)	Surgery.		
2 3	(2) "Practice medicine" includes doing, undertaking, professing to do, and attempting any of the following:				
4 5	removing any phys	(i) sical, r	Diagnosing, healing, treating, preventing, prescribing for, or mental, or emotional ailment or supposed ailment of an individual:		
6 7	1. By physical, mental, emotional, or other process that is exercised or invoked by the practitioner, the patient, or both; or				
8			2. By appliance, test, drug, operation, or treatment;		
9		(ii)	Ending of a human pregnancy; and		
10 11	of this title.	(iii)	Performing acupuncture as provided under [§ 14–504] § 14–526		
12	(3)	"Prac	etice medicine" does not include:		
13		(i)	Selling any nonprescription drug or medicine;		
14		(ii)	Practicing as an optician; or		
15 16	other means.	(iii)	Performing a massage or other manipulation by hand, but by no		
17 18 19 20 21 22 23	OR THE NONPROTOR OF THE	OFIT THIS CIANS RE DI	ITATION PROGRAM" MEANS THE PROGRAM OF THE BOARD ENTITY WITH WHICH THE BOARD CONTRACTS UNDER § TITLE THAT EVALUATES AND PROVIDES ASSISTANCE TO S AND OTHER HEALTH PROFESSIONALS REGULATED BY THE RECTED BY THE BOARD TO RECEIVE TREATMENT AND R ALCOHOLISM, CHEMICAL DEPENDENCY, OR OTHER L, OR MENTAL CONDITIONS.		
24	14–102.				
25	(a) This	title do	pes not limit the right of:		
26 27	(1) authorized to prac		ndividual to practice a health occupation that the individual is nder this article; [or]		
28	(2)	A Ch	ristian Science practitioner, who is accredited by the First Church		

of Christ, Scientist, in Boston, Massachusetts, from:



1 (ii) Ensure the ongoing competence of licensees; 2 Ensure that an opportunity for a hearing is provided to an individual, 3 in accordance with law, before any action is taken against the individual; 4 (10)Adjudicate nondisciplinary matters within the Board's jurisdiction: Report on all disciplinary actions, license denials, and license 5 (11)6 surrenders: 7 Establish appropriate fees that are adequate to fund the effective (12)8 regulation of physicians and allied health professionals; 9 Make recommendations that benefit the health, safety, and welfare of (13)10 the public; 11 Provide ongoing education and training for Board members to ensure (14)that the Board members can competently discharge their duties; 1213 Direct educational outreach to and communicate with licensees and the (15)14 public; 15 (16)Develop and adopt a budget that reflects revenues and supports the 16 costs associated with each allied health profession regulated by the Board; 17 Develop and approve an annual report and other required reports for 18 submission to the Secretary, the Governor, the General Assembly, and the public; 19 Approve contracts as needed and within budgetary limits; (18)20 (19)Appoint standing and ad hoc committees from among Board members 21 as necessary; 22 Delegate to the executive director of the Board the authority to (20)23 discharge Board or disciplinary panel duties, as deemed appropriate and necessary by the 24Board or disciplinary panel, and hold the executive director accountable to the Board; and Appoint members of the disciplinary panels. 25(21)26 (b) (1) In addition to the powers set forth elsewhere in this title, the Board 27 may: 28 (i) Adopt regulations to regulate the performance of acupuncture, 29 but only to the extent authorized by [§ 14–504] § 14–526 of this title; 30 (ii) After consulting with the State Board of Pharmacy, adopt rules

and regulations regarding the dispensing of prescription drugs by a licensed physician;

- 1 (iii) On receipt of a written and signed complaint, including a referral 2 from the Commissioner of Labor and Industry, conduct an unannounced inspection of the 3 office of a physician or acupuncturist, other than an office of a physician or acupuncturist 4 in a hospital, related institution, freestanding medical facility, or a freestanding birthing 5 center, to determine compliance at that office with the Centers for Disease Control and 6 Prevention's guidelines on universal precautions; and
- 7 (iv) Contract with others for the purchase of administrative and 8 examination services to carry out the provisions of this title.
- 9 (2) The Board or a disciplinary panel may investigate an alleged violation 10 of this title.
- I(3) Subject to the Administrative Procedure Act and the hearing provisions of § 14–405 of this title, a disciplinary panel may deny a license to an applicant or, if an applicant has failed to renew the applicant's license, refuse to renew or reinstate an applicant's license for:
- 15 (i) Any of the reasons that are grounds for action under 14–404, 16 14–5A–17, 14–5B–14, 14–5C–17, 14–5D–14, 14–5E–16, or 14–5F–18 of this title, as applicable; or
- 18 (ii) Failure to complete a criminal history records check in 19 accordance with § 14–308.1 of this title.]
- 20 (c) (1) In addition to the duties set forth elsewhere in this title, the Board 21 shall:
- 22 (i) Issue, for use in other jurisdictions, a certificate of professional 23 standing to any [licensed physician] LICENSEE; and
- 24 (ii) Keep a list of all **PENDING** license applicants.
- 25 (2) (i) The Board shall keep a list of all [physicians] LICENSEES who 26 are currently licensed.
- 27 (ii) The list shall include each [physician's] LICENSEE'S designated 28 public address.
- 29 (iii) A [physician's] LICENSEE'S designated public address may be a 30 post office box only if the [physician] LICENSEE provides to the Board a nonpublic address, 31 under paragraph (3) of this subsection, that is not a post office box.
- 32 (iv) Each list prepared under this paragraph shall be kept as a 33 permanent record of the Board.

1 2	(v) The list of [currently licensed physicians] CURRENT LICENSEES is a public record.
3 4 5	(3) (i) The Board shall maintain on file a [physician's] LICENSEE'S designated nonpublic address, if provided by the [physician] LICENSEE, to facilitate communication between the [physician] LICENSEE and the Board.
6 7 8	(ii) The Board shall offer a [physician] LICENSEE the opportunity to designate a nonpublic address, in addition to the [physician's] LICENSEE'S public address, at the time of initial licensure and license renewal.
9 10	(iii) A [physician] LICENSEE shall designate an address where the Board may send the [physician] LICENSEE mail.
11 12	(iv) A [physician's] LICENSEE'S designated nonpublic address is not a public record and may not be released by the Board.
13	(D) THE BOARD MAY NOT RELEASE A LIST OF APPLICANTS FOR LICENSURE.
14 15	(E) THE BOARD MAY ADOPT REGULATIONS REGARDING COMMITTEES ESTABLISHED UNDER THIS TITLE GOVERNING:
16	(1) THE TERM OF OFFICE FOR MEMBERS;
17	(2) THE PROCEDURE FOR FILLING VACANCIES ON A COMMITTEE;
18	(3) THE REMOVAL OF MEMBERS; AND
19	(4) THE DUTIES OF EACH OFFICER.
20	14–207.
21 22 23	(b) (1) The Board [may] SHALL set reasonable fees for the issuance and renewal of licenses and its other services PROVIDED TO PHYSICIANS AND ALLIED HEALTH PROFESSIONALS.
24 25 26 27 28 29	(2) The fees charged shall be set [so as] to GENERATE SUFFICIENT FUNDS TO approximate the cost of maintaining the Board, THE LICENSURE PROGRAMS UNDER THIS TITLE, AND THE OTHER SERVICES IT PROVIDES TO PHYSICIANS AND ALLIED HEALTH PROFESSIONALS, including the cost of providing a rehabilitation program for physicians AND ALLIED HEALTH PROFESSIONALS under [§ 14–401.1(g)] § 14–401.1(D) of this title.

- 1 (3) Funds to cover the compensation and expenses of the Board members 2 shall be generated by fees set under this section.
- 3 (4) FEES GENERATED BY PHYSICIAN OR ALLIED HEALTH 4 PROFESSIONAL LICENSES SHALL BE USED TO MAINTAIN THE LICENSING PROGRAM 5 AND SERVICES PROVIDED TO THAT PARTICULAR PROFESSION.
- 6 (5) THE FEES GENERATED SHALL BE USED TO COVER THE ACTUAL DOCUMENTED DIRECT AND INDIRECT COSTS OF FULFILLING THE STATUTORY AND REGULATORY DUTIES OF THE BOARD AS PROVIDED BY THE PROVISIONS OF THIS TITLE.
- 10 (6) (I) IN ADDITION TO THE FEE SET BY THE BOARD UNDER THIS 11 SECTION FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL ASSESS A SEPARATE 12 \$15 FEE FOR A RENEWAL OF EACH LICENSE FOR A PHYSICIAN ASSISTANT.
- (II) THE BOARD SHALL PAY THE FEE COLLECTED UNDER PARAGRAPH (1) OF THIS SUBSECTION TO THE PHYSICIAN ASSISTANT PRECEPTORSHIP TAX CREDIT FUND ESTABLISHED UNDER § 10–752 OF THE TAX GENERAL ARTICLE.
- 17 (c) [The] EXCEPT AS PROVIDED IN SUBSECTION (B)(6) OF THIS SECTION, 18 THE Board shall pay all fees collected under the provisions of this title to the Comptroller 19 of the State.
- 20 (d) (1) [In each of fiscal years 2019 through 2021, if the Governor does not include in the State budget at least \$400,000 for the operation of the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article, as administered by the Department, the Comptroller shall distribute:
- (i) \$400,000 of the fees received from the Board to the Department to be used to make grants under the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article to physicians and physician assistants engaged in primary care or to medical residents specializing in primary care who agree to practice for at least 2 years as primary care physicians in a geographic area of the State that has been designated by the Secretary as being medically underserved; and
 - (ii) The balance of the fees to the Board of Physicians Fund.
- 33 (2)] In fiscal year 2022, if the Governor does not include in the State budget 34 at least \$1,000,000 for the operation of the Maryland Loan Assistance Repayment Program 35 for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health – General 36 Article, as administered by the Department, the Comptroller shall distribute:

- (i) \$1,000,000 of the fees received from the Board to the Department to be used to make grants under the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article to physicians and physician assistants engaged in primary care or to medical residents specializing in primary care who agree to practice for at least 2 years as primary care physicians in a geographic area of the State that has been designated by the Secretary as being medically underserved; and
- 8 (ii) The balance of the fees to the Board of Physicians Fund.
- [(3)] (2) In fiscal year 2023 and each fiscal year thereafter, if the Department does not implement a permanent funding structure under § 24–1702(b)(1) of the Health General Article and the Governor does not include in the State budget at least \$400,000 for the operation of the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article, as administered by the Department, the Comptroller shall distribute:
 - (i) \$400,000 of the fees received from the Board to the Department to be used to make grants under the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article to physicians and physician assistants engaged in primary care or to medical residents specializing in primary care who agree to practice for at least 2 years as primary care physicians in a geographic area of the State that has been designated by the Secretary as being medically underserved; and
 - (ii) The balance of the fees to the Board of Physicians Fund.
- [(4)] (3) If the Governor includes in the State budget at least the amount specified in paragraph (1) [or (2)] of this subsection for the operation of the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants under Title 24, Subtitle 17 of the Health General Article, as administered by the Department, the Comptroller shall distribute the fees to the Board of Physicians Fund.
- 28 (f) (1) In addition to the requirements of subsection (e) of this section, the 29 Board shall fund the budget of the [Physician] Rehabilitation Program with fees set, 30 collected, and distributed to the Fund under this title.
- 31 (2) After review and approval by the Board of a budget submitted by the 32 [Physician] Rehabilitation Program, the Board may allocate money from the Fund to the 33 [Physician] Rehabilitation Program.
- 34 14–301.

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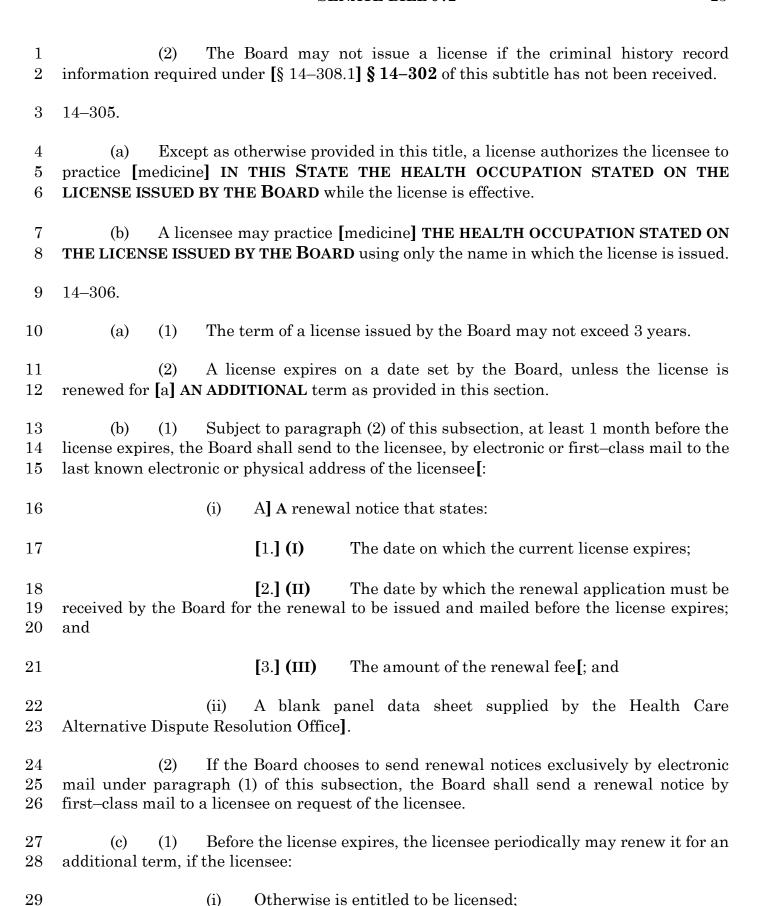
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21

- 1 (a) [To] IN ADDITION TO ANY OTHER REQUIREMENTS UNDER THIS TITLE, TO qualify for a license, an applicant shall be an individual who meets the requirements of this section.
- 4 (b) The applicant shall be of good moral character.
- 5 (c) [The] EXCEPT AS PROVIDED IN § 14–5F–11 OF THIS TITLE, THE applicant 6 shall be at least 18 years old.
- 7 [(d) Except as provided in § 14–308 of this subtitle, the applicant shall:
- 8 (1) (i) Have a degree of doctor of medicine from a medical school that is accredited by an accrediting organization that the Board recognizes in its regulations; and
- 10 (ii) Submit evidence acceptable to the Board of successful completion 11 of 1 year of training in a postgraduate medical training program that is accredited by an 12 accrediting organization that the Board recognizes in its regulations; or
- 13 (2) (i) Have a degree of doctor of osteopathy from a school of osteopathy 14 in the United States, its territories or possessions, Puerto Rico, or Canada that has 15 standards for graduation equivalent to those established by the American Osteopathic 16 Association; and
- 17 (ii) Submit evidence acceptable to the Board of successful completion 18 of 1 year of training in a postgraduate medical training program accredited by an 19 accrediting organization that the Board recognizes in its regulations.]
- 20 **(D)** THE APPLICANT SHALL COMPLETE A CRIMINAL HISTORY RECORDS 21 CHECK IN ACCORDANCE WITH § 14–302 OF THIS SUBTITLE.
- 22 (e) Except as otherwise provided in this [subtitle] TITLE, the applicant shall [pass an examination required] MEET ANY EDUCATIONAL, CERTIFICATION, TRAINING, OR EXAMINATION REQUIREMENTS ESTABLISHED by the Board.
- 25 (f) The applicant shall meet any other qualifications that the Board establishes 26 in its regulations for license applicants.
- [(g) An otherwise qualified applicant who passes the examination after having failed the examination or any part of the examination 3 or more times may qualify for a license only if the applicant:
- 30 (1) Has successfully completed 2 or more years of a residency or fellowship 31 accredited by the Accreditation Council on Graduate Medical Education or the American 32 Osteopathic Association;
 - (2) (i) Has a minimum of 5 years of clinical practice of medicine:

1	1 1. In the	e United States or in Canada;			
2 3		at least 3 of the 5 years having occurred within 5			
4 5		occurred under a full unrestricted license to practice			
6 7 8	7 action taken against the applicant that	iplinary action pending and has had no disciplinary at would be grounds for discipline under § 14–404 of			
9	9 (3) Is board certified.]				
10 11 12	1 procedures that an applicant for a lie	procedures that an applicant for a license to practice medicine OR AN ALLIED HEALTH			
13 14 15 16 17	school or high school, including General Education Development (GED), after at least 3 years of enrollment, or from a recognized English—speaking professional school is acceptable as proof of proficiency in the oral communication of the English language under				
18 19 20	(3) By regulation, the Board shall develop a procedure for testing individuals who because of their speech impairment are unable to complete satisfactorily a Board approved standardized test of oral competency.				
21 22 23 24	(4) If any disciplinary charges or action that involves a problem with the oral communication of the English language are brought against a licensee under this title, the Board shall require the licensee to take and pass a Board approved standardized test of oral competency.				
25 26	[(i) The applicant shall complete a criminal history records check in accordance with § 14–308.1 of this subtitle.				
27	(j) (1) The Board shall lie	cense an applicant to practice medicine if:			
28	(i) The applica	nt:			
29 30 31	o jurisdiction under requirements that t	me licensed or certified as a physician in another the Board determines are substantially equivalent to e;			
32 33		good standing under the laws of the other			

$\frac{1}{2}$	Board requi	res; aı	nd	3.	Submits an application to the Board on a form that the	
3				4.	Pays to the Board an application fee set by the Board; and	
4 5 6	offers a sim the Board.	ilar re	(ii) ciproca		jurisdiction in which the applicant is licensed or certified asing process for individuals licensed to practice medicine by	
7		(2)	The I	Board	shall adopt regulations to implement this subsection.]	
8	14–303.					
9	[(a)]	То ај	oply for	a lice	ense UNDER THIS TITLE, an applicant shall:	
10	_ , ,					
$\frac{12}{13}$	and	(2)	Subn	nit an	application to the Board on the form that the Board requires;	
4		(3)	Pay t	o the	Board the application fee set by the Board.	
15	[(b)	The	Board 1	nay n	ot release a list of applicants for licensure.]	
16	14–304.					
17 18 19			ed to th	ie Boa	of the criminal history record information of an applicant for ard in accordance with [§ 14–308.1] § 14–302 of this subtitle, ue a license, the Board shall consider:	
20			(i)	The	age at which the crime was committed;	
21			(ii)	The	nature of the crime;	
22			(iii)	The	circumstances surrounding the crime;	
23			(iv)	The	length of time that has passed since the crime;	
24			(v)	Sub	sequent work history;	
25			(vi)	Emp	ployment and character references; and	
26 27	threat to the	e publ	(vii) ic healt		er evidence that demonstrates whether the applicant poses a safety.	

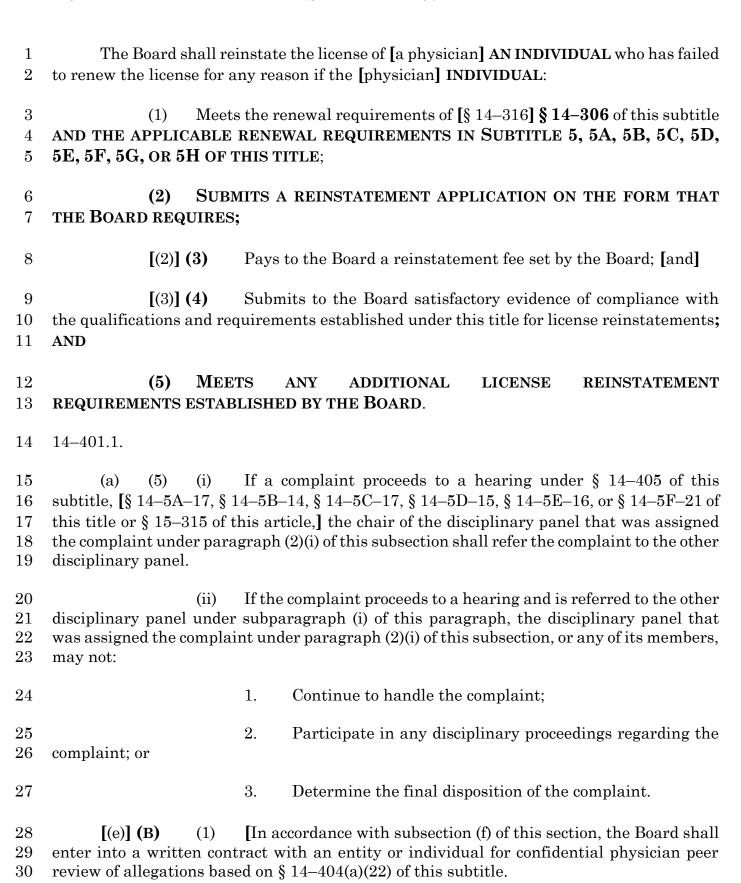


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1	1	(ii)	Is of good moral character;
2		(iii)	Pays to the Board a renewal fee set by the Board; [and]
3		(iv)	Submits to the Board:
4 5	and		1. A renewal application on the form that the Board requires;
6 7	education OR COM	PETE	2. Satisfactory evidence of compliance with any continuing NCY requirements set under this section for license renewal; AND
8		(V) STAB	MEETS ANY ADDITIONAL LICENSE RENEWAL BLISHED BY THE BOARD.
10 11 12 13	Medical Licensure C	Compa	in 30 days after a license renewal under Section 7 of the Interstate act established under § 14–3A–01 of this title, a compact physician pard the information required under paragraph (1)(iv) of this
14 15 16	the Board, the Boar	d may	dition to any other qualifications and requirements established by y establish continuing education OR COMPETENCY requirements ewal of licenses under this section.
17 18 19	= : :	nd pr	tablishing these requirements, the Board shall evaluate existing rograms in use among the various medical specialties and other os.
20 21 22	to receive up to	5 cor	Board shall adopt regulations that allow a licensee seeking renewal ntinuing education credits per renewal period for providing ry medical services during each renewal period.
23 24 25	would so reduce the	num	Board may not establish or enforce these requirements if they aber of physicians in a community as to jeopardize the availability in that community.]
26 27 28	[(5)] (2) that every licensee of license under this se	compl	The Board may not establish a continuing education requirement lete a specific course or program as a condition to the renewal of an.
29 30 31 32	continuing medical	educa failu	sciplinary panel may impose a civil penalty of up to \$100 per ation credit in lieu of a sanction under § 14–404 of this title, for a are of a licensee to obtain the continuing medical education credits

- 1 The Board shall renew the license of each licensee who meets the (e) 2 requirements of this section AND ANY ADDITIONAL REQUIREMENTS ESTABLISHED 3 UNDER SUBTITLE 5, 5A, 5B, 5C, 5D, 5E, 5F, 5G, OR 5H OF THIS TITLE, AS 4 APPLICABLE. 5 (f) (1) Each licensee shall notify the secretary of the Board in writing of any 6 change in the licensee's name or address within 60 days after the change. 7 (2)If a licensee fails to notify the secretary of the Board within the time 8 required under this section, the licensee is subject to an administrative penalty of \$100. 9 [(g)] **(F)** Beginning October 1, 2016, the Board shall require a criminal (1) 10 history records check in accordance with [§ 14–308.1] § 14–302 of this subtitle for: 11 (i) Renewal applicants as determined by regulations adopted by the 12 Board; and 13 (ii) Each former licensee who files for reinstatement under [§ 14–317] 14 of this subtitle THIS TITLE. 15 (2)On receipt of the criminal history record information of a licensee 16 forwarded to the Board in accordance with [§ 14-308.1] § 14-302 of this subtitle, in 17 determining whether disciplinary action should be taken, based on the criminal record 18 information, against a licensee who renewed or reinstated a license, the Board shall 19 consider: 20 (i) The age at which the crime was committed; 21The nature of the crime; (ii) 22(iii) The circumstances surrounding the crime; 23 (iv) The length of time that has passed since the crime; 24(v) Subsequent work history; 25Employment and character references; and (vi) 26 (vii) Other evidence that demonstrates whether the licensee poses a
- 28 (3) The Board may renew or reinstate a license only if the licensee or 29 applicant attests that the licensee or applicant has submitted to a criminal history records 30 check under [§ 14–308.1] § 14–302 of this subtitle.
- 31 14–307.

threat to the public health or safety.



(2) A peer reviewer shall:

1		(i)	Be board certified;		
2		(ii)	Have special qualifications to judge the matter at hand;		
3 4	training;	(iii)	Have received a specified amount of medical experience and		
5		(iv)	Have no formal actions against the peer reviewer's own license;		
6		(v)	Receive training in peer review;		
7		(vi)	Have a standard format for peer review reports; and		
8	of medicine in the	(vii) State.	To the extent practicable, be licensed and engaged in the practice		
10 11 12	(3) The Board may consult with the appropriate specialty health care provider societies in the State to obtain a list of physicians qualified to provide peer review services.				
13 14	(4)] procurement unde		purposes of peer review, the Board may use sole source -107 of the State Finance and Procurement Article.		
15 16	[(5)] of the selection of j	` '	The hearing of charges may not be stayed or challenged because viewers under this subsection before the filing of charges.		
17 18 19	[(f)] (C) contracts under su 90 days for comple		The entity or individual peer reviewer with which the Board on [(e)] (B) of this section OR § 14–514 OF THIS TITLE shall have peer review.		
20 21 22	(2) extension of up to 5 § 14–515(D)(1) O	30 days	entity or individual peer reviewer may apply to the Board for an sto the time limit imposed under [paragraph (1) of this subsection] STITLE.		
23 24 25	-	other	extension is not granted, and 90 days have elapsed, the Board may entity or individual who meets the requirements of [subsection 4–515(D)(2) OF THIS TITLE for the services of peer review.		
26 27 28		any otl	extension has been granted, and 120 days have elapsed, the Board her entity or individual who meets the requirements of [subsection 4–515(D)(2) OF THIS TITLE for the services of peer review.		

[(g)] (D) The Board shall issue a request for proposals and enter into a written contract with a nonprofit entity to provide rehabilitation services for physicians or other allied health professionals directed by the Board to receive rehabilitation services.

- [(h)] (E) (1) To facilitate the investigation and prosecution of disciplinary matters and the mediation of fee disputes coming before it, the Board may contract with an entity or entities for the purchase of investigatory, mediation, and related services.
- 4 (2) Services that may be contracted for under this subsection include the 5 services of:
- 6 (i) Investigators;
- 7 (ii) Attorneys;
- 8 (iii) Accountants;
- 9 (iv) Expert witnesses;
- 10 (v) Consultants; and
- 11 (vi) Mediators.
- [(i)] **(F)** The Board or a disciplinary panel may issue subpoenas and administer oaths in connection with any investigation under this section and any hearing or proceeding before it.
- [(j)] (G) (1) It is the intent of this section that the disposition of every complaint against a licensee that sets forth allegations of grounds for disciplinary action filed with the Board shall be completed as expeditiously as possible and, in any event, within 18 months after the complaint was received by the Board.
- 19 (2) If a disciplinary panel is unable to complete the disposition of a 20 complaint within 1 year, the Board shall include in the record of that complaint a detailed 21 explanation of the reason for the delay.
- [(k)] (H) A disciplinary panel, in conducting a meeting with a physician or allied health professional to discuss the proposed disposition of a complaint, shall provide an opportunity to appear before the disciplinary panel to both the licensee who has been charged and the individual who has filed the complaint against the licensee giving rise to the charge.
- 27 14-401.2.
- 28 (e) A disciplinary panel may issue a cease and desist order or obtain injunctive 29 relief against an individual for:
- 30 (1) Practicing a profession regulated under this title [or Title 15 of this 31 article] without a license OR WITH AN UNAUTHORIZED PERSON;

1 (2)Representing to the public, by title, description of services, methods, 2 procedures, or otherwise, that the individual is authorized to practice: 3 Medicine in this State, in violation of [§ 14–602] § 14–528 of this (i) 4 title: 5 (ii) Respiratory care in this State, in violation of § 14–5A–21 of this 6 title: 7 (iii) Radiation therapy, radiography, nuclear medicine technology, or 8 radiation assistance in this State, in violation of § 14–5B–18 of this title; 9 (iv) Polysomnography in this State, in violation of § 14–5C–21 of this title; 10 11 Athletic training in this State, in violation of § 14–5D–17(3) of (v) 12 this title; 13 (vi) Perfusion in this State, in violation of § 14–5E–21 of this title; 14 (vii) Naturopathic medicine in this State, in violation of § 14–5F–30 15 of this title; [or] 16 (viii) GENETIC COUNSELING IN THIS STATE, IN VIOLATION OF § 17 14-5G-24 OF THIS TITLE; OR 18 (IX) As a physician assistant in this State, in violation of [§ 15–402 of this article] § 14-5H-19 OF THIS TITLE; or 19 20 (3)Taking any action: 21For which a disciplinary panel determines there is a 22preponderance of evidence of grounds for discipline under [§ 14–404] § 14–515 of this title; 23and 24(ii) That poses a serious risk to the health, safety, and welfare of a 25 patient. 2614–402. 27 In reviewing an application for licensure or in investigating an allegation 28 brought against a licensed physician or any allied health professional regulated by the 29 Board under this title, the [Physician] Rehabilitation Program may request the Board to 30 direct, or the Board or a disciplinary panel on its own initiative may direct, the licensed

- physician or any allied health professional regulated by the Board under this title to submit to an appropriate examination.
- 3 (c) The unreasonable failure or refusal of the licensed individual **OR APPLICANT**4 to submit to an examination is prima facie evidence of the licensed individual's **OR**5 **APPLICANT'S** inability to practice medicine or the respective discipline competently, unless
 6 the Board or disciplinary panel finds that the failure or refusal was beyond the control of
 7 the licensed individual **OR APPLICANT**.
- 8 (e) (1) The Board or the entity or entities with which the Board contracts shall 9 appoint the members of the [Physician] Rehabilitation Program.
- 10 (2) The chair of the Board shall appoint one member of the Board to serve 11 as a liaison to the [Physician] Rehabilitation Program.
- 12 (f) The [Physician] Rehabilitation Program is subject to audit by the Legislative 13 Auditor as provided in § 2–1220 of the State Government Article.
- 14 **14–404.**
- SUBJECT TO THE ADMINISTRATIVE PROCEDURE ACT AND THE HEARING PROVISIONS OF § 14–405 OF THIS SUBTITLE, A DISCIPLINARY PANEL MAY DENY A LICENSE TO AN APPLICANT OR, IF AN APPLICANT HAS FAILED TO RENEW THE APPLICANT'S LICENSE, REFUSE TO RENEW OR REINSTATE AN APPLICANT'S LICENSE FOR ANY OF THE REASONS THAT ARE GROUNDS FOR ACTION UNDER § 14–515, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, § 14–5G–18, OR § 14–5H–16 OF THIS TITLE, AS APPLICABLE.
- 22 14-405.
- 23 (a) Except as otherwise provided in the Administrative Procedure Act, before the Board or a disciplinary panel takes any action under [§ 14–404(a)] § 14–404 of this subtitle 25 or [§ 14–205(b)(3),] § 14–515(A), § 14–5A–17(a), § 14–5B–14(a), § 14–5C–17(a), § 14–5D–14(a), § 14–5E–16(a), [or] § 14–5F–18, § 14–5G–18, OR § 14–5H–16 of this title, 27 it shall give the individual against whom the action is contemplated an opportunity for a hearing before a hearing officer.
- [(g)] **(F)** The hearing of charges may not be stayed or challenged by any procedural defects alleged to have occurred prior to the filing of charges.
- 31 14-406.
- 32 (a) Following the filing of charges, if a majority of the quorum of a disciplinary 33 panel finds that there are grounds for action under [§ 14–404] § 14–515, § 14–5A–17, § 34 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, § 14–5G–18, OR §

- 1 **14–5H–16** of this [subtitle] **TITLE**, the disciplinary panel shall pass an order in accordance with the Administrative Procedure Act.
- 3 (b) After the charges are filed, if a disciplinary panel finds, on an affirmative vote 4 of a majority of its quorum, that there are no grounds for action under [§ 14–404] § 14–515, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–14, § 14–5E–16, § 14–5F–18, 6 § 14–5G–18, OR § 14–5H–16 of this [subtitle] TITLE, the disciplinary panel:
- 7 (1) Immediately shall dismiss the charges and exonerate the licensee;
- 8 (2) (i) Except as provided in item (ii) of this item, shall expunge all 9 records of the charges 3 years after the charges are dismissed; or
- 10 (ii) If the physician **OR ALLIED HEALTH PROFESSIONAL** executes a document releasing the Board from any liability related to the charges, shall immediately expunge all records of the charges; and
- 13 (3) May not take any further action on the charges.
- 14 14-409.
- 15 (a) (1) Except as provided in subsection (b) of this section, a disciplinary panel,
 16 ON THE AFFIRMATIVE VOTE OF A MAJORITY OF THE QUORUM OF THE DISCIPLINARY
 17 PANEL, may reinstate the license of an individual whose license has been surrendered or
 18 revoked under this title only in accordance with:
- 19 (i) The terms and conditions of the order of revocation or letter of 20 surrender;
- 21 (ii) An order of reinstatement issued by the disciplinary panel; or
- 22 (iii) A final judgment in any proceeding for review.
- 23 (2) If a license is surrendered or revoked for a period of more than 1 year, the Board **OR A DISCIPLINARY PANEL** may reinstate the license after 1 year if the licensee:
- 25 (i) Meets the requirements for reinstatement as established by the 26 Board; and
- 27 (ii) Completes a criminal history records check in accordance with [§ 28 14–308.1] § 14–302 of this title.
- 29 (c) If an order of revocation is based on [\S 14-404(b)] \S 14-515(B), \S 30 14-5A-17(B), \S 14-5B-14(B), \S 14-5C-17(B), \S 14-5D-14(B), \S 14-5E-16(B), \S 31 14-5F-18(B), \S 14-5G-18(B), OR \S 14-5H-16(B) of this [subtitle] TITLE, and the

- 1 conviction or plea subsequently is overturned at any stage of an appeal or other 2 postconviction proceeding, the revocation ends when the conviction or plea is overturned.
- 3 14-411.
- 4 (d) The Board shall disclose any information contained in a record to:
- 5 (1) A committee of a hospital, health maintenance organization, or related 6 institution if:
- 7 (i) The committee of a medical hospital staff concerned with 8 [physician] LICENSEE discipline or other committee of a hospital, health maintenance organization, or related institution requests the information in writing;
- 10 (ii) A disciplinary panel has issued an order as to a [licensed 11 physician] LICENSEE on whom the information is requested; and
- 12 (iii) The Board determines that the information requested is 13 necessary for an investigation or action of the committee as to a medical privilege of a 14 [licensed physician] LICENSEE; or
- 15 (2) The Secretary, the Office of Health Care Quality in the Department, 16 the Maryland Health Care Commission, or the Health Services Cost Review Commission 17 for the purpose of investigating quality or utilization of care in any entity regulated by the 18 Office of Health Care Quality or the Health Services Cost Review Commission.
- 19 (g) (1) The Board shall notify all hospitals, health maintenance organizations, 20 or other health care facilities where a [physician or an allied health professional] 21 LICENSEE regulated by the Board has privileges, has a provider contract with a health 22 maintenance organization, or is employed of a complaint or report filed against that 23 [physician] LICENSEE, if:
- 24 (i) The Board determines, in its discretion, that the hospital, health 25 maintenance organization, or health care facility should be informed about the report or 26 complaint;
- 27 (ii) The nature of the complaint suggests a reasonable possibility of 28 an imminent threat to patient safety; or
- 29 (iii) The complaint or report was as a result of a claim filed in the 30 Health Care Alternative Dispute Resolution Office and a certificate of a qualified expert is 31 filed in accordance with § 3–2A–04(b)(1) of the Courts Article.
- 32 (2) The Board shall disclose any information pertaining to a [physician's] 33 LICENSEE'S competency to practice [medicine] UNDER THE LICENSE contained in record

- to a committee of a hospital, health maintenance organization, or other health care facility if:
- 3 (i) The committee is concerned with [physician] LICENSEE 4 discipline and requests the information in writing; and
- 5 (ii) The Board has received a complaint or report pursuant to 6 paragraph (1)(i) and (ii) of this subsection on the [licensed physician] LICENSEE on whom 7 the information is requested.
- 8 The Board shall, after formal action is taken pursuant to § 14–406 of 9 this subtitle, notify those hospitals, health maintenance organizations, or health care 10 facilities where the [physician] LICENSEE has privileges, has a provider contract with a health maintenance organization, or is employed of its formal action within 10 days after 11 12the action is taken and shall provide the hospital, health maintenance organization, or 13 health care facility with periodic reports as to enforcement or monitoring of a formal 14 disciplinary order against a [physician] LICENSEE within 10 days after receipt of those 15 reports.
- 16 (h) On the request of a person who has made a complaint to the Board regarding a [physician] LICENSEE, the Board shall provide the person with information on the status of the complaint.
- 19 (j) The Board may disclose any information contained in a record to a licensing 20 or disciplinary authority of another state if:
- 21 (1) The licensing or disciplinary authority of another state that regulates 22 [licensed physicians] LICENSEES in that state requests the information in writing; and
- 23 (2) The disclosure of any information is limited to the pendency of an 24 allegation of a ground for disciplinary or other action by a disciplinary panel until:
- 25 (i) The disciplinary panel has passed an order under § 14–406 of 26 this subtitle; or
- 27 (ii) A [licensed physician] LICENSEE on whom the information is 28 requested authorizes a disclosure as to the facts of an allegation or the results of an 29 investigation before the Board.
- 30 (k) The Board may disclose any information contained in a record to a person if:
- 31 (1) A [licensed physician] **LICENSEE** on whom any information is 32 requested authorizes the person to receive the disclosure;
- 33 (2) The person requests the information in writing; and

(ii)

1 The authorization for the disclosure is in writing. (3) 2 The Board may publish a summary of any allegations of grounds for (g) (1) 3 disciplinary or other action. 4 **(2)** A summary may not identify: Any person who makes an allegation to the Board or any of its 5 (i) 6 investigatory bodies; 7 A [licensed physician] LICENSEE about whom an allegation is (ii) 8 made; or 9 (iii) A witness in an investigation or a proceeding before the Board or any of its investigatory bodies. 10 11 14-411.1. 12 The Board shall create and maintain a public individual profile on each 13 licensee that includes the following information: 14 (1) A summary of charges filed against the licensee, including a copy of the charging document, until a disciplinary panel has taken action under [§ 14–404] § 14–515 15 of this subtitle based on the charges or has rescinded the charges; 16 17 A description of any disciplinary action taken by the Board or a disciplinary panel against the licensee within the most recent 10-year period that includes 18 19 a copy of the public order; 20 A description in summary form of any final disciplinary action taken by 21a licensing board in any other state or jurisdiction against the licensee within the most 22recent 10-year period; 23 A description of a conviction or entry of a plea of guilty or nolo 24contendere by the licensee for a crime involving moral turpitude reported to the Board 25under § 14–416 of this subtitle; and 26 As reported to the Board by the licensee, education and practice 27 information about the licensee including: 28 The name of any medical school that the licensee attended and (i) 29 the date on which the licensee graduated from the school;

A description of any internship and residency training;

1 A description of any specialty board certification by a recognized 2 board of the American Board of Medical Specialties or the American Osteopathic 3 Association: 4 (iv) The name of any hospital where the licensee has medical 5 privileges: 6 (v) The location of the licensee's primary practice setting; 7 (vi) Whether the licensee participates in the Maryland Medical Assistance Program; 8 9 Whether the licensee maintains medical professional liability (vii) 10 insurance; and 11 (viii) The number of medical malpractice final court judgments and 12 arbitration awards against the licensee within the most recent 10-year period. 13 **(5)** FOR A PHYSICIAN, THE INFORMATION REQUIRED UNDER § 14–516 14 OF THIS TITLE. 15 In addition to the requirements of subsection (b) of this section, the Board (c) shall: 16 17 FOLLOWING THE FILING OF CHARGES OR NOTICE OF INITIAL (1) 18 DENIAL OF A LICENSE APPLICATION, DISCLOSE THE FILING TO THE PUBLIC ON THE 19 BOARD'S WEBSITE; 20 **(2)** Provide appropriate and accessible Internet links from the Board's 21 [Internet site] WEBSITE: 22 To the extent available, to the appropriate portion of the (i) 23[Internet site] WEBSITE of each health maintenance organization licensed in this State 24which will allow the public to ascertain the names of the physicians affiliated with the 25health maintenance organization; and To the appropriate portion of the [Internet site] WEBSITE of the 26 (ii) 27 American Medical Association: 28 [(2)] (3) Include a statement on each licensee's profile of information to 29be taken into consideration by a consumer when viewing a licensee's profile, including 30 factors to consider when evaluating a licensee's malpractice data, and a disclaimer stating 31 that a charging document does not indicate a final finding of guilt by a disciplinary panel; 32 and

[(3)] (4) Provide on the Board's [Internet site] WEBSITE:

- 1 (i) Notification that a person may contact the Board by telephone, 2 electronic mail, or written request to find out whether the number of medical malpractice 3 settlements involving a particular licensee totals three or more with a settlement amount 4 of \$150,000 or greater within the most recent 5—year period as reported to the Board; and
- 5 (ii) A telephone number, electronic mail address, and physical 6 address through which a person may contact the Board to request the information required 7 to be provided under item (i) of this item.
- 8 (d) The Board:
- 9 (1) On receipt of a written request for a licensee's profile from any person, shall forward a written copy of the profile to the person;
- 11 (2) Shall maintain a website that serves as a single point of entry where 12 all physician **AND ALLIED HEALTH PROFESSIONAL** profile information is available to the 13 public on the Internet; and
- 14 (3) On receipt of a verbal, electronic, or written request in accordance with subsection [(c)(3)] (C)(4) of this section, shall provide the information within 2 business days of the request.
- 17 14-413.
- 18 **(A)** A person may not make any false statement, report, or representation to the Board or a disciplinary panel.
- 20 (B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS 21 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT 22 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 23 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 25 14-416.
- 26 (a) Each court shall report to the Board each conviction of or entry of a plea of guilty or nolo contendere by a [physician] LICENSEE for any crime involving moral turpitude.
- 29 **14–417.**
- 30 (A) (1) EACH LICENSEE SHALL NOTIFY THE SECRETARY OF THE BOARD 31 IN WRITING OF ANY CHANGE IN THE LICENSEE'S NAME OR ADDRESS WITHIN 60 DAYS 32 AFTER THE CHANGE.

1 2 3			E REQ	LICENSEE FAILS TO NOTIFY THE SECRETARY OF THE BOARD UIRED UNDER THIS SECTION, THE LICENSEE IS SUBJECT TO ENALTY OF $\$100$.
4 5 6 7	OFFENSE F	NUINO OR TH	G MEDI HE FAI	INARY PANEL MAY IMPOSE A CIVIL PENALTY OF UP TO \$100 CAL EDUCATION CREDIT IN LIEU OF A SANCTION FOR A FIRST LURE OF A LICENSEE TO OBTAIN THE CONTINUING MEDICAL EQUIRED BY THE BOARD.
8			Subtit	cle 5. [Miscellaneous Provisions] PHYSICIANS.
9	14–503.			
10 11	(c) this section.	(1)	The l	Board shall adopt rules and regulations to delineate the scope of
12 13 14	shall invite and consider proposals from any individual or health group that could be			
15 16	(e) X–ray dutie	(e) Except as otherwise provided in this section, an individual may perform duties without a license TO PRACTICE MEDICINE only if the duties:		
17		(1)	Do no	ot include:
18			(i)	Computerized or noncomputerized tomography;
19			(ii)	Fluoroscopy;
20			(iii)	Invasive radiology;
21			(iv)	Mammography;
22			(v)	Nuclear medicine;
23			(vi)	Radiation therapy; or
24			(vii)	Xerography;
25		(2)	Are li	imited to X-ray procedures of the:
26			(i)	Chest, anterior–posterior and lateral;
27			(ii)	Spine, anterior–posterior and lateral; or

- 1 (iii) Extremities, anterior-posterior and lateral, not including the 2 head; and 3 (3)Are performed: (i) By an individual who is not employed primarily to perform 4 5 X-ray duties; 6 (ii) In the medical office of the physician who delegates the duties; 7 and 8 (iii) 1. By an individual who, before October 1, 2002, has: 9 Taken a course consisting of at least 30 hours of training A. in performing X-ray procedures approved by the Maryland Radiological Society in 10 consultation with the Maryland Society of Radiologic Technologists; and 11 12 В. Successfully passed an examination based on that course 13 that has been approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; or 14 2. 15 By a licensed physician assistant who has completed a course that includes anterior-posterior and lateral radiographic studies of extremities on 16 at least 20 separate patients under the direct supervision of the delegating physician or 17 18 radiologist using a mini C-arm or similar low-level radiation machine to perform 19 nonfluoroscopic X-ray procedures, if the duties: 20 A. Include only the X-ray procedures described in paragraph 21(2)(iii) of this subsection; and 22 В. Are performed pursuant to a Board-approved delegation agreement that includes a request to perform advanced duties under [§ 15-302(c)(2)] § 2314-5H-08(C)(2) of this [article] TITLE. 2425 **14-504.** 26 (A) TO QUALIFY FOR A LICENSE TO PRACTICE MEDICINE AS A PHYSICIAN IN 27 THE STATE, AN APPLICANT SHALL BE AN INDIVIDUAL WHO MEETS THE 28 REQUIREMENTS OF § 14–301 OF THIS TITLE AND THIS SECTION.
- 29 (B) EXCEPT AS PROVIDED IN § 14–505 OF THIS SUBTITLE, THE APPLICANT 30 SHALL:
- 31 (1) (I) HAVE A DEGREE OF DOCTOR OF MEDICINE FROM A 32 MEDICAL SCHOOL THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION THAT 33 THE BOARD RECOGNIZES IN ITS REGULATIONS; AND

1	(II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF
2	SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL
3	TRAINING PROGRAM THAT IS ACCREDITED BY AN ACCREDITING ORGANIZATION
4	THAT THE BOARD RECOGNIZES IN ITS REGULATIONS: OR

- 5 (2) (I) HAVE A DEGREE OF DOCTOR OF OSTEOPATHY FROM A
 6 SCHOOL OF OSTEOPATHY IN THE UNITED STATES, ITS TERRITORIES OR
 7 POSSESSIONS, PUERTO RICO, OR CANADA THAT HAS STANDARDS FOR GRADUATION
 8 EQUIVALENT TO THOSE ESTABLISHED BY THE AMERICAN OSTEOPATHIC
 9 ASSOCIATION; AND
- 10 (II) SUBMIT EVIDENCE ACCEPTABLE TO THE BOARD OF
 11 SUCCESSFUL COMPLETION OF 1 YEAR OF TRAINING IN A POSTGRADUATE MEDICAL
 12 TRAINING PROGRAM ACCREDITED BY AN ACCREDITING ORGANIZATION THAT THE
 13 BOARD RECOGNIZES IN ITS REGULATIONS.
- 14 (C) IF AN EXAMINATION IS REQUIRED FOR A LICENSE TO PRACTICE
 15 MEDICINE, AN OTHERWISE QUALIFIED APPLICANT WHO PASSES THE EXAMINATION
 16 AFTER HAVING FAILED THE EXAMINATION OR ANY PART OF THE EXAMINATION
 17 THREE OR MORE TIMES MAY QUALIFY FOR A LICENSE ONLY IF THE APPLICANT:
- 18 (1) HAS SUCCESSFULLY COMPLETED 2 OR MORE YEARS OF A
 19 RESIDENCY OR FELLOWSHIP ACCREDITED BY THE ACCREDITATION COUNCIL ON
 20 GRADUATE MEDICAL EDUCATION OR THE AMERICAN OSTEOPATHIC ASSOCIATION;
- 21 (2) (I) HAS A MINIMUM OF 5 YEARS OF CLINICAL PRACTICE OF 22 MEDICINE:
- 23 1. IN THE UNITED STATES OR IN CANADA;
- 24 WITH AT LEAST 3 OF THE 5 YEARS HAVING OCCURRED WITHIN 5 YEARS OF THE DATE OF THE APPLICATION; AND
- 26 3. That occurred under a full unrestricted 27 license to practice medicine; and
- 28 (II) HAS NO DISCIPLINARY ACTION PENDING AND HAS HAD NO
 29 DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT THAT WOULD BE GROUNDS
 30 FOR DISCIPLINE UNDER § 14–515 OF THIS SUBTITLE; OR
 - (3) IS BOARD CERTIFIED.

- 1 **(D) (1)** THE BOARD SHALL LICENSE AN APPLICANT TO PRACTICE 2 MEDICINE IF:
- 3 (I) THE APPLICANT:
- 4 1. BECAME LICENSED OR CERTIFIED AS A PHYSICIAN IN
- 5 ANOTHER JURISDICTION UNDER REQUIREMENTS THAT THE BOARD DETERMINES
- 6 ARE SUBSTANTIALLY EQUIVALENT TO THE LICENSING REQUIREMENTS OF THIS
- 7 TITLE;
- 8 2. IS IN GOOD STANDING UNDER THE LAWS OF THE
- 9 OTHER JURISDICTION;
- 3. SUBMITS AN APPLICATION TO THE BOARD ON A FORM
- 11 THAT THE BOARD REQUIRES; AND
- 12 4. Pays to the Board an application fee set by
- 13 THE BOARD; AND
- 14 (II) THE JURISDICTION IN WHICH THE APPLICANT IS LICENSED
- 15 OR CERTIFIED OFFERS A SIMILAR RECIPROCAL LICENSING PROCESS FOR
- 16 INDIVIDUALS LICENSED TO PRACTICE MEDICINE BY THE BOARD.
- 17 (2) THE BOARD SHALL ADOPT REGULATIONS TO IMPLEMENT THIS
- 18 SUBSECTION.
- 19 (E) (1) IN ESTABLISHING ANY CONTINUING EDUCATION REQUIREMENTS
- 20 FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL EVALUATE EXISTING
- 21 METHODS, DEVICES, AND PROGRAMS IN USE AMONG THE VARIOUS MEDICAL
- 22 SPECIALTIES AND OTHER RECOGNIZED MEDICAL GROUPS.
- 23 (2) THE BOARD SHALL ADOPT REGULATIONS THAT ALLOW A
- 24 LICENSEE SEEKING RENEWAL TO RECEIVE UP TO 5 CONTINUING EDUCATION
- 25 CREDITS PER RENEWAL PERIOD FOR PROVIDING UNCOMPENSATED, VOLUNTARY
- 26 MEDICAL SERVICES DURING EACH RENEWAL PERIOD.
- 27 (3) THE BOARD MAY NOT ESTABLISH OR ENFORCE THESE
- 28 REQUIREMENTS IF THEY WOULD SO REDUCE THE NUMBER OF PHYSICIANS IN A
- 29 COMMUNITY AS TO JEOPARDIZE THE AVAILABILITY OF ADEQUATE MEDICAL CARE IN
- 30 THAT COMMUNITY
- 31 14–505.

- 1 An applicant for a license TO PRACTICE MEDICINE is exempt from the (b) 2 educational requirements of [§ 14-307] § 14-301 OF THIS TITLE AND § 14-504 of this 3 subtitle, if the applicant: 4 Has studied medicine at a foreign medical school; (1) Is certified by the Educational Commission for Foreign Medical 5 6 Graduates or by its successor as approved by the Board; 7 Passes a qualifying examination for foreign medical school graduates 8 required by the Board; 9 Meets any other qualifications for foreign medical school graduates that **(4)** the Board establishes in its regulation for licensing of applicants; 10 11 (5)Submits acceptable evidence to the Board of the requirements set in the Board's regulations; and 12 13 (6)Meets one of the following requirements: 14 (i) The applicant graduated from any foreign medical school and 15 submits evidence acceptable to the Board of successful completion of 2 years of training in 16 a postgraduate medical education program accredited by an accrediting organization recognized by the Board; or 17 18 The applicant successfully completed a fifth pathway program and submits evidence acceptable to the Board that the applicant: 19 20Has a document issued by the foreign medical school 21 certifying that the applicant completed all of the formal requirements of that school for the 22study of medicine, except for the postgraduate or social service components as required by 23the foreign country or its medical school; 24 2. Has successfully completed a fifth pathway program; and 253. Has successfully completed 2 years of training in a 26postgraduate medical education program following completion of a Board approved fifth 27pathway program.
- 28 14–506.
- 29 (a) An applicant who otherwise qualifies for a license **TO PRACTICE MEDICINE** 30 under this title is entitled to sit for an examination as provided under this section or any 31 regulations adopted to carry out this section.
- 32 14-510.

14-511.

1	(a) The	Board	may:	
2 3	(1) conceded eminence		nse TO PRACTICE MEDICINE an applicant by virtue of the authority of the applicant in the profession if the applicant:	
4		(i)	Is recommended to the Board by:	
5			1. The dean of a school of medicine in the State; or	
6			2. The Director of the National Institutes of Health;	
7 8	recommendation	(ii) under i	Is to receive an appointment at the institution making the item (i) of this paragraph; and	
9 10	under this section	(iii)	Meets any other requirement the Board may adopt by regulation	
11 12	(2) profession" and, fo		ne by regulation the term "conceded eminence and authority in the purpose, shall consider such criteria as:	
13		(i)	Academic appointments;	
14		(ii)	Length of time in the profession;	
15		(iii)	Scholarly publications; and	
16		(iv)	Professional accomplishments;	
17 18 19	(3) for licensure, including this section;	-	ot regulations concerning the further qualifications of an applicant conditions of employment, application procedures, and fees under	
20 21 22 23	(4) Allow an exception to the general education and examination requirements of [§ 14–307(d) and (e)] § 14–301(E) OF THIS TITLE AND § 14–504(B) of this subtitle, but may not permit waiver of the requirements of [§ 14–307(a) through (c)] 14–301(A) THROUGH (C) of this [subtitle] TITLE;			
24 25	(5) and	Qual	ify, restrict, or otherwise limit a license granted under this section	
26 27 28	(6) services performe another licensed p	d by th	tire a 6-month probationary period during which the medical ne applicant granted a license under this section are supervised by an.	

- 1 (b) The Board shall issue a license to an individual who is on inactive status if the 2 individual:
- 3 (1) Submits to the Board:
- 4 (i) Satisfactory evidence of compliance with [§ 14–308.1] **§ 14–302** 5 of this [subtitle] **TITLE**;
- 6 (ii) Satisfactory evidence of compliance with the continuing 7 education requirements the Board adopts for this purpose; and
- 8 (iii) A reinstatement fee set by the Board; and
- 9 (2) Is otherwise entitled to be licensed.
- 10 14-513.
- 11 (C) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS GUILTY
 12 OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING
- 13 **\$500.**
- 14 (D) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS
- 15 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 16 **14–514**.
- 17 (A) IF AN ALLEGATION OF GROUNDS FOR DISCIPLINARY OR OTHER ACTION
- 18 IS MADE BY A PATIENT OR A FAMILY MEMBER OF A PATIENT BASED ON §
- $19 ext{14-515(A)(22)}$ OF THIS SUBTITLE AND A FULL INVESTIGATION RESULTS FROM THAT
- 20 ALLEGATION, THE FULL INVESTIGATION SHALL INCLUDE AN OFFER OF AN
- 21 INTERVIEW WITH THE PATIENT OR A FAMILY MEMBER OF THE PATIENT WHO WAS
- 22 PRESENT AT OR ABOUT THE TIME THAT THE INCIDENT THAT GAVE RISE TO THE
- 23 ALLEGATION OCCURRED.
- 24 (B) (1) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBSECTION, AFTER
- 25 BEING ASSIGNED A COMPLAINT UNDER § 14-401.1 OF THIS TITLE, THE
- 26 DISCIPLINARY PANEL MAY:
- 27 (I) REFER AN ALLEGATION FOR FURTHER INVESTIGATION TO
- 28 THE ENTITY THAT HAS CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF
- 29 THIS SECTION; OR
- 30 (II) TAKE ANY APPROPRIATE AND IMMEDIATE ACTION AS
- 31 NECESSARY.

1	(2) (I) IF, AFTER BEING ASSIGNED A COMPLAINT ANI
2	COMPLETING THE PRELIMINARY INVESTIGATION, THE DISCIPLINARY PANEL FINDS
3	THAT THE LICENSEE MAY HAVE VIOLATED § 14–515(A)(22) OF THIS SUBTITLE, THI
4	DISCIPLINARY PANEL SHALL REFER THE ALLEGATION TO THE ENTITY OR ENTITIES
5	THAT HAVE CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF THIS
6	SECTION FOR FURTHER INVESTIGATION AND PHYSICIAN PEER REVIEW WITHIN THI
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- 7 INVOLVED MEDICAL SPECIALTY OR SPECIALTIES.
- 8 (II) A DISCIPLINARY PANEL SHALL OBTAIN TWO PEER REVIEW
 9 REPORTS FROM THE ENTITY OR INDIVIDUAL WITH WHOM THE BOARD CONTRACTED
 10 UNDER SUBSECTION (D) OF THIS SECTION FOR EACH ALLEGATION THE
 11 DISCIPLINARY PANEL REFERS FOR PEER REVIEW.
- 12 (3) IF, AFTER BEING ASSIGNED A COMPLAINT, THE DISCIPLINARY
 13 PANEL DETERMINES THAT AN ALLEGATION INVOLVING FEES FOR PROFESSIONAL OR
 14 ANCILLARY SERVICES DOES NOT CONSTITUTE GROUNDS FOR DISCIPLINARY OR
 15 OTHER ACTION, THE DISCIPLINARY PANEL SHALL OFFER THE COMPLAINANT AND
 16 THE LICENSEE AN OPPORTUNITY TO MEDIATE THE DISPUTE.
- 17 (C) COUNTY MEDICAL SOCIETIES SHALL REFER TO THE BOARD ALL 18 COMPLAINTS THAT SET FORTH ALLEGATIONS OF GROUNDS FOR DISCIPLINARY 19 ACTION UNDER § 14–515 OF THIS SUBTITLE.
- 20 (D) (1) IN ACCORDANCE WITH § 14–401.1(C) OF THIS TITLE, THE BOARD 21 SHALL ENTER INTO A WRITTEN CONTRACT WITH AN ENTITY OR INDIVIDUAL FOR 22 CONFIDENTIAL PHYSICIAN PEER REVIEW OF ALLEGATIONS BASED ON § 23 14–515(A)(22) OF THIS SUBTITLE.
- 24 (2) A PEER REVIEWER SHALL:
- 25 (I) BE BOARD CERTIFIED;
- 26 (II) HAVE SPECIAL QUALIFICATIONS TO JUDGE THE MATTER AT
- 27 **HAND**;
- 28 (III) HAVE RECEIVED A SPECIFIED AMOUNT OF MEDICAL 29 EXPERIENCE AND TRAINING;
- 30 (IV) HAVE NO FORMAL ACTIONS AGAINST THE PEER REVIEWER'S 31 OWN LICENSE;
- 32 (V) RECEIVE TRAINING IN PEER REVIEW;

1 2	AND		(VI)	HAVE A STANDARD FORMAT FOR PEER REVIEW REPORTS;
3 4	IN THE PRA	ACTICI	` ,	TO THE EXTENT PRACTICABLE, BE LICENSED AND ENGAGED EDICINE IN THE STATE.
5 6 7			ROVIDE	BOARD MAY CONSULT WITH THE APPROPRIATE SPECIALTY OR SOCIETIES IN THE STATE TO OBTAIN A LIST OF PHYSICIANS E PEER REVIEW SERVICES.
8	14–515.			
9 10 11	(a) Subject to the hearing provisions of § 14–405 of this [subtitle] TITLE, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:			
13 14	the applican	(1) nt or lie		dulently or deceptively obtains or attempts to obtain a license for or for another;
5		(2)	Frau	dulently or deceptively uses a license;
6		(3)	Is gui	lty of:
17			(i)	Immoral conduct in the practice of medicine; or
8			(ii)	Unprofessional conduct in the practice of medicine;
9		(4)	Is pro	ofessionally, physically, or mentally incompetent;
20 21	SUBTITLE;	(5)	Solici	ts or advertises in violation of [§ 14–503] § 14–513 of this [title]
22		(6)	Aban	dons a patient;
23		(7)	Habit	cually is intoxicated;
24 25	dangerous s	(8) ubstar		ldicted to, or habitually abuses, any narcotic or controlled lefined in § 5–101 of the Criminal Law Article;
26		(9)	Provi	des professional services:
27			(i)	While under the influence of alcohol; or

- 1 (ii) While using any narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law Article, or other drug that is in excess of therapeutic amounts or without valid medical indication;
- 4 (10) Promotes the sale of drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;
- 6 (11) Willfully makes or files a false report or record in the practice of medicine;
- 8 (12) Willfully fails to file or record any medical report as required under law, 9 willfully impedes or obstructs the filing or recording of the report, or induces another to fail 10 to file or record the report;
- 11 (13) On proper request, and in accordance with the provisions of Title 4, 12 Subtitle 3 of the Health – General Article, fails to provide details of a patient's medical 13 record to the patient, another physician, or hospital;
- 14 (14) Solicits professional patronage through an agent or other person or 15 profits from the acts of a person who is represented as an agent of the physician;
- 16 (15) Pays or agrees to pay any sum to any person for bringing or referring a patient or accepts or agrees to accept any sum from any person for bringing or referring a patient;
- 19 (16) Agrees with a clinical or bioanalytical laboratory to make payments to 20 the laboratory for a test or test series for a patient, unless the licensed physician discloses 21 on the bill to the patient or third–party payor:
- (i) The name of the laboratory;
- 23 (ii) The amount paid to the laboratory for the test or test series; and
- 24 (iii) The amount of procurement or processing charge of the licensed 25 physician, if any, for each specimen taken;
- 26 (17) Makes a willful misrepresentation in treatment;
- 27 (18) Practices medicine with an unauthorized person or aids an 28 unauthorized person in the practice of medicine;
- 29 (19) Grossly overutilizes health care services;
- 30 (20) Offers, undertakes, or agrees to cure or treat disease by a secret 31 method, treatment, or medicine;

1 Is disciplined by a licensing or disciplinary authority or convicted or 2 disciplined by a court of any state or country or disciplined by any branch of the United 3 States uniformed services or the Veterans' Administration for an act that would be grounds 4 for disciplinary action under this section; 5 (22)Fails to meet appropriate standards as determined by appropriate peer 6 review for the delivery of quality medical and surgical care performed in an outpatient 7 surgical facility, office, hospital, or any other location in this State; 8 Willfully submits false statements to collect fees for which services are (23)9 not provided; 10 Was subject to investigation or disciplinary action by a licensing or 11 disciplinary authority or by a court of any state or country for an act that would be grounds 12 for disciplinary action under this section and the licensee: 13 (i) Surrendered the license issued by the state or country to the 14 state or country; or 15 Allowed the license issued by the state or country to expire or (ii) 16 lapse; 17 Knowingly fails to report suspected child abuse in violation of § 5–704 (25)18 of the Family Law Article; 19 Fails to educate a patient being treated for breast cancer of alternative 20 methods of treatment as required by § 20–113 of the Health – General Article; 21Sells, prescribes, gives away, or administers drugs for illegal or (27)22illegitimate medical purposes; 23 (28)Fails to comply with the provisions of § 12–102 of this article; 24(29)Refuses, withholds from, denies, or discriminates against an individual 25with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive; 2627 (30)Except as to an association that has remained in continuous existence 28 since July 1, 1963: 29 Associates with a pharmacist as a partner or co-owner of a 30 pharmacy for the purpose of operating a pharmacy;

31 (ii) Employs a pharmacist for the purpose of operating a pharmacy; 32 or

32

Surgical Facilities;

1 (iii) Contracts with a pharmacist for the purpose of operating a 2 pharmacy; 3 Except in an emergency life-threatening situation where it is not 4 feasible or practicable, fails to comply with the Centers for Disease Control and 5 Prevention's guidelines on universal precautions: 6 Fails to display the notice required under [§ 14–415] § 14–519 of this (32)7 subtitle: 8 Fails to cooperate with a lawful investigation conducted by the Board (33)9 or a disciplinary panel; 10 (34)Is convicted of insurance fraud as defined in § 27–801 of the Insurance Article; 11 12 Is in breach of a service obligation resulting from the applicant's or 13 licensee's receipt of State or federal funding for the licensee's medical education; 14 (36)Willfully makes a false representation when seeking or making 15 application for licensure or any other application related to the practice of medicine; 16 By corrupt means, threats, or force, intimidates or influences, or 17 attempts to intimidate or influence, for the purpose of causing any person to withhold or 18 change testimony in hearings or proceedings before the Board or a disciplinary panel or 19 those otherwise delegated to the Office of Administrative Hearings; 20 By corrupt means, threats, or force, hinders, prevents, or otherwise (38)21delays any person from making information available to the Board or a disciplinary panel 22 in furtherance of any investigation of the Board or a disciplinary panel; 23 Intentionally misrepresents credentials for the purpose of testifying or 24rendering an expert opinion in hearings or proceedings before the Board or a disciplinary 25panel or those otherwise delegated to the Office of Administrative Hearings; 26 (40)Fails to keep adequate medical records as determined by appropriate 27peer review; 28 Performs a cosmetic surgical procedure in an office or a facility that is (41)29not: 30 (i) Accredited by:

The American Association for Accreditation of Ambulatory

1.

1 2	2. The Accreditation Association for Ambulatory Health Care; or
3 4	3. The Joint Commission on the Accreditation of Healthcare Organizations; or
5 6	(ii) Certified to participate in the Medicare program, as enacted by Title XVIII of the Social Security Act;
7 8	(42) Fails to complete a criminal history records check under [§ 14–308.1] § $14-302$ of this title;
9 10 11	(43) Except for the licensure process described under Subtitle 3A of this title, violates any provision of this title, any rule or regulation adopted by the Board, or any State or federal law pertaining to the practice of medicine;
12 13	(44) Fails to meet the qualifications for licensure under THIS SUBTITLE AND Subtitle 3 of this title;
4	(45) Fails to comply with $\S 1-223$ of this article; or
15 16	(46) Fails to comply with the requirements of the Prescription Drug Monitoring Program under Title 21, Subtitle 2A of the Health – General Article.
17	14-516.
18 19 20 21	THE PUBLIC INDIVIDUAL PROFILE FOR A LICENSED PHYSICIAN CREATED AND MAINTAINED UNDER § 14–411.1 OF THIS TITLE SHALL INCLUDE, AS REPORTED TO THE BOARD BY THE LICENSEE, EDUCATION AND PRACTICE INFORMATION ABOUT THE LICENSEE INCLUDING:
22 23 24	(1) The name of any medical school that the licensee attended and the date on which the licensee graduated from the school;
25	(2) A DESCRIPTION OF ANY INTERNSHIP AND RESIDENCY TRAINING;
26 27 28	(3) A DESCRIPTION OF ANY SPECIALTY BOARD CERTIFICATION BY A RECOGNIZED BOARD OF THE AMERICAN BOARD OF MEDICAL SPECIALTIES OR THE AMERICAN OSTEOPATHIC ASSOCIATION;
29 30	(4) THE NAME OF ANY HOSPITAL WHERE THE LICENSEE HAS MEDICAL PRIVILEGES;

THE LOCATION OF THE LICENSEE'S PRIMARY PRACTICE SETTING;

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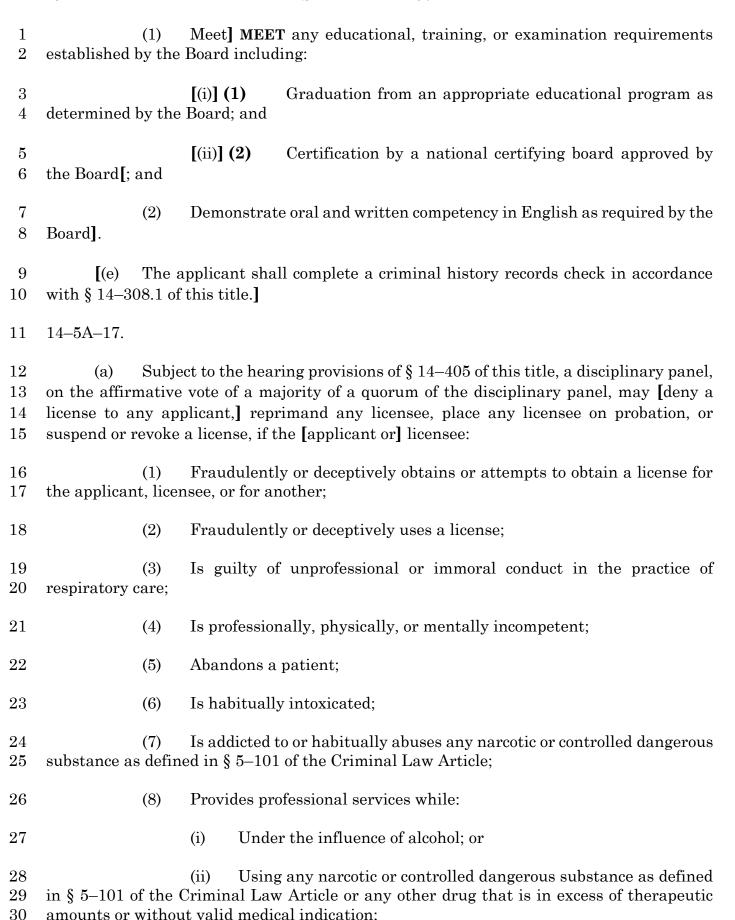
(5)

- 1 (6) WHETHER THE LICENSEE PARTICIPATES IN THE MARYLAND 2 MEDICAL ASSISTANCE PROGRAM;
- 3 (7) WHETHER THE LICENSEE MAINTAINS MEDICAL PROFESSIONAL 4 LIABILITY INSURANCE; AND
- 5 (8) THE NUMBER OF MEDICAL MALPRACTICE FINAL COURT JUDGMENTS AND ARBITRATION AWARDS AGAINST THE LICENSEE WITHIN THE MOST RECENT 10–YEAR PERIOD.
- 8 14-517.
- 9 (a) (1) Each hospital and related institution shall submit to the Board a report 10 within 10 days after:
- 11 (i) The hospital or related institution denied the application of a 12 physician for staff privileges or limited, reduced, otherwise changed, or terminated the staff 13 privileges of a physician, or the physician resigned whether or not under formal accusation, 14 if the denial, limitation, reduction, change, termination, or resignation is for reasons that 15 might be grounds for disciplinary action under [§ 14–404] § 14–515 of this subtitle;
- 16 (ii) The hospital or related institution took any disciplinary action 17 against a salaried, licensed physician without staff privileges, including termination of 18 employment, suspension, or probation, for reasons that might be grounds for disciplinary 19 action under [§ 14–404] § 14–515 of this subtitle:
- 20 (iii) A licensed physician voluntarily resigned from the staff, employ, 21 or training program of the hospital or related institution for reasons that might be grounds 22 for disciplinary action under [§ 14–404] § 14–515 of this subtitle; or
- (iv) The hospital or related institution placed any other restrictions or conditions on any of the licensed physicians as listed in items (i) through (iii) of this paragraph for any reasons that might be grounds for disciplinary action under [§ 14–404] § 14–515 of this subtitle.
- 27 14-518.
- 28 (a) (1) Each alternative health system as defined in § 1–401 of this article shall 29 submit to the Board a report within 10 days after:
- 30 (i) The alternative health system denied the formal application of a 31 physician to contract with the alternative health system or limited, reduced, otherwise 32 changed, or terminated the contract of a physician, or the physician resigned whether or 33 not under formal accusation, if the denial, limitation, reduction, change, termination, or

- 1 resignation is for reasons that might be grounds for disciplinary action under [§ 14–404] §
- 2 **14–515** of this subtitle; or
- 3 (ii) The alternative health system placed any other restrictions or
- 4 conditions on any licensed physician for any reasons that might be grounds for disciplinary
- 5 action under [§ 14–404] **§ 14–515** of this subtitle.
- 6 14-521.
- 7 (C) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS
- 8 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT
- 9 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 10 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS
- 11 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 12 14-524.
- 13 (B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS
- 14 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT
- 15 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 16 (2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS
- 17 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- [(b)] (C) (1) The Board shall investigate any alleged violation of this section
- or [§ 14–507] § 14–523 of this [title] SUBTITLE and may enforce any provision of this title
- 20 by injunction or other appropriate proceedings.
- [(c)] (2) An action under this [section] SUBSECTION is in addition to and not
- 22 instead of criminal prosecution under [§ 14–606 of this subtitle] SUBSECTION (B) OF THIS
- 23 SECTION.
- 24 14-525.
- 25 (D) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS
- 26 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT
- 27 EXCEEDING \$5,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH.
- 28 (2) A PERSON WHO IS REQUIRED TO GIVE NOTICE UNDER THIS
- 29 SECTION, AND WHO FAILS TO GIVE THE REQUIRED NOTICE, IS LIABLE FOR A CIVIL
- 30 PENALTY OF NOT MORE THAN \$100.

- 1 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS 2 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 3 14-527.
- 4 **(A)** Except as otherwise provided in this title, a person may not practice, attempt to practice, or offer to practice medicine in this State unless licensed by the Board.
- 6 (B) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A 7 PERSON WHO VIOLATES THIS SECTION IS:
- 8 (I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A
- 9 FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR
- 10 BOTH; AND
- 11 (II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO
- 12 BE LEVIED BY A DISCIPLINARY PANEL.
- 13 (2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO
- 14 NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER
- 15 **§ 14–306** OF THIS TITLE IF:
- 16 (I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION
- 17 OF THE LICENSE; AND
- 18 (II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE
- 19 REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.
- 20 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS
- 21 SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 22 14–528.
- 23 (c) An unlicensed individual who acts under [§ 14–302 or § 14–306] **§ 14–502 OR**
- § 14-503 of this [title] SUBTITLE may use the word "physician" together with another
- word to describe the occupation of the individual as in phrases such as "physician's
- 26 assistant" or "physician's aide".
- 27 (D) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A
- 28 PERSON WHO VIOLATES THIS SECTION IS:
- 29 (I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A
- 30 FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR
- 31 BOTH; AND

- 1 (II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO 2 BE LEVIED BY A DISCIPLINARY PANEL.
- 3 (2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO
 4 NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER
 5 § 14–306 OF THIS TITLE IF:
- 6 (I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION 7 OF THE LICENSE; AND
- 8 (II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE 9 REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.
- 10 (3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.
- 12 14-5A-01.
- 13 (a) In this subtitle the following words have the meanings indicated.
- 14 (c) "Committee" means the Respiratory Care [Professional Standards]
- 15 **ADVISORY** Committee established under § 14–5A–05 of this subtitle.
- 16 14-5A-05.
- There is a Respiratory Care [Professional Standards] **ADVISORY** Committee within the Board.
- 19 14–5A–06.
- 20 (E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.
- 21 14–5A–09.
- [(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.
- 24 (b) The applicant shall be of good moral character.
- 25 (c) The applicant shall be at least 18 years old.
- 26 (d) The applicant] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE 27 REQUIREMENTS UNDER § 14–301 OF THIS TITLE, AN APPLICANT shall[:



1 (9)Promotes the sale of services, drugs, devices, appliances, or goods to a 2 patient so as to exploit the patient for financial gain; 3 (10)Willfully makes or files a false report or record in the practice of 4 respiratory care: 5 Willfully fails to file or record any report as required under law, (11)6 willfully impedes or obstructs the filing or recording of a report, or induces another to fail 7 to file or record a report; 8 (12)Breaches patient confidentiality; 9 Pays or agrees to pay any sum or provide any form of remuneration or (13)10 material benefit to any person for bringing or referring a patient or accepts or agrees to 11 accept any sum or any form of remuneration or material benefit from an individual for 12 bringing or referring a patient; 13 (14)Knowingly makes a misrepresentation while practicing respiratory 14 care; 15 Knowingly practices respiratory care with an unauthorized individual 16 or aids an unauthorized individual in the practice of respiratory care; 17 (16)Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine; 18 19 Is disciplined by a licensing or disciplinary authority or is convicted or 20 disciplined by a court of any state or country or is disciplined by any branch of the United 21States uniformed services or the Veterans' Administration for an act that would be grounds 22for disciplinary action under the Board's disciplinary statutes; 23Fails to meet appropriate standards for the delivery of respiratory care 24performed in any inpatient or outpatient facility, office, hospital or related institution, 25domiciliary care facility, patient's home, or any other location in this State; 26 (19)Knowingly submits false statements to collect fees for which services 27 are not provided; 28 Has been subject to investigation or disciplinary action by a (20)(i) 29 licensing or disciplinary authority or by a court of any state or country for an act that would 30 be grounds for disciplinary action under the Board's disciplinary statutes; and 31 (ii) Has:

Surrendered the license issued by the state or country; or

1.

- 1 2. Allowed the license issued by the state or country to expire 2 or lapse; 3 (21)Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article: 4 Sells, prescribes, gives away, or administers drugs for illegal or 5 6 illegitimate medical purposes; 7 (23)Practices or attempts to practice beyond the authorized scope of practice; 8 9 Refuses, withholds from, denies, or discriminates against an individual 10 with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive; 11 12 Practices or attempts to practice a respiratory care procedure or uses or 13 attempts to use respiratory care equipment if the applicant or licensee has not received 14 education and training in the performance of the procedure or the use of the equipment; 15 Fails to cooperate with a lawful investigation conducted by the Board (26)16 or a disciplinary panel; 17 Fails to practice under the supervision of a physician or violates a 18 supervisory order of a supervising physician; or 19 Fails to complete a criminal history records check under [§ 14–308.1] § **14–302** of this title. 20 2114-5B-05.22**(F)** A QUORUM OF THE COMMITTEE CONSISTS OF FIVE MEMBERS. 14-5B-07.23 24The failure of a licensed physician to properly supervise a licensee is 25unprofessional conduct in the practice of medicine under [§ 14–404(a)(3)] § 14–515(A)(3) 26 of this title. 27 14-5B-09.
- 28 (a) [To qualify for a license, an applicant shall be an individual who meets the 29 requirements of this section.

1 Except as provided in subsection [(c)] (B) of this section, [the] TO QUALIFY (b) 2 FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS 3 **TITLE, AN** applicant shall: 4 Be of good moral character; (1) Be at least 18 years old; 5 (2) 6 Demonstrate oral and written competency in English as required by the (3)7 Board: 8 Meet MEET any educational, training, or examination requirements **(4)** 9 established by the Board, including: 10 [(i)] **(1)** Graduation from an appropriate educational program as determined by the Board; and 11 Certification[; and 12 [(ii)] **(2)** 13 (5)Complete a criminal history records check in accordance with § 14 14–308.1 of this title]. 15 [(c)] **(B)** To qualify for a license to practice as a radiologist assistant, an applicant shall: 16 17 (1) Be issued a general license to perform radiography; 18 (2)Complete an advanced academic program with a nationally recognized 19 radiology curriculum that results in a baccalaureate degree, post baccalaureate certificate, 20 or graduate degree and incorporates a radiologist-directed clinical preceptorship; 21 (3)Be certified in advanced cardiac life support; and 22**(4)** Be certified as a radiologist assistant by the American Registry of 23 Radiologic Technologists. 24Except for requirements adopted by the Board for license renewal under [(d)] **(C)** 25[§ 14–5B–12 of this subtitle] § 14–306 OF THIS TITLE, nothing in this subtitle may be 26 construed to require an individual who is certified by the Board as a radiation 27oncology/therapy technologist, medical radiation technologist, or nuclear medicine

technologist as of October 1, 2008, to meet additional education, training, or examination

30 14–5B–11.

requirements.

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- 1 (a) Licensure as a radiation therapist authorizes an individual to practice 2 radiation therapy IN THE STATE while the license is effective.
- 3 (b) Licensure as a radiographer authorizes an individual to practice radiography 4 IN THE STATE while the license is effective.
- 5 (c) Licensure as a nuclear medicine technologist authorizes an individual to 6 practice nuclear medicine technology **IN THE STATE** while the license is effective.
- 7 (d) Licensure as a radiologist assistant authorizes an individual to practice 8 radiology assistance IN THE STATE while the license is effective.
- 9 14–5B–14.
- 10 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 11 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a 12 license to any applicant,] reprimand any licensee, place any licensee on probation, or 13 suspend or revoke a license, if the [applicant or] licensee:
- 14 (1) Fraudulently or deceptively obtains or attempts to obtain a license for 15 the applicant, licensed individual, or for another;
- 16 (2) Fraudulently or deceptively uses a license;
- 17 (3) Is guilty of unprofessional or immoral conduct in the practice of radiation therapy, radiography, nuclear medicine technology, or radiology assistance;
- 19 (4) Is professionally, physically, or mentally incompetent;
- 20 (5) Abandons a patient;
- 21 (6) Is habitually intoxicated;
- 22 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous 23 substance as defined in § 5–101 of the Criminal Law Article;
- 24 (8) Provides professional services while:
- 25 (i) Under the influence of alcohol; or
- 26 (ii) Using any narcotic or controlled dangerous substance as defined 27 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic 28 amounts or without valid medical indication;
- 29 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a 30 patient so as to exploit the patient for financial gain;

- Willfully makes or files a false report or record in the practice of 1 (10)2 radiation therapy, radiography, nuclear medicine technology, or radiology assistance; 3 Willfully fails to file or record any report as required under law, 4 willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report; 5 6 (12)Breaches patient confidentiality; 7 (13)Pays or agrees to pay any sum or provide any form of remuneration or 8 material benefit to any person for bringing or referring a patient or accepts or agrees to 9 accept any sum or any form of remuneration or material benefit from an individual for 10 bringing or referring a patient: 11 Knowingly makes a misrepresentation while practicing radiation 12 therapy, radiography, nuclear medicine technology, or radiology assistance; 13 Knowingly practices radiation therapy, radiography, nuclear medicine 14 technology, or radiology assistance with an unauthorized individual or aids an unauthorized individual in the practice of radiation therapy, radiography, nuclear medicine 15 technology, or radiology assistance; 16 17 Offers, undertakes, or agrees to cure or treat disease by a secret 18 method, treatment, or medicine; 19 Is disciplined by a licensing or disciplinary authority or is convicted or 20 disciplined by a court of any state or country or is disciplined by any branch of the United 21States uniformed services or the Veterans' Administration for an act that would be grounds 22for disciplinary action under the Board's disciplinary statutes; 23Fails to meet appropriate standards for the delivery of quality radiation 24therapy, radiography, nuclear medicine technology, or radiology assistance care performed 25in any outpatient surgical facility, office, hospital or related institution, or any other location in this State: 26 27 Knowingly submits false statements to collect fees for which services (19)28 are not provided; 29 Has been subject to investigation or disciplinary action by a (20)(i) 30 licensing or disciplinary authority or by a court of any state or country for an act that would
- 33 1. Surrendered the license issued by the state or country; or

be grounds for disciplinary action under the Board's disciplinary statutes; and

(ii)

Has:

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- 1 2. Allowed the license issued by the state or country to expire 2 or lapse; 3 Knowingly fails to report suspected child abuse in violation of § 5–704 (21)of the Family Law Article: 4 Sells, prescribes, gives away, or administers drugs for illegal or 5 illegitimate medical purposes; 6 7 (23)Practices or attempts to practice beyond the authorized scope of 8 practice: 9 Refuses, withholds from, denies, or discriminates against an individual 10 with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive; 11 12 Practices or attempts to practice a radiation therapy, radiography, 13 nuclear medicine technology, or radiology assistance procedure or uses radiation therapy, 14 radiography, nuclear medicine technology, or radiology assistance equipment if the 15 applicant or licensee has not received education, internship, training, or experience in the performance of the procedure or the use of the equipment; 16 17 (26)Fails to cooperate with a lawful investigation conducted by the Board 18 or a disciplinary panel; 19 Fails to practice under the supervision of a physician or violates a 20 supervisory order of a supervising physician; or 21(28)Fails to complete a criminal history records check under [§ 14–308.1] § 22 **14–302** of this title. 23 14-5C-01. 24 (a) In this subtitle the following words have the meanings indicated. 25 "Committee" means the Polysomnography [Professional Standards] **ADVISORY** Committee established under § 14–5C–05 of this subtitle. 26 27 14-5C-05.
- 30 14-5C-06.

the Board.

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(E) A QUORUM OF THE COMMITTEE CONSISTS OF FOUR MEMBERS.

There is a Polysomnography [Professional Standards] ADVISORY Committee within

14-5C-08. 1 2 (b) This section does not apply to a student enrolled in an education program 3 under [§ 14–5C–09(c)(3)] § 14–5C–09(3) of this subtitle while practicing polysomnography 4 in that program. 5 14-5C-09. 6 To qualify for a license, an applicant shall be an individual who meets the (a)7 requirements of this section. 8 (b) The applicant shall: 9 (1) Be of good moral character; 10 (2)Be at least 18 years old; and Complete a criminal history records check in accordance with § 11 (3) 12 14–308.1 of this title. 13 An] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS SET FORTH IN § 14-301 OF THIS TITLE, AN applicant for a polysomnographic technologist 14 15 license shall: 16 (1) Have passed the national certifying examination given by the Board of Registered Polysomnographic Technologists or another examination approved by the 17 Board: 18 19 (2)Submit to the Board proof of certification as a registered polysomnographic technologist or other national certification approved by the Board; 2021Have graduated from a polysomnographic educational 22program that is accredited by the Commission on Accreditation of Allied Health Education 23Programs; or 242. A. Have graduated from a sleep technologist 25educational program that is accredited by the American Academy of Sleep Medicine; and 26 Have completed a clinical component of an educational В. 27program as established by the Committee and approved by the Board; 28 (ii) Have graduated from a respiratory care educational 1. 29 program that is accredited by the Commission on Accreditation of Allied Health Education

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Programs; and

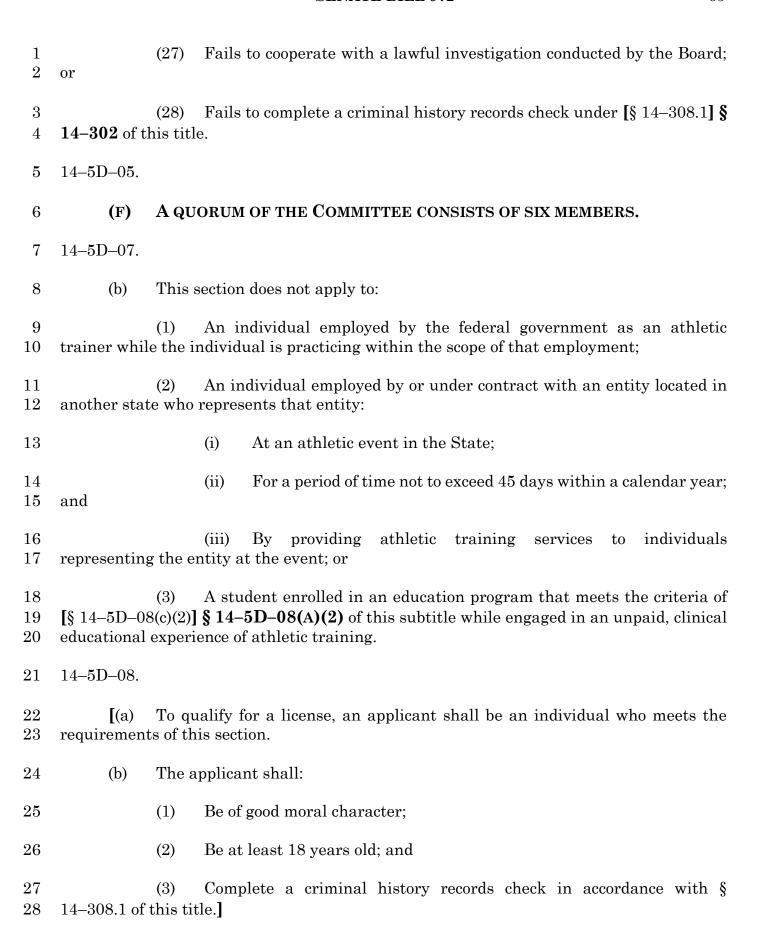
- 1 Have completed the Committee on Accreditation for 2. 2 Respiratory Care's curriculum for a polysomnography certificate that is accredited by the Commission on Accreditation of Allied Health Education Programs; or 3 4 (iii) 1. Have graduated from an electroneuro-diagnostic educational program that is accredited by the Commission on Accreditation of Allied Health 5 6 Education Programs; and 7 2. Have completed additional units, modules, and courses of 8 instruction focused on polysomnographic technology that are accredited by the Commission 9 on Accreditation of Allied Health Education Programs; and 10 Meet any other educational or clinical requirements established by the 11 Committee and approved by the Board. 12 14-5C-10.13 The Board shall waive the education requirement under [§ 14–5C–09(c)(3)] § 14 14-5C-09(3) of this subtitle if on or before September 30, 2013, an individual: 15 (1) Has passed the national certifying examination by the Board of 16 Registered Polysomnographic Technologists or another examination approved by the 17 Board: 18 (2)Is certified by the Board of Registered Polysomnographic Technologists 19 as a registered polysomnographic technologist; 20 (3)Has submitted an application for licensure to the Board; and 21Meets all of the requirements under [§ 14–5C–09(b) and (c)(1) and (2)] **(4)** § 14-301(B), (C), AND (D) OF THIS TITLE AND § 14-5C-09(1) AND (2) of this subtitle. 2223If an individual has not satisfied the requirements under subsection (a) 24of this section on or before September 30, 2013, the individual may petition the Board for 25an extension.
- 26 (2) The Board shall determine whether to grant an extension under this subsection on a case—by—case basis.]
- 28 14-5C-17.
- 29 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 30 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a 31 license to any applicant,] reprimand any licensee, place any licensee on probation, or 32 suspend or revoke a license, if the [applicant or] licensee:

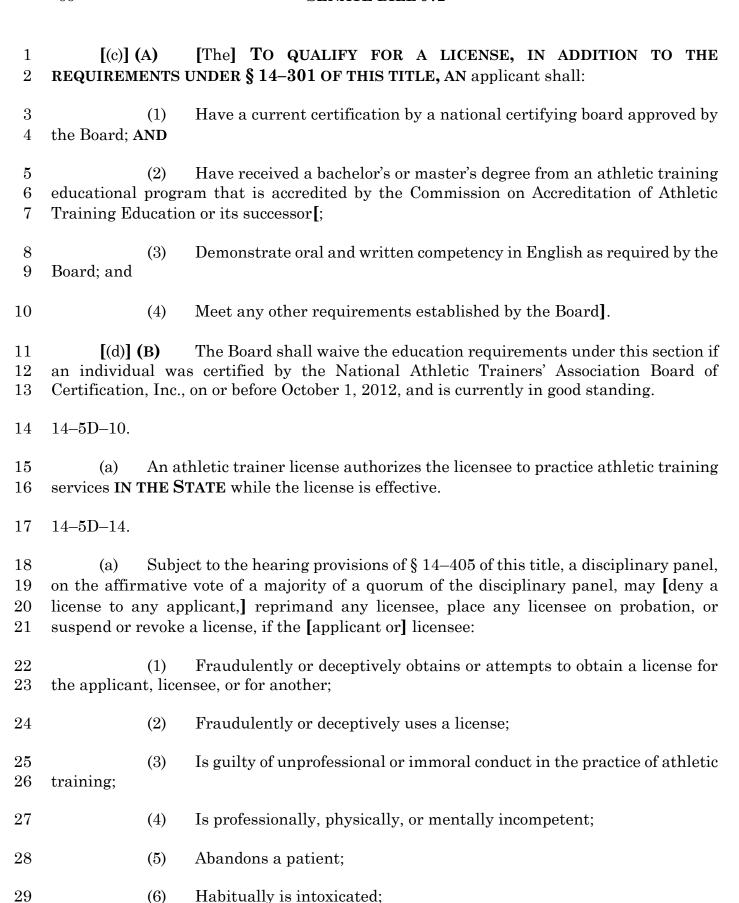
1 Fraudulently or deceptively obtains or attempts to obtain a license for (1)2 the applicant, licensee, or for another; 3 (2)Fraudulently or deceptively uses a license; 4 Is guilty of unprofessional or immoral conduct in the practice of (3)5 polysomnography; 6 Is professionally, physically, or mentally incompetent; **(4)** 7 Abandons a patient; (5)8 Is habitually intoxicated; (6)9 Is addicted to or habitually abuses any narcotic or controlled dangerous substance as defined in § 5–101 of the Criminal Law Article; 10 11 (8)Provides professional services while: Under the influence of alcohol; or 12(i) 13 Using any narcotic or controlled dangerous substance as defined in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic 14 amounts or without valid medical indication; 15 16 Promotes the sale of services, drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain: 17 18 (10)Willfully makes or files a false report or record in the practice of 19 polysomnography; Willfully fails to file or record any report as required under law, 20 21willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report; 2223 (12)Breaches patient confidentiality; 24Pays or agrees to pay any sum or provide any form of remuneration or 25material benefit to any person for bringing or referring a patient or accepts or agrees to 26 accept any sum or any form of remuneration or material benefit from an individual for 27 bringing or referring a patient; 28 Knowingly makes misrepresentation while practicing (14)a 29polysomnography; 30 Knowingly practices polysomnography with an unauthorized individual

or aids an unauthorized individual in the practice of polysomnography;

- 1 (16) Knowingly delegates a polysomnographic duty to an unlicensed 2 individual;

 (17) Offers undertakes or agrees to gure or treat disease by a secret
- 3 (17) Offers, undertakes, or agrees to cure or treat disease by a secret 4 method, treatment, or medicine;
- 5 (18) Is disciplined by a licensing or disciplinary authority or is convicted or 6 disciplined by a court of any state or country or is disciplined by any branch of the United 7 States uniformed services or the U.S. Department of Veterans Affairs for an act that would 8 be grounds for disciplinary action under the Board's disciplinary statutes;
- 9 (19) Fails to meet appropriate standards for the delivery of 10 polysomnographic services performed in a hospital sleep laboratory or a stand—alone sleep 11 center;
- 12 (20) Knowingly submits false statements to collect fees for which services are not provided;
- 14 (21) (i) Has been subject to investigation or disciplinary action by a 15 licensing or disciplinary authority or by a court of any state or country for an act that would 16 be grounds for disciplinary action under the Board's disciplinary statutes; and
- 17 (ii) Has:
- 18 1. Surrendered the license, if any, issued by the state or 19 country; or
- 20 2. Allowed the license, if any, issued by the state or country 21 to expire or lapse;
- 22 (22) Knowingly fails to report suspected child abuse in violation of § 5–704 23 of the Family Law Article;
- 24 (23) Sells, prescribes, gives away, or administers drugs for illegal or 25 illegitimate medical purposes;
- 26 (24) Practices or attempts to practice beyond the authorized scope of 27 practice;
- 28 (25) Refuses, withholds from, denies, or discriminates against an individual 29 with regard to the provision of professional services for which the licensee is licensed and 30 qualified to render because the individual is HIV positive;
- 31 (26) Practices or attempts to practice a polysomnography procedure or uses 32 or attempts to use polysomnography equipment if the applicant or licensee has not received 33 education and training in the performance of the procedure or the use of the equipment;





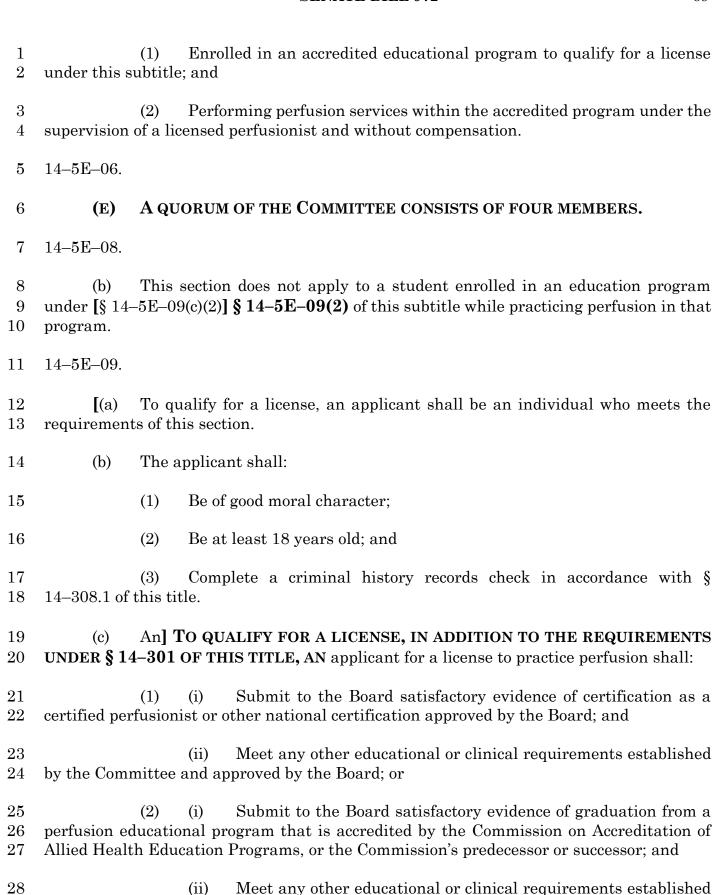
- 1 Is addicted to, or habitually abuses, any narcotic or controlled 2 dangerous substance as defined in § 5–101 of the Criminal Law Article; 3 (8)Provides professional services while: 4 (i) Under the influence of alcohol; or 5 Using any narcotic or controlled dangerous substance as defined (ii) 6 in § 5–101 of the Criminal Law Article, or any other drug that is in excess of therapeutic 7 amounts or without valid medical indication; Promotes the sale of services, drugs, devices, appliances, or goods to a 8 (9)9 patient so as to exploit the patient for financial gain; 10 (10)Willfully makes or files a false report or record in the practice of athletic 11 training; 12Willfully fails to file or record any report as required under law, (11)13 willfully impedes or obstructs the filing or recording of the report, or induces another to fail to file or record the report; 14 15 (12)Breaches patient confidentiality; 16 (13)Pays or agrees to pay any sum or provide any form of remuneration or 17 material benefit to any individual for bringing or referring a patient or accepts or agrees to accept any sum or any form of remuneration or material benefit from an individual for 18 19 bringing or referring a patient: 20 (14)Knowingly makes a misrepresentation while practicing athletic 21training; 22Knowingly practices athletic training with an unauthorized individual 23or aids an unauthorized individual in the practice of athletic trainer services; 24 Offers, undertakes, or agrees to cure or treat disease by a secret 25method, treatment, or medicine; 26 Is disciplined by a licensing, certifying, or disciplinary authority or is 27 convicted or disciplined by a court of any state or country or is disciplined by any branch of 28 the United States uniformed services or the Veterans Administration for an act that would 29 be grounds for disciplinary action under this section; 30 Fails to meet appropriate standards for the delivery of athletic training (18)
- 32 (19) Knowingly submits false statements to collect fees for which services 33 have not been provided;

services:

1 2 3	(20) (i) Has been subject to investigation or disciplinary action by a licensing or disciplinary authority or by a court of any state or country for an act that would be grounds for disciplinary action under the Board's disciplinary statutes; and
4	(ii) Has:
5	1. Surrendered the license issued by the state or country; or
6 7	2. Allowed the license issued by the state or country to expire or lapse;
8 9	(21) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;
10 11	(22) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate medical purposes;
12 13	(23) Practices or attempts to practice beyond the authorized scope of practice;
14 15 16	(24) Refuses, withholds from, denies, or discriminates against an individual with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive;
17 18 19	(25) Practices or attempts to practice an athletic training procedure or uses or attempts to use athletic training equipment if the applicant or licensee has not received education and training in the performance of the procedure or the use of the equipment;
20 21	(26) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel;
22 23	(27) Fails to practice under the supervision of a physician or violates the approved evaluation and treatment protocol;
24 25	(28) Violates an order of the Board or a disciplinary panel, including any condition of probation; or
26 27	(29) Fails to complete a criminal history records check under [§ 14–308.1] § 14–302 of this title.
28	14-5E-01.

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

30 (g) "Student" means an individual who, in accordance with [§ 14–5E–09(c)] § 31 14-5E-09 of this subtitle, is:



by the Committee and approved by the Board.

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1 14-5E-10.

- (a) Except as provided in subsection (b) of this section, an applicant who otherwise qualifies for a license under [§ 14–5E–09(c)(2)] § 14–5E–09(2) of this subtitle is entitled to be licensed for a single 2–year term before taking the national certifying examination given by the American Board of Cardiovascular Perfusion or its successor organization or another examination given or approved by the Board.
- 7 14–5E–13.
- 8 **[**(a) (1) A license expires on a date set by the Board, unless the license is 9 renewed for an additional term as provided in this section.
- 10 (2) The term of a license issued by the Board may not exceed 3 years.
- 11 (b) At least 1 month before a license expires, the Board shall send to the licensed 12 perfusionist a renewal notice that states:
- 13 (1) The date on which the current license expires;
- 14 (2) The date by which the renewal application must be received by the 15 Board for the renewal to be issued and sent before the license expires;
- 16 (3) The amount of the renewal fee; and]
- [(4)] (A) For licensees who qualified for an initial license under [§ 14–5E–09(c)(2)] § 14–5E–09(2) of this subtitle, THE NOTIFICATION SENT TO LICENSEES UNDER § 14–306(B) OF THIS TITLE SHALL INCLUDE A STATEMENT that the licensee must submit satisfactory evidence of a passing score on the examination as required under subsection [(c)(2)] (B) of this section.
- [(c) (1) Except as otherwise provided in this subtitle, before a license expires, the licensed perfusionist periodically may renew it for an additional term, if the licensee:
- 24 (i) Otherwise is entitled to be licensed;
- 25 (ii) Is of good moral character;
- 26 (iii) Pays to the Board a renewal fee set by the Board; and
- 27 (iv) Except as provided in paragraph (2) of this subsection, submits 28 to the Board:
- 29 1. A renewal application on the form that the Board requires; 30 and

1 2. Satisfactory evidence of compliance with any continuing 2 education or competency requirements and other requirements set under this section for license renewal.] 3 4 [(2)] (B) A licensee who qualified for an initial license under [§ 14-5E-09(c)(2)] § 14-5E-09(2) of this subtitle shall submit to the Board satisfactory 5 6 evidence of a passing score on the national certifying examination given by the American 7 Board of Cardiovascular Perfusion or its successor organization or another examination 8 given or approved by the Board. 9 In addition to any other qualifications and requirements established by the 10 Board, the Board shall establish continuing education or competency requirements as a condition of the renewal of a license under this section. 11 12 [(e)] **(C)** The Board shall renew the license of each licensee who meets the (1) 13 requirements of this section AND § 14–306 OF THIS TITLE. 14 (2)The Board may not renew the license of a licensee who fails to submit 15 satisfactory evidence of a passing score on the examination as required under subsection 16 [(c)(2)] (B) of this section. 17 The Board shall reinstate the license of an individual who has failed to renew 18 the license for any reason if the individual: 19 Applies for reinstatement after the date the license expires; (1) 20 (2) Meets the renewal requirements of this section; and 21(3) Pays to the Board the reinstatement fee set by the Board. 22(g) (1)Beginning October 1, 2016, the Board shall require a criminal history records check in accordance with § 14-308.1 of this title for: 23 24(i) Renewal applicants as determined by regulations adopted by the Board; and 2526 Each former licensee who files for reinstatement under (ii) 27 subsection (f) of this section. 28 On receipt of the criminal history record information of a licensee 29forwarded to the Board in accordance with § 14–308.1 of this title, in determining whether disciplinary action should be taken, based on the criminal history record information, 30

against a licensee who renewed or reinstated a license, the Board shall consider:

The age at which the crime was committed;

(i)

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(2)

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1			(ii)	The nature of the crime;
2			(iii)	The circumstances surrounding the crime;
3			(iv)	The length of time that has passed since the crime;
4			(v)	Subsequent work history;
5			(vi)	Employment and character references; and
6 7	threat to the	publi	(vii) c healt	Other evidence that demonstrates whether the licensee poses a h or safety.
8 9 10			hat the	Board may renew or reinstate a license only if the licensee or elicensee or applicant has submitted to a criminal history records of this title.
11 12 13	education cre	edit ir	ı lieu c	ry panel may impose a civil penalty of up to \$100 per continuing of a sanction under § 14–5E–16 of this subtitle, for a first offense obtain the continuing education credits required by the Board.]
14	14–5E–14.			
15 16	L \ /	(1) ress w		ensed perfusionist shall notify the Board in writing of a change in 60 days after the change.
17 18		(2)) of th		ensed perfusionist who fails to comply with the requirements of section is subject to an administrative penalty of \$100.]
19	[(b)]	Each	license	ed perfusionist shall:
20		(1)	Keep	a copy of the license in the licensee's employment file; and
21		(2)	Make	the license available for inspection on request.
22	14–5E–16.			
23 24 25 26	on the affirm license to ar	native ny ap	vote o	ne hearing provisions of § 14–405 of this title, a disciplinary panel, f a majority of the quorum of the disciplinary panel, may [deny a,] reprimand any licensee, place any licensee on probation, or use, if the [applicant or] licensee:
27 28		(1) t or lic		dulently or deceptively obtains or attempts to obtain a license for or for another;

Fraudulently or deceptively uses a license;

(3)1 Is guilty of unprofessional or immoral conduct in the practice of 2 perfusion; 3 (4) Is professionally, physically, or mentally incompetent; 4 (5)Abandons a patient; 5 (6)Is habitually intoxicated; 6 Is addicted to or habitually abuses any narcotic or controlled dangerous 7 substance as defined in § 5–101 of the Criminal Law Article; 8 Provides professional services while: (8)9 (i) Under the influence of alcohol; or 10 Using any narcotic or controlled dangerous substance as defined (ii) 11 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic amounts or without valid medical indication; 12 13 Promotes the sale of services, drugs, devices, appliances, or goods to a 14 patient so as to exploit the patient for financial gain; 15 (10)Willfully makes or files a false report or record in the practice of perfusion; 16 17 Willfully fails to file or record any report as required under law, 18 willfully impedes or obstructs the filing or recording of a report, or induces another to fail 19 to file or record a report; 20 Breaches patient confidentiality; (12)21Pays or agrees to pay any sum or provide any form of remuneration or (13)22 material benefit to any person for bringing or referring a patient or accepts or agrees to 23accept any sum or any form of remuneration or material benefit from an individual for 24bringing or referring a patient: 25 (14)Knowingly makes a misrepresentation while practicing perfusion; 26 Knowingly practices perfusion with an unauthorized individual or aids 27an unauthorized individual in the practice of perfusion; 28(16)Knowingly delegates a perfusion duty to an unlicensed individual; 29 Offers, undertakes, or agrees to cure or treat disease by a secret (17)

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method, treatment, or medicine;

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- 1 (18)Is disciplined by a licensing or disciplinary authority or is convicted or 2 disciplined by a court of any state or country or is disciplined by any branch of the United 3 States uniformed services or the U.S. Department of Veterans Affairs for an act that would be grounds for disciplinary action under the Board's disciplinary statutes; 4 5 (19)Fails to meet appropriate standards for the delivery of perfusion 6 services; 7 Knowingly submits false statements to collect fees for which services (20)8 are not provided; 9 (i) Has been subject to investigation or disciplinary action by a (21)10 licensing or disciplinary authority or by a court of any state or country for an act that would be grounds for disciplinary action under the Board's disciplinary statutes; and 11 12 (ii) Has: Surrendered the license, if any, issued by the state or 13 1. 14 country; or 2. 15 Allowed the license, if any, issued by the state or country 16 to expire or lapse; 17 Knowingly fails to report suspected child abuse in violation of § 5–704 (22)18 of the Family Law Article; 19 Sells, prescribes, gives away, or administers drugs for illegal or 20 illegitimate medical purposes; 21(24)Practices or attempts to practice beyond the authorized scope of 22practice; 23Refuses, withholds from, denies, or discriminates against an individual (25)24with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive; 2526 Practices or attempts to practice a perfusion procedure or uses or
- 29 (27) Fails to cooperate with a lawful investigation of the Board or a 30 disciplinary panel; or

and training in the performance of the procedure or the use of the equipment;

attempts to use perfusion equipment if the applicant or licensee has not received education

31 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 32 **14–302** of this title.

- 1 14-5F-07.
- 2 (G) A QUORUM OF THE COMMITTEE CONSISTS OF THREE MEMBERS.
- 3 14-5F-11.
- 4 (a) [To] IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS
- 5 TITLE, TO qualify for a license, an [applicant shall be an individual who meets the 6 requirements of this section.
- 7 (b) The applicant shall be of good moral character.
- 8 (c) The applicant shall be at least 21 years old.
- 9 [(d)] (B) Except as provided in § 14–5F–12 of this subtitle, the applicant shall:
- 10 (1) Have a doctorate in naturopathic medicine from an approved 11 naturopathic medical program; and
- 12 (2) Pass the competency-based national naturopathic licensing
- examination Part I and Part II administered by the North American Board of Naturopathic
- 14 Examiners, or its successor agency that has been nationally recognized to administer a
- 15 naturopathic examination that represents federal standards of education and training.
- 16 **[(e)] (C)** An applicant shall be physically and mentally capable of safely practicing naturopathic medicine with or without reasonable accommodation.
- 18 **[(f)] (D)** If an applicant is licensed, certified, or registered to practice naturopathic medicine or any other health occupation in another state, the applicant shall be in good standing with the applicable state licensing, certification, or registration
- 21 authority.
- [(g) An applicant shall complete a criminal history records check in accordance
- 23 with § 14–308.1 of this title.]
- 24 14-5F-12.
- To apply for a license, an applicant shall:
- [(1) Complete a criminal history records check in accordance with § 27 14–308.1 of this title;
- 28 (2) Submit an application to the Board on a form that the Board requires;
- 29 (3) Pay to the Board an application fee set by the Board;]

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1 [(4)] (1) If the applicant has been licensed, certified, or registered to 2 practice naturopathic medicine in another state, submit all evidence relating to: 3 Any disciplinary action taken or any administrative penalties 4 assessed against the applicant by the appropriate state licensing, certification, or 5 registration authority; and 6 Any consent agreements the applicant entered into that contain 7 conditions placed on the applicant's professional conduct and practice, including any 8 voluntary surrender of a license; 9 [(5)] **(2)** Complete and submit to the Board a Board-approved written 10 attestation that: 11 (i) States that the applicant has a collaboration and consultation 12 agreement with a physician licensed under this article; 13 Includes the name and license number of the physician with 14 whom the applicant has a collaboration and consultation agreement; 15 States that the applicant will refer patients to and consult with 16 physicians and other health care providers licensed or certified under this article as needed; 17 and 18 (iv) States that the applicant will require patients to sign a consent 19 form that states that the applicant's practice of naturopathic medicine is limited to the 20 scope of practice identified in § 14–5F–14 of this subtitle; and 21[(6)] **(3)** Inform the physician named in the attestation that the physician 22has been named. 23 14-5F-15.24(a) The term of a license issued by the Board may not exceed 3 years. (1) 25A license expires on a date set by the Board, unless the license is 26 renewed as provided in this section. 27 At least 1 month before the license expires, the Board shall send to the licensee 28 a renewal notice that states:

The date on which the current license expires;

Board for the renewal to be issued and mailed before the license expires; and

The date by which the renewal application must be received by the

32 (3) The amount of the renewal fee.

(1)

(2)

1	(c)	The l	Board s	shall renew the license of a licensee who:	
2		(1)	Subm	nits a renewal application on the form that the Board requires;	
3		(2)	Is of	good moral character;	
4		(3)	Pays	a renewal fee set by the Board;	
5		(4)	Is oth	nerwise entitled to be licensed;	
6 7	and	(5)	Meet	s the continuing education requirements adopted by the Board;	
8 9 10	(6) Provides] IN ADDITION TO MEETING THE LICENSE RENEWAL REQUIREMENTS UNDER § 14–306 OF THIS TITLE, THE LICENSEE SHALL PROVIDE evidence of biennial cardiopulmonary resuscitation certification.				
11 12	[(d) records che	(1) ck in a	_	nning October 1, 2016, the Board shall require a criminal history nce with § 14–308.1 of this title for:	
13 14	Board; and		(i)	Renewal applicants as determined by regulations adopted by the	
15 16	14–5F–16(b) of th	(ii) is subti	Each former licensee who files for reinstatement under § itle.	
17 18 19 20	disciplinary	actio	Board i n shou	eceipt of the criminal history record information of a licenseen accordance with § 14–308.1 of this title, in determining whether ld be taken, based on the criminal history record information, enewed or reinstated a license, the Board shall consider:	
21			(i)	The age at which the crime was committed;	
22			(ii)	The nature of the crime;	
23			(iii)	The circumstances surrounding the crime;	
24			(iv)	The length of time that has passed since the crime;	
25			(v)	Subsequent work history;	
26			(vi)	Employment and character references; and	
27 28	threat to th	e publ	(vii) ic healt	Other evidence that demonstrates whether the licensee poses as the or safety.	

- 1 (3) The Board may renew or reinstate a license only if the licensee or applicant attests that the licensee or applicant has submitted to a criminal history records check under § 14–308.1 of this title.
- 4 (e) A disciplinary panel may impose a civil penalty of up to \$100 per continuing 5 education credit in lieu of a sanction under § 14–5F–18 of this subtitle, for a first offense 6 for failure of a licensee to obtain the continuing education credits required by the Board.]
- 7 14-5F-16.
- 8 (a) [(1)] The Board may place a licensee on inactive status if the licensee 9 submits to the Board:
- 10 **[(i)] (1)** An application for inactive status on the form required by 11 the Board; and
- 12 [(ii)] (2) The inactive status fee set by the Board.
- 13 **[(2)] (B)** The Board shall issue a license to a naturopathic doctor who is on inactive status if the individual is otherwise entitled to be licensed under this subtitle and submits to the Board:
- 16 [(i)] (1) Satisfactory evidence of compliance with the requirements 17 of [§ 14–308.1] § 14–302 of this title;
- 18 **[(ii)] (2)** Satisfactory evidence of compliance with the continuing education requirements the Board adopts for this purpose; and
- [(iii)] (3) A reinstatement fee set by the Board.
- [(b) The Board shall reinstate the license of a naturopathic doctor who has failed to renew the license for any reason if the naturopathic doctor:
- 23 (1) Meets the renewal requirements of § 14–5F–15 of this subtitle;
- 24 (2) Pays to the Board a reinstatement fee set by the Board; and
- 25 (3) Submits to the Board satisfactory evidence of compliance with the 26 qualifications and requirements adopted by the Board under this subtitle for license 27 reinstatements.]
- 28 14-5F-18.
- 29 (a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 30 on the affirmative vote of a majority of a quorum of the disciplinary panel, may [deny a

- license to any applicant,] reprimand any licensee, place any licensee on probation, or suspend or revoke a license of any licensee if the [applicant or] licensee:
 - (1) Is habitually intoxicated, or is addicted to or habitually abuses any narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law Article, or any drug without a valid prescription or indication, or provides professional services while under the influence of alcohol or using any narcotic or controlled dangerous substance, as defined in § 5–101 of the Criminal Law Article;
- 8 (2) Has been found to be mentally incompetent by a physician if the mental 9 incompetence impairs the ability of the applicant or licensee to undertake the practice of 10 naturopathic medicine in a manner consistent with the safety of the public;
- 11 (3) Has entered into a consent agreement with or has been assessed an administrative penalty by a licensing authority in another state;
- 13 (4) Fraudulently or deceptively obtains, attempts to obtain, or uses a 14 license for the applicant, the licensee, or another;
- 15 (5) Has a license revoked or suspended, or was otherwise acted against, including the denial of licensure, by the licensing authority of another state;
- 17 (6) Uses false, deceptive, or misleading advertising;

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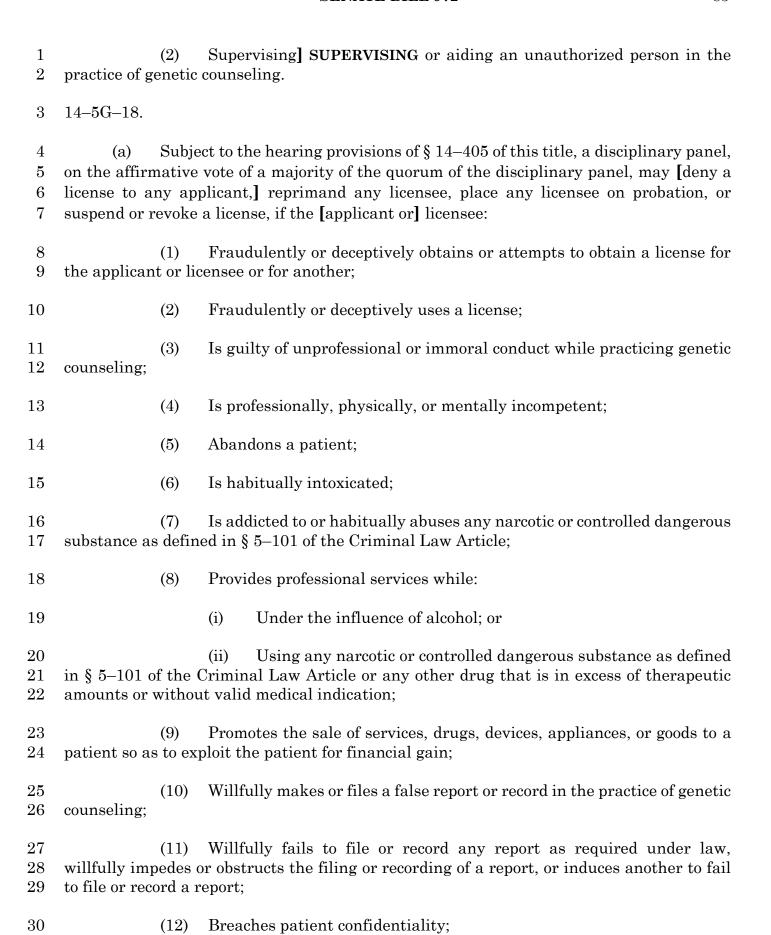
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- 18 (7) Advertises, practices, or attempts to practice under a name other than 19 the applicant's or licensee's own name;
- 20 (8) Aids, assists, employs, or advises any unlicensed individual to practice 21 naturopathic medicine in violation of this subtitle;
- 22 (9) Willfully makes or files a false report or record in the practice of 23 naturopathic medicine;
- 24 (10) Willfully or negligently fails to file a report or record as required by law, 25 willfully impedes or obstructs the filing or recording of a report, or induces another to fail 26 to file or record a report;
- 27 (11) Pays or receives any commission, bonus, kickback, or rebate, or engages 28 in any split—fee arrangement in any form with a licensed physician, organization, agency, 29 or other person, either directly or indirectly, for patients referred to health care providers;
- 30 (12) Exercises influence within a patient–doctor relationship for purposes of 31 engaging a patient in sexual activity;
 - (13) Engages in sexual misconduct with a patient;

- 1 (14) Fails to keep written medical records justifying the course of treatment 2 of a patient;
- 3 (15) Engages in an act or omission that does not meet generally accepted 4 standards of practice of naturopathic medicine or of safe care of patients, whether or not 5 actual injury to a patient is established;
- 6 (16) Delegates professional responsibilities to an individual when the 7 licensee delegating the responsibilities knows or has reason to know that the individual is 8 not qualified by training, experience, or licensure to perform the responsibilities;
- 9 (17) Promotes the sale of services, drugs, devices, appliances, or goods to a 10 patient so as to exploit the patient for financial gain;
- 11 (18) Breaches patient confidentiality;
- 12 (19) Is guilty of unprofessional or immoral conduct in the practice of 13 naturopathic medicine;
- 14 (20) Offers, undertakes, or agrees to cure or treat a disease by a secret 15 method, treatment, or medicine;
- 16 (21) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;
- 18 (22) Sells, prescribes, gives away, or administers drugs for illegal or 19 illegitimate purposes;
- 20 (23) Denies or discriminates against an individual with regard to the 21 provision of professional services for which the licensee is licensed and qualified to render 22 because the individual is HIV positive;
- 23 (24) Fails to cooperate with a lawful investigation of the Board;
- 24 (25) Abandons a patient;
- 25 (26) Violates any provision of this title or any regulation adopted by the 26 Board; or
- 27 (27) Fails to complete a criminal history records check under [§ 14–308.1] § 28 **14–302** of this title.
- 29 14–5F–21.
- 30 **[**(a) The Board shall give notice and hold a hearing in accordance with the 31 Administrative Procedure Act.

- 1 (b) The individual may be represented at the hearing by counsel.
- 2 (c) Over the signature of an officer or the administrator of the Board, the Board or a disciplinary panel may issue subpoenas and administer oaths in connection with any investigation under this subtitle and any hearings or proceedings before the Board or a disciplinary panel.
- 6 (d) If, without lawful excuse, a person disobeys a subpoena from the Board or a disciplinary panel or an order by the Board or a disciplinary panel to take an oath or to testify or answer a question, then, on petition of the Board, a court of competent jurisdiction may punish the person as for contempt of court.
- 10 (e) If, after due notice, the individual against whom the action is contemplated 11 fails or refuses to appear, the Board or a disciplinary panel may hear and determine the 12 matter.
- 13 (f)] If, after a hearing IN ACCORDANCE WITH THE ADMINISTRATIVE 14 PROCEDURE ACT, an individual is found in violation of § 14–5F–18 of this subtitle, the 15 individual shall pay the costs of the hearing as specified in a regulation adopted by the 16 Board.
- 17 14-5F-24.
- 18 (c) A disciplinary panel may not reinstate a surrendered or revoked license that 19 has been surrendered or revoked for a period of more than 1 year unless the licensee:
- 20 (1) Meets the requirements for reinstatement as established under this 21 title; and
- 22 (2) Completes a criminal history records check in accordance with [§ 23 14–308.1] § 14–302 of this title.
- 24 14-5G-09.
- 25 (a) To qualify for a license to practice genetic counseling, an applicant shall be an 26 individual who meets the requirements of this section AND § 14–301 OF THIS TITLE.
- (b) [The applicant must be of good moral character.
- 28 (c) The applicant must be at least 18 years old.
- 29 (d)] The applicant must be a graduate of an appropriate education program 30 approved by the Board.

- [(e)] (C) Except as provided in subsection [(f)] (D) of this section, the applicant shall submit to the Board satisfactory evidence of certification by a national certifying organization approved by the Board.
- 4 [(f)] (D) If an applicant does not meet the requirement under subsection [(e)] 5 (C) of this section, the applicant may qualify for licensure if the applicant:
- 6 (1) Has worked as a genetic counselor for:
- 7 (i) At least 10 years before January 1, 2024; and
- 8 (ii) At least 5 consecutive years immediately preceding the date on which the applicant submits the application for licensure;
- 10 (2) Has graduated from an education program approved by the Board;
- 11 (3) Submits to the Board three letters of recommendation from licensed 12 physicians who have been licensed for at least 5 years or certified genetic counselors eligible 13 for licensure and who:
- 14 (i) Have worked with the applicant in an employment or 15 professional setting for 3 years before the applicant submits the application for licensure; 16 and
- 17 (ii) Can attest to the applicant's competency in providing genetic 18 counseling services; and
- 19 (4) Applies for initial licensure on or before December 31, 2024.
- [(g) The applicant shall complete a criminal history records check in accordance with § 14–308.1 of this title.]
- [(h)] (E) The applicant shall meet any additional education, training, or examination requirements established by the Board.
- 24 14-5G-14.
- 25 (h) A supervised genetic counselor is subject to discipline under [§ 14–5G–19] § 26 14–5G–18 of this subtitle to the same extent as a genetic counselor.
- 27 14-5G-17.
- A disciplinary panel may issue a cease and desist order for [:
- 29 (1) Practicing genetic counseling without a license or with an unauthorized 30 person; or



1 2 3 4	(13) Pays or agrees to pay any sum or provide any form of remuneration material benefit to any person for bringing or referring a patient or accepts or agrees accept any sum or any form of remuneration or material benefit from an individual for bringing or referring a patient;
5 6	(14) Knowingly makes a misrepresentation while practicing genet counseling;
7 8	(15) Knowingly practices genetic counseling with an unauthorized individual or aids an unauthorized individual in practicing genetic counseling;
9 10	(16) Knowingly delegates a genetic counseling duty to an unlicense individual;
11	(17) Grossly overutilizes health care services;
12 13	(18) Offers, undertakes, or agrees to cure or treat disease by a secr method, treatment, or medicine;
14 15 16 17	(19) Is disciplined by a licensing or disciplinary authority or is convicted disciplined by a court of any state or country or is disciplined by any branch of the Unite States uniformed services or the U.S. Department of Veterans Affairs for an act that wou be grounds for disciplinary action under the Board's disciplinary statutes;
18 19	(20) Fails to meet appropriate standards for the delivery of genet counseling services;
20 21	(21) Knowingly submits false statements to collect fees for which service are not provided;
22 23 24	(22) (i) Has been subject to investigation or disciplinary action by licensing or disciplinary authority or by a court of any state or country for an act that wou be grounds for disciplinary action under the Board's disciplinary statutes; and
25	(ii) Has:
26 27	1. Surrendered the license, if any, issued by the state country; or
28 29	2. Allowed the license, if any, issued by the state or count to expire or lapse;
30 31	(23) Knowingly fails to report suspected child abuse in violation of § 5–70 of the Family Law Article;

- 1 (24) Practices or attempts to practice beyond the authorized scope of 2 practice;
- 3 (25) Refuses, withholds from, denies, or discriminates against an individual 4 with regard to the provision of professional services for which the licensee is licensed and 5 qualified to render because the individual is HIV positive;
- 6 (26) Practices or attempts to practice genetic counseling procedures or uses 7 or attempts to use genetic assessments if the applicant or licensee has not received 8 education and training in the performance of the procedure or the use of the genetic 9 assessment;
- 10 (27) Fails to cooperate with a lawful investigation of the Board or a 11 disciplinary panel;
- 12 (28) Fails to complete a criminal history records check under [§ 14–308.1] § 13 14–302 of this title; or
- 14 (29) Violates any provision of this title or any rule or regulation pertaining 15 to genetic counseling that is adopted by the Board, the State, or the federal government.

16 SUBTITLE 5H. PHYSICIAN ASSISTANTS.

- 17 14-5H-01.
- 18 (a) In this title the following words have the meanings indicated.
- 19 [(d) "Board" means the State Board of Physicians, established under § 14–201 of 20 this article.]
- [(e)] (D) "Committee" means the Physician Assistant Advisory Committee.
- [(f)] (E) "Controlled dangerous substances" has the meaning stated in § 5–101 of the Criminal Law Article.
- [(g)] **(F)** "Correctional facility" includes a State or local correctional facility.
- [(h)] (G) "Delegated medical acts" means activities that constitute the practice of medicine delegated by a physician under [Title 14 of this article] THIS TITLE.
- [(i)] (H) "Delegation agreement" means a document that is executed by a primary supervising physician and a physician assistant containing the requirements of [§ 15–302] § 14–5H–08 of this [title] SUBTITLE.
- [(i-1) "Disciplinary panel" means a disciplinary panel of the Board established under 14-401 of this article.]

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$1\\2$	[(j)] (I) article.	"Dispense" or "dispensing" has the meaning stated in § 12–101 of this		
3 4	[(k)] (J) promote the sale of	"Drug sample" means a unit of a prescription drug that is intended to of the drug and is not intended for sale.		
5	[(l)] (K)	"Hospital" means:		
6	(1)	A hospital as defined under § 19–301 of the Health – General Article;		
7	(2)	A comprehensive care facility that:		
8 9	facility under fede	(i) Meets the requirements of a hospital-based skilled nursing under federal law; and		
10		(ii) Offers acute care in the same building; and		
11 12 13	(3) freestanding med General Article.	An emergency room that is physically connected to a hospital or a ical facility that is licensed under Title 19, Subtitle 3A of the Health –		
14 15	[(m)] (L) under this title.	"License" means a license issued by the Board to a physician assistant		
16 17 18	[(n)] (M) "National certifying examination" means the Physician Assistant National Certifying Examination administered by the National Commission of Certification of Physician Assistants or its successor.			
19 20	[(o)] (N) title to practice me	"Physician assistant" means an individual who is licensed under this edicine with physician supervision.		
21 22	[(p)] (O) acts that are:	"Practice as a physician assistant" means the performance of medical		
23	(1)	Delegated by a supervising physician to a physician assistant;		
24	(2)	Within the supervising physician's scope of practice; and		
25 26	(3) experience.	Appropriate to the physician assistant's education, training, and		

alternate supervising physician to a physician assistant to:

"Prescriptive authority" means the authority delegated by a primary or

1 Prescribe and administer controlled dangerous substances, prescription (1) 2 drugs, medical devices, and the oral, written, or electronic ordering of medications; and 3 Dispense as provided under $[\S 15-302.2(b), (c), and (d)]$ § 14-5H-10(B), (C), AND (D) of this [title] SUBTITLE. 4 5 [(r)] (Q) "Primary supervising physician" means a physician who: 6 Completes a delegation agreement that meets the requirements under (1)7 [§§ 15–301(d) and (e) and 15–302] §§ 14–5H–07(D) AND (E) AND 14–5H–08 of this [title] **SUBTITLE** and files a copy with the Board: 8 9 Acts as the physician responsible to ensure that a physician assistant (2)10 practices medicine in accordance with this title and the regulations adopted under this title; 11 (3)Ensures that a physician assistant practices within the scope of practice 12 of the primary supervising physician or any designated alternate supervising physician; 13 and 14 **(4)** Ensures that a list of alternate supervising physicians is maintained at 15 the practice setting. 16 [(s)](R)"Public health facility" means a site where clinical public health 17 services are rendered under the auspices of the Department, a local health department in 18 a county, or the Baltimore City Health Department. [(t)] **(**S**)** "Starter dosage" means an amount of a drug sufficient to begin therapy: 19 20 Of short duration of 72 hours or less; or (1) 21Prior to obtaining a larger quantity of the drug to complete therapy. (2)22[(u)] **(T)** "Supervision" means the responsibility of a physician to exercise (1) 23on-site supervision or immediately available direction for physician assistants performing 24delegated medical acts.

29 14-5H-02.

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30 (a) A physician assistant may not practice within the scope of practice of any of 31 the following health occupations authorized under this article:

responsibility for the patient services and care rendered by a physician assistant, including

continuous availability to the physician assistant in person, through written instructions,

or by electronic means and by designation of one or more alternate supervising physicians.

"Supervision" includes physician oversight of and acceptance of direct

- 1 (1) Nursing;
- 2 (2) Optometry;
- 3 (3) Physical therapy; or
- 4 (4) Psychology.
- 5 **[**(b) This title does not limit the right of an individual to practice a health 6 occupation that the individual is authorized to practice under this article.]
- 7 14-5H-03.
- 8 (c) Except as otherwise provided under subsections (b) and (d) of this section, a hospital, a related institution, an alternative health care system, or an employer of a physician assistant shall report to the Board any limitation, reduction, or other change of the terms of employment of the physician assistant or any termination of employment of the physician assistant for any reason that might be grounds for disciplinary action under [§ 15–314] § 14–5H–16 of this [title] SUBTITLE.
- 14 (d) A hospital, related institution, alternative health system, or employer that has reason to know that a physician assistant has committed an action or has a condition that might be grounds for reprimand or probation of the physician assistant or suspension or revocation of the license of the physician assistant under [§ 15–314] § 14–5H–16 of this [title] SUBTITLE because the physician assistant is alcohol— or drug—impaired is not required to report to the Board if:
- 20 (1) The hospital, related institution, alternative health system, or 21 employer knows that the physician assistant is:
- 22 (i) In an alcohol or drug treatment program that is accredited by the 23 Joint Commission [on the Accreditation of Healthcare Organizations] or is certified by the 24 Department; or
- 25 (ii) Under the care of a health care practitioner who is competent 26 and capable of dealing with alcoholism and drug abuse;
- 27 (2) The hospital, related institution, alternative health system, or 28 employer is able to verify that the physician assistant remains in the treatment program 29 until discharge; and
- 30 (3) The action or condition of the physician assistant has not caused injury 31 to any person while the physician assistant is practicing as a licensed physician assistant.
- 32 (e) (1) If the physician assistant enters, or is considering entering, an alcohol 33 or drug treatment program that is accredited by the Joint Commission [on Accreditation of

- 1 Healthcare Organizations] or that is certified by the Department, the physician assistant
- 2 shall notify the hospital, related institution, alternative health system, or employer of the
- 3 physician assistant's decision to enter the treatment program.
- 4 14-5H-06.
- 5 (a) In addition to the powers set forth elsewhere in this title, the Committee, on 6 its initiative or on the Board's request, may:
- 7 (1) Recommend to the Board regulations for carrying out the provisions of 8 this title;
- 9 (2) Recommend to the Board approval, modification, or disapproval of an application for licensure or a delegation agreement;
- 11 (3) Report to the Board any conduct of a supervising physician or a physician assistant that may be cause for disciplinary action under this [title] **SUBTITLE** 13 or under [§ 14–404 of this article] § 14–515 OF THIS TITLE; and
- 14 (4) Report to the Board any alleged unauthorized practice of a physician 15 assistant.
- 16 14-5H-07.
- 17 (c) Patient services that may be provided by a physician assistant include:
- 18 (1) (i) Taking complete, detailed, and accurate patient histories; and
- 19 (ii) Reviewing patient records to develop comprehensive medical 20 status reports;
- 21 (2) Performing physical examinations and recording all pertinent patient 22 data;
- 23 (3) Interpreting and evaluating patient data as authorized by the primary 24 or alternate supervising physician for the purpose of determining management and 25 treatment of patients;
- 26 (4) Initiating requests for or performing diagnostic procedures as indicated by pertinent data and as authorized by the supervising physician;
- 28 (5) Providing instructions and guidance regarding medical care matters to patients;

- 1 (6) Assisting the primary or alternate supervising physician in the delivery 2 of services to patients who require medical care in the home and in health care institutions, 3 including:
- 4 (i) Recording patient progress notes;
- 5 (ii) Issuing diagnostic orders; and
- 6 (iii) Transcribing or executing specific orders at the direction of the 7 primary or alternate supervising physician; and
- 8 (7) Exercising prescriptive authority under a delegation agreement and in accordance with [§ 15–302.2] § 14–5H–10 of this subtitle.
- 10 14-5H-08.

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- 12 (c) (2) (ii) 1. Before a physician assistant may perform X-ray duties 12 authorized under [§ 14–306(e)] § 14–503(E) of this [article] TITLE in the medical office of 13 the physician delegating the duties, a primary supervising physician shall obtain the 14 Board's approval of a delegation agreement that includes advanced duties in accordance 15 with subsubparagraph 2 of this subparagraph.
 - (g) If the Board determines that a primary or alternate supervising physician or physician assistant is practicing in a manner inconsistent with the requirements of this title [or Title 14 of this article], the Board on its own initiative or on the recommendation of the Committee may demand modification of the practice, withdraw the approval of the delegation agreement, or refer the matter to a disciplinary panel for the purpose of taking other disciplinary action under [§ 14–404 or §15–314] § 14–5H–16 OF THIS SUBTITLE OR § 14–515 of this [article] TITLE.
 - (k) Subject to the [notice] NOTIFICATION required under [§ 15–103] § 14–5H–03 of this [title] SUBTITLE, a physician assistant may terminate a delegation agreement filed with the Board under this subtitle at any time.
- (l) (2) If there is no designated alternate supervising physician or the designated alternate supervising physician does not agree to supervise the physician assistant, the physician assistant may not practice until the physician assistant receives approval of a new delegation agreement under [§ 15–302.1] § 14–5H–09 of this subtitle.
- 30 (m) A physician assistant whose delegation agreement is terminated may not practice as a physician assistant until the physician assistant receives preliminary approval of a new delegation agreement under [§ 15–302.1] § 14–5H–09 of this subtitle.
- 33 14–5H–09.

- 1 (a) If a delegation agreement does not include advanced duties or the advanced 2 duties have been approved under [§ 15–302(c)(1)] § 14–5H–08(C)(1) of this subtitle, a 3 physician assistant may assume the duties under a delegation agreement on the date that 4 the Board acknowledges receipt of the completed delegation agreement.
 - (b) In this section, "pending" means that a delegation agreement that includes delegation of advanced duties in a setting that does not meet the requirements under [§ 15–302(c)(1)] § 14–5H–08(C)(1) of this subtitle has been executed and submitted to the Board for its approval, but:
- 9 (1) The Committee has not made a recommendation to the Board; or
- 10 (2) The Board has not made a final decision regarding the delegation 11 agreement.
- 12 14-5H-10.

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- 13 (e) Before a physician assistant may renew a license for an additional 2-year 14 term under [§ 15–307] § 14–306 of this [subtitle] TITLE, the physician assistant shall 15 submit evidence to the Board of successful completion of 8 category 1 hours of pharmacology 16 education within the previous 2 years.
- 17 14-5H-12.
- 18 (a) [To] IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS 19 TITLE, TO qualify for a license, an applicant shall:
- 20 **[**(1) Complete a criminal history records check in accordance with § 21 14–308.1 of this article;
- 22 (2) Be of good moral character;
- 23 (3) Demonstrate oral and written competency in the English language as 24 required by the Board;
- 25 (4) Be at least 18 years old; and
- 26 (5) (i)] (1) Be a graduate of a physician assistant training program 27 approved by the Board; or
- [(ii)] (2) Have passed the physician assistant national certifying examination administered by the National Commission on Certification of Physician Assistants prior to 1986, maintained all continuing education and recertification requirements, and been in continuous practice since passage of the examination.
- 32 14-5H-14.

- 1 **[**(a)**]** Each licensee shall keep a license and delegation agreement for inspection at 2 the primary place of business of the licensee.
- 3 **[**(b) (1) Each licensee shall give the Board written notice of any change of name 4 or address within 60 days of the date of the change.
- 5 (2) A licensee who fails to comply with this subsection is subject to an 6 administrative penalty of \$100.]
- 7 14-5H-15.
- 8 (a) [(1)] Except as otherwise provided under § 10–226 of the State Government 9 Article, before the Board takes any action to reject or modify a delegation agreement or 10 advanced duty, the Board shall give the licensee the opportunity for a hearing before the
- 11 Board.
- 12 **[(2)] (B)** The Board shall give notice and hold the hearing under Title 10, 13 Subtitle 2 of the State Government Article.
- 14 **[**(3)**] (C)** The Board may administer oaths in connection with any 15 proceeding under this section.
- 16 **[**(4)**] (D)** At least 14 days before the hearing, the hearing notice shall be sent to the last known address of the applicant or licensee.
- [(b) Any licensee aggrieved under this subtitle by a final decision of the Board rejecting or modifying a delegation agreement or advanced duty may petition for judicial review as allowed by the Administrative Procedure Act.]
- 21 14-5H-16.
- 22 (a) Subject to the hearing provisions of [§ 15–315] § 14–405 of this [subtitle] 23 TITLE, a disciplinary panel, on the affirmative vote of a majority of the quorum, may 24 reprimand any physician assistant, place any physician assistant on probation, or suspend 25 or revoke a license if the physician assistant:
- 26 (1) Fraudulently or deceptively obtains or attempts to obtain a license for 27 the applicant or licensee or for another;
- 28 (2) Fraudulently or deceptively uses a license;
- 29 (3) Is guilty of:
- 30 (i) Immoral conduct in the practice of medicine; or

1		(ii) Unprofessional conduct in the practice of medicine;
2	(4)	Is professionally, physically, or mentally incompetent;
3 4	(5) [article] SUBTITL	Solicits or advertises in violation of [§ 14–503] § 14–5H–19 of this E ;
5	(6)	Abandons a patient;
6	(7)	Habitually is intoxicated;
7 8	(8) dangerous substan	Is addicted to, or habitually abuses, any narcotic or controlled ace as defined in § 5–101 of the Criminal Law Article;
9	(9)	Provides professional services:
10		(i) While under the influence of alcohol; or
11 12 13	=	(ii) While using any narcotic or controlled dangerous substance, as of the Criminal Law Article, or other drug that is in excess of therapeutic at valid medical indication;
14 15	(10) as to exploit the pa	Promotes the sale of drugs, devices, appliances, or goods to a patient so atient for financial gain;
16 17	medicine; (11)	Willfully makes or files a false report or record in the practice of
18 19 20	(12) willfully impedes of to file or record th	Willfully fails to file or record any medical report as required under law, or obstructs the filing or recording of the report, or induces another to fail e report;
21 22 23		On proper request, and in accordance with the provisions of Title 4, Health – General Article, fails to provide details of a patient's medical nt, another physician, or hospital;
24 25	(14) profits from the ac	Solicits professional patronage through an agent or other person or ets of a person who is represented as an agent of the physician;
26 27 28	(15) patient or accepts patient;	Pays or agrees to pay any sum to any person for bringing or referring a or agrees to accept any sum from any person for bringing or referring a
29 30	(16) the laboratory for	Agrees with a clinical or bioanalytical laboratory to make payments to a test or test series for a patient, unless the licensed physician assistant

discloses on the bill to the patient or third-party payor:

illegitimate medical purposes;

1	(i) The name of the laboratory;		
2	(ii) The amount paid to the laboratory for the test or test series; and		
3 4	`	iii) The amount of procurement or processing charge of the licensed each specimen taken;		
5	(17) N	Makes a willful misrepresentation in treatment;		
6 7		Practices medicine with an unauthorized person or aids an in the practice of medicine;		
8	(19)	Grossly overutilizes health care services;		
9 10	(20) (method, treatment, o	Offers, undertakes, or agrees to cure or treat disease by a secret or medicine;		
11 12 13 14	(21) Is disciplined by a licensing or disciplinary authority or convicted or disciplined by a court of any state or country or disciplined by any branch of the United States uniformed services or the Veterans' Administration for an act that would be grounds for disciplinary action under this section;			
15 16 17	* /	Fails to meet appropriate standards for the delivery of quality medical rformed in an outpatient surgical facility, office, hospital, or any other e;		
18 19	(23) V not provided;	Villfully submits false statements to collect fees for which services are		
20 21 22	(24) Was subject to investigation or disciplinary action by a licensing of disciplinary authority or by a court of any state or country for an act that would be grounds for disciplinary action under this section and the licensee:			
23 24	state or country; or	i) Surrendered the license issued by the state or country to the		
25 26	lapse;	ii) Allowed the license issued by the state or country to expire or		
27 28	(25) If of the Family Law A	Knowingly fails to report suspected child abuse in violation of $\S 5-704$ rticle;		
29 30	, ,	Fails to educate a patient being treated for breast cancer of alternative at as required by § 20–113 of the Health – General Article;		
31	(27)	Sells, prescribes, gives away, or administers drugs for illegal or		

- 1 (28)Fails to comply with the provisions of § 12–102 of this article; 2 (29)Refuses, withholds from, denies, or discriminates against an individual 3 with regard to the provision of professional services for which the physician assistant is 4 licensed and qualified to render because the individual is HIV positive; 5 Except as to an association that has remained in continuous existence 6 since July 1, 1963: 7 (i) Associates with a pharmacist as a partner or co-owner of a pharmacy for the purpose of operating a pharmacy; 8 9 Employs a pharmacist for the purpose of operating a pharmacy; (ii) 10 or 11 (iii) Contracts with a pharmacist for the purpose of operating a 12 pharmacy; 13 Except in an emergency life-threatening situation where it is not 14 feasible or practicable, fails to comply with the Centers for Disease Control and 15 Prevention's guidelines on universal precautions; Fails to display the notice required under [§ 14-415] § 14-519 of this 16 [article] TITLE; 17 18 Fails to cooperate with a lawful investigation conducted by the Board (33)19 or a disciplinary panel; 20 (34)Is convicted of insurance fraud as defined in § 27–801 of the Insurance Article: 2122 Is in breach of a service obligation resulting from the applicant's or 23licensee's receipt of State or federal funding for the physician assistant's medical education; 24Willfully makes a false representation when seeking or making 25application for licensure or any other application related to the practice of medicine; 26 By corrupt means, threats, or force, intimidates or influences, or 27attempts to intimidate or influence, for the purpose of causing any person to withhold or 28change testimony in hearings or proceedings before the Board or a disciplinary panel or
- 30 (38) By corrupt means, threats, or force, hinders, prevents, or otherwise 31 delays any person from making information available to the Board or a disciplinary panel 32 in furtherance of any investigation of the Board or a disciplinary panel;

those otherwise delegated to the Office of Administrative Hearings;

- 1 (39) Intentionally misrepresents credentials for the purpose of testifying or 2 rendering an expert opinion in hearings or proceedings before the Board or a disciplinary 3 panel or those otherwise delegated to the Office of Administrative Hearings;
- 4 (40) Fails to keep adequate medical records;
- 5 (41) Performs delegated medical acts beyond the scope of the delegation 6 agreement filed with the Board or after notification from the Board that an advanced duty 7 has been disapproved;
- 8 (42) Performs delegated medical acts without the supervision of a physician;
- 9 (43) Fails to complete a criminal history records check under [§ 14–308.1] § 10 **14–302** of this [article] TITLE;
- 11 (44) Fails to comply with the requirements of the Prescription Drug 12 Monitoring Program in Title 21, Subtitle 2A of the Health – General Article;
- 13 (45) Fails to comply with the requirements of the Prescription Drug 14 Monitoring Program under Title 21, Subtitle 2A of the Health – General Article; or
- 15 (46) Fails to comply with any State or federal law pertaining to the practice 16 as a physician assistant.
- 17 IF, AFTER A HEARING UNDER § 14–405 OF THIS TITLE, A DISCIPLINARY PANEL FINDS THAT THERE ARE GROUNDS FOR DISCIPLINE UNDER SUBSECTION (A) 18 19 OF THIS SECTION TO SUSPEND OR REVOKE A LICENSE OF A PHYSICIAN ASSISTANT, 20 REPRIMAND A LICENSED PHYSICIAN ASSISTANT, OR PLACE THE LICENSED 21 PHYSICIAN ASSISTANT ON PROBATION, THE DISCIPLINARY PANEL MAY IMPOSE A 22FINE SUBJECT TO THE BOARD'S REGULATIONS IN ADDITION TO SUSPENDING OR 23REVOKING THE LICENSE, REPRIMANDING THE LICENSEE, OR PLACING THE 24LICENSEE ON PROBATION.
- 25 (D) THE BOARD SHALL PAY ANY FINES COLLECTED UNDER THIS SECTION 26 INTO THE GENERAL FUND OF THE STATE.
- 27 (E) IN ADDITION TO ANY SANCTION AUTHORIZED UNDER THIS SUBTITLE, A
 28 DISCIPLINARY PANEL MAY REQUIRE A LICENSEE TO COMPLY WITH SPECIFIED
 29 TERMS AND CONDITIONS DETERMINED BY THE DISCIPLINARY PANEL.
- 30 14-5H-21.
- 31 (a) A person who violates [§ 15–401 or § 15–402] **§ 14–5H–18 OR § 14–5H–19** 32 of this subtitle:

- 1 (1) Is guilty of a misdemeanor and on conviction is subject to a fine not exceeding \$5,000 or imprisonment not exceeding 5 years or both; and
- 3 (2) Shall lose licensure as a physician assistant under this title.
- 4 (b) (1) In addition to the penalties under subsection (a) of this section, a person 5 who violates [§ 15–401] § 14–5H–18 of this subtitle may be subject to a civil penalty 6 assessed by a disciplinary panel in an amount not exceeding \$5,000.
- 7 (2) In addition to the penalties under paragraph (1) of this subsection, a person who violates [§ 15–309] § 14–5H–14 of this [title] SUBTITLE may be subject to a civil penalty assessed by a disciplinary panel in an amount not exceeding \$100.
- 10 (3) The Board shall pay any civil penalty collected under this subsection 11 into the Board of Physicians Fund.
- 12 14-5H-22.
- This [title] **SUBTITLE** may be cited as the "Maryland Physician Assistants Act".
- 14 14-5H-23.
- Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act, this [title] SUBTITLE and all regulations adopted under this [title] SUBTITLE shall terminate and be of no effect after July 1, 2030.

18 Article – Transportation

- 19 13-616.
- 20 (a) (1) In this subtitle the following words have the meanings indicated.
- 21 (7) "Licensed physician assistant" means an individual who is licensed 22 under Title [15] **14**, **SUBTITLE 5H** of the Health Occupations Article to practice medicine 23 with physician supervision.
- SECTION 4. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

26 Article - Health Occupations

- 27 14-3A-01.
- The Interstate Medical Licensure Compact is enacted into law and entered into with all other states legally joining in it in the form substantially as it appears in this section as follows:

1 SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE

- 2 (b) (3) (i) The member board within the state selected as the state of principal license shall, in the course of verifying eligibility, require the applicant to obtain a criminal background check as required under [§ 14–308.1] § 14–302 of this title, including the use of the results of fingerprint or other biometric data checks compliant with the requirements of the Federal Bureau of Investigation, with the exception of federal employees who have suitability determination in accordance with U.S. C.F.R. § 731.202.
- 8 SECTION 5. AND BE IT FURTHER ENACTED, That the Laws of Maryland read 9 as follows:

10 Article - Tax - General

- 11 10-752.
- 12 (a) (1) In this section the following words have the meanings indicated.
- 13 (3) "Health care practitioner" means an individual who:
- 14 (i) is licensed to practice medicine under Title 14 of the Health 15 Occupations Article;
- 16 (ii) is a physician assistant, as defined in [§ 15–101] **§ 14–5H–01** of the Health Occupations Article; or
- 18 (iii) is a registered nurse practitioner, as defined in § 8–101 of the 19 Health Occupations Article.
- 20 (d) (7) The Fund consists of:
- 21 (i) revenue distributed to the Fund under [§ 15–206] **§ 14–207** of the Health Occupations Article:
- 23 (ii) money appropriated in the State budget to the Fund; and
- 24 (iii) any other money from any other source accepted for the benefit 25 of the Fund.
- SECTION 6. AND BE IT FURTHER ENACTED, That the publisher of the Annotated Code of Maryland, in consultation with and subject to the approval of the Department of Legislative Services, shall correct, with no further action required by the General Assembly, cross—references and terminology rendered incorrect by this Act. The publisher shall adequately describe any correction that is made in an editor's note following
- 31 the section affected.

SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022. Section 4 of this Act shall remain effective until the taking effect of the termination provision specified in Section 5 of Chapter 470 of the Acts of the General Assembly of 2018. If that termination provision takes effect, Section 4 of this Act shall be abrogated and of no further force and effect. Section 5 of this Act shall remain effective until the taking effect of the termination provision specified in Section 6 of Chapters 153 and 154 of the Acts of the General Assembly of 2021. If that termination provision takes effect, Section 5 of this Act shall be abrogated and of no further force and effect. This Act may not be interpreted to have any effect on those termination provisions.