

HOUSE BILL 232

J2

(PRE-FILED)

4lr0170
CF SB 218

By: **Chair, Health and Government Operations Committee (By Request – Departmental – Health)**

Requested: September 13, 2023

Introduced and read first time: January 10, 2024

Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: February 6, 2024

CHAPTER _____

1 AN ACT concerning

2 **Physicians and Allied Health Professions – Reorganization and Revisions**

3 FOR the purpose of repealing obsolete and redundant language in, clarifying language in,
4 and reorganizing certain provisions of law governing the State Board of Physicians
5 and the regulation of physicians, physician assistants, and allied health professions;
6 prohibiting the Board from releasing a list of applicants for licensure; altering
7 physician, physician assistant, and allied health professional licensure exceptions
8 for individuals in the service of the federal government; altering the grounds for
9 discipline for physicians, physician assistants, and allied health professionals;
10 repealing the requirement that the Board provide a certain data sheet; establishing
11 the quorums for the allied health committees; and generally relating to the State
12 Board of Physicians and the regulation of physicians, physician assistants, and allied
13 health professionals.

14 BY repealing

15 Article – Health Occupations

16 Section 14-101(n), 14-401.1(b) through (d), 14-405(f), 14-5A-02 through 14-5A-04,
17 14-5A-07, 14-5A-10, 14-5A-11, 14-5A-13, 14-5A-14, 14-5A-16,
18 14-5A-17.1, 14-5A-18.1, 14-5A-19, 14-5B-02 through 14-5B-04,
19 14-5B-10, 14-5B-12, 14-5B-12.1, 14-5B-13, 14-5B-14.1, 14-5B-15.1,
20 14-5B-16, 14-5C-03, 14-5C-04, 14-5C-11, 14-5C-12, 14-5C-14,
21 14-5C-14.1, 14-5C-16, 14-5C-18.1, 14-5C-19, 14-5D-02, 14-5D-03,
22 14-5D-09, 14-5D-12, 14-5D-12.1, 14-5D-13, 14-5D-15, 14-5D-16,

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



14-5D-16.1, 14-5E-02 through 14-5E-04, 14-5E-11, 14-5E-15, 14-5E-17,
14-5E-18.1, 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 through 14-5G-04, 14-5G-10, 14-5G-11,
14-5G-13, 14-5G-15, 14-5G-16, 14-5G-19, 14-5G-21, 14-5G-22, 15-203,
15-204, 15-206, 15-304, 15-305, 15-307, 15-308, 15-310 through 15-312,
15-315, 15-316, and 15-316.1

Annotated Code of Maryland
(2021 Replacement Volume and 2023 Supplement)

BY renumbering

Article – Health Occupations

Section 14-206, 14-206.1, 14-301, 14-302, 14-306, 14-307, 14-308, 14-308.1,
14-309, 14-311, 14-312, 14-313, 14-313.1, 14-314, 14-315, 14-316, 14-317,
14-318 through 14-320, 14-320.1, 14-322, 14-404, 14-413 through 14-415,
14-502, 14-503, 14-504, 14-505, 14-506, 14-507, 14-508, 14-509, 14-601,
14-602, 14-603, 14-605, 14-607, 15-101 through 15-103, 15-201, 15-202,
15-205, 15-301, 15-302, 15-302.1 through 15-302.3, 15-303, 15-306, 15-309,
15-313, 15-314, 15-317, 15-401, 15-402, 15-402.1, 15-403, 15-501, and
15-502

to be Section 14-401.2, 14-401.3, 14-501, 14-502, 14-503, 14-301, 14-505, 14-302,
14-303, 14-506, 14-507, 14-304, 14-530, 14-305, 14-508, 14-306, 14-307,
14-509 through 14-511, 14-512, 14-513, 14-516, 14-518 through 14-520,
14-414, 14-514, 14-527, 14-526, 14-415, 14-524, 14-521, 14-523, 14-528,
14-529, 14-413, 14-522, 14-525, 14-5H-01 through 14-5H-03, 14-5H-04,
14-5H-05, 14-5H-06, 14-5H-07, 14-5H-08, 14-5H-09 through 14-5H-11,
14-5H-12, 14-5H-13, 14-5H-14, 14-5H-15, 14-5H-16, 14-5H-17,
14-5H-18, 14-5H-19, 14-5H-20, 14-5H-21, 14-5H-22, and 14-5H-23,
respectively

Annotated Code of Maryland
(2021 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, without amendments,

Article – Alcoholic Beverages and Cannabis

Section 36-101(a)

Annotated Code of Maryland

(2016 Volume and 2023 Supplement)

BY repealing and reenacting, with amendments,

Article – Alcoholic Beverages and Cannabis

Section 36-101(m)(1)(v)1.

Annotated Code of Maryland

(2016 Volume and 2023 Supplement)

BY repealing and reenacting, with amendments,

Article – Correctional Services

Section 9-603(d)(2)

Annotated Code of Maryland

(2017 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, with amendments,
Article – Courts and Judicial Proceedings
Section 5–106(r), 5–715(d), and 10–205(b)
Annotated Code of Maryland
(2020 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, without amendments,
Article – Health – General
Section 4–201(a) and 5–601(a)
Annotated Code of Maryland
(2023 Replacement Volume)

BY repealing and reenacting, with amendments,
Article – Health – General
Section 4–201(s), 5–601(v), and 18–214.1(b)(3)
Annotated Code of Maryland
(2023 Replacement Volume)

BY repealing and reenacting, with amendments,
Article – Health Occupations
Section 1–302(g)(4)(i), 1–306(e)(2)(i), 8–205(a)(3), 11–404.2(h)(2), 12–102(c)(2)(iii)2.
and (iv)1., 14–101(a–1), (g), (i), and (o), 14–205, 14–207(b) through (d) and (f),
14–3A–01 Section 5(b)(3)(i), 14–401.1(a)(5)(i) and (e) through (k),
14–402(a) and (c) through (f), 14–403(a), 14–405(a) and (g), 14–406, 14–409(a)
and (c), 14–411(d), (g), (h), (j), (k), and (p), 14–411.1(b) through (d), 14–416(a),
14–5A–01(c), 14–5A–05, 14–5A–08, 14–5A–09, 14–5A–17(a), 14–5A–20,
14–5A–21, 14–5A–22, 14–5A–22.1(a), 14–5B–07(a)(2), 14–5B–08, 14–5B–09,
14–5B–11, 14–5B–14(a), 14–5B–17, 14–5B–18(b), 14–5B–18.1(a) and (b),
14–5C–01(c), 14–5C–05, 14–5C–08(b), 14–5C–09, 14–5C–10, 14–5C–17(a),
14–5C–20, 14–5C–22, 14–5C–22.1(a), 14–5D–07, 14–5D–08, 14–5D–10(a),
14–5D–11.1(a) and (b), 14–5D–14(a), 14–5D–17, 14–5E–01(g), 14–5E–08(a)
and (b), 14–5E–09, 14–5E–10(a), 14–5E–13, 14–5E–14, 14–5E–16(a),
14–5E–20, 14–5E–21(a) and (b), 14–5E–22, 14–5F–10, 14–5F–11, 14–5F–12,
14–5F–15, 14–5F–16, 14–5F–18(a), 14–5F–21, 14–5F–24(c), 14–5F–29(a),
14–5G–08, 14–5G–09, 14–5G–14(h), 14–5G–17, 14–5G–18(a), 14–5G–23,
14–5G–24(a) and (b), 14–5G–25, and 14–5G–26(a) and (b)
Annotated Code of Maryland
(2021 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, without amendments,
Article – Health Occupations
Section 14–101(a), 14–5A–01(a), 14–5C–01(a), and 14–5E–01(a)
Annotated Code of Maryland
(2021 Replacement Volume and 2023 Supplement)

1 BY adding to

2 Article – Health Occupations

3 Section 14–101(a–2), (n), and (p–1), 14–208, 14–404, 14–417, 14–504, 14–515,
4 14–517, 14–5A–06(e), 14–5B–05(f), 14–5C–06(e), 14–5D–05(f), 14–5E–06(e),
5 and 14–5F–07(g)

6 Annotated Code of Maryland

7 (2021 Replacement Volume and 2023 Supplement)

8 BY repealing and reenacting, with amendments,

9 Article – Health Occupations

10 Section 14–301, 14–303, 14–304(b), 14–305, 14–306, 14–307, 14–401.2(e), and
11 14–413; 14–502, 14–503(c) and (e), 14–505(b), 14–506(a), 14–510(a),
12 14–511(b), 14–512(c), 14–516(a), 14–518(a)(1), 14–519(a)(1), 14–525(b) and (c),
13 14–528, and 14–529 to be under the amended subtitle “Subtitle 5. Physicians”;
14 and 14–5H–01(a), (e) through (i), and (j) through (u), 14–5H–02, 14–5H–03(c),
15 (d), and (e)(1), 14–5H–06(a), 14–5H–07(c) and (f) through (h),
16 14–5H–08(c)(2)(ii)1., (g), (k), (l)(2), and (m), 14–5H–09(a) and (b),
17 14–5H–10(e), 14–5H–12(a), 14–5H–14, 14–5H–15, 14–5H–16(a), 14–5H–20(a)
18 and (b), 14–5H–21, 14–5H–22, and 14–5H–23

19 Annotated Code of Maryland

20 (2021 Replacement Volume and 2023 Supplement)

21 (As enacted by Section 2 of this Act)

22 BY adding to

23 Article – Health Occupations

24 Section 14–514(c) and (d), 14–522(c), 14–525(b), and 14–526(d); and 14–5H–16(c)
25 through (e) to be under the new subtitle “Subtitle 5H. Physician Assistants”

26 Annotated Code of Maryland

27 (2021 Replacement Volume and 2023 Supplement)

28 (As enacted by Section 2 of this Act)

29 BY repealing

30 Article – Health Occupations

31 Section 14–5H–01(d) and (i–1)

32 Annotated Code of Maryland

33 (2021 Replacement Volume and 2023 Supplement)

34 (As enacted by Section 2 of this Act)

35 BY repealing and reenacting, without amendments,

36 Article – Transportation

37 Section 13–616(a)(1)

38 Annotated Code of Maryland

39 (2020 Replacement Volume and 2023 Supplement)

40 BY repealing and reenacting, with amendments,

41 Article – Transportation

42 Section 13–616(a)(7)

Annotated Code of Maryland
(2020 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, without amendments,
Article – Tax – General
Section 10–752(a)(1)
Annotated Code of Maryland
(2022 Replacement Volume and 2023 Supplement)

BY repealing and reenacting, with amendments,
Article – Tax – General
Section 10–752(a)(3) and (d)(7)
Annotated Code of Maryland
(2022 Replacement Volume and 2023 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That Section(s) 14–101(n), 14–401.1(b) through (d), 14–405(f), 14–5A–02 through
14–5A–04, 14–5A–07, 14–5A–10, 14–5A–11, 14–5A–13, 14–5A–14, 14–5A–16, 14–5A–17.1,
14–5A–18.1, 14–5A–19, 14–5B–02 through 14–5B–04, 14–5B–10, 14–5B–12, 14–5B–12.1,
14–5B–13, 14–5B–14.1, 14–5B–15.1, 14–5B–16, 14–5C–03, 14–5C–04, 14–5C–11,
14–5C–12, 14–5C–14, 14–5C–14.1, 14–5C–16, 14–5C–18.1, 14–5C–19, 14–5D–02,
14–5D–03, 14–5D–09, 14–5D–12, 14–5D–12.1, 14–5D–13, 14–5D–15, 14–5D–16,
14–5D–16.1, 14–5E–02 through 14–5E–04, 14–5E–11, 14–5E–15, 14–5E–17, 14–5E–18.1,
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
through 14–5G–04, 14–5G–10, 14–5G–11, 14–5G–13, 14–5G–15, 14–5G–16, 14–5G–19,
14–5G–21, 14–5G–22, 15–203, 15–204, 15–206, 15–304, 15–305, 15–307, 15–308, 15–310
through 15–312, 15–315, 15–316, and 15–316.1 of Article – Health Occupations of the
Annotated Code of Maryland be repealed.

SECTION 2. AND BE IT FURTHER ENACTED, That Section(s) 14–206, 14–206.1,
14–301, 14–302, 14–306, 14–307, 14–308, 14–308.1, 14–309, 14–311, 14–312, 14–313,
14–313.1, 14–314, 14–315, 14–316, 14–317, 14–318 through 14–320, 14–320.1, 14–322,
14–404, 14–413 through 14–415, 14–502, 14–503, 14–504, 14–505, 14–506, 14–507,
14–508, 14–509, 14–601, 14–602, 14–603, 14–605, 14–607, 15–101 through 15–103,
15–201, 15–202, 15–205, 15–301, 15–302, 15–302.1 through 15–302.3, 15–303, 15–306,
15–309, 15–313, 15–314, 15–317, 15–401, 15–402, 15–402.1, 15–403, 15–501, and 15–502
of Article – Health Occupations of the Annotated Code of Maryland be renumbered to be
Section(s) 14–401.2, 14–401.3, 14–501, 14–502, 14–503, 14–301, 14–505, 14–302, 14–303,
14–506, 14–507, 14–304, 14–530, 14–305, 14–508, 14–306, 14–307, 14–509 through
14–511, 14–512, 14–513, 14–516, 14–518 through 14–520, 14–414, 14–514, 14–527,
14–526, 14–415, 14–524, 14–521, 14–523, 14–528, 14–529, 14–413, 14–522, 14–525,
14–5H–01 through 14–5H–03, 14–5H–04, 14–5H–05, 14–5H–06, 14–5H–07, 14–5H–08,
14–5H–09 through 14–5H–11, 14–5H–12, 14–5H–13, 14–5H–14, 14–5H–15, 14–5H–16,
14–5H–17, 14–5H–18, 14–5H–19, 14–5H–20, 14–5H–21, 14–5H–22, and 14–5H–23,
respectively.

SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Alcoholic Beverages and Cannabis

36–101.

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

(m) “Certifying provider” means an individual who:

(1) (v) 1. has an active, unrestricted license to practice as a physician assistant issued by the State Board of Physicians under Title [15] **14, SUBTITLE 5H** of the Health Occupations Article;

Article – Correctional Services

9–603.

(d) (2) If an assessment conducted under paragraph (1) of this subsection indicates opioid use disorder, an evaluation of the incarcerated individual shall be conducted by a health care practitioner with prescriptive authority authorized under Title 8[,] **OR** Title 14[, or Title 15] of the Health Occupations Article.

Article – Courts and Judicial Proceedings

5–106.

(r) A prosecution for an offense under [§ 14–601] **§ 14–528** of the Health Occupations Article of practicing, attempting to practice, or offering to practice medicine without a license shall be instituted within 3 years after the offense was committed.

5–715.

(d) Any person who acts in good faith is not civilly liable for giving any of the information required under [§ 14–413 or § 14–414] **§ 14–518 OR § 14–519** of the Health Occupations Article.

10–205.

(b) Records, reports, statements, notes, or information assembled or obtained by the Maryland Department of Health, the Maryland Commission to Study Problems of Drug Addiction, the Medical and Chirurgical Faculty or its allied medical societies, the Maryland Institute for Emergency Medical Services Systems, an in–hospital staff committee, or a 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 Article, are not admissible in evidence in any proceeding.

Article – Health – General

4–201.

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

(s) “Physician assistant” means an individual who is licensed under Title [15] 14, SUBTITLE 5H of the Health Occupations Article to practice medicine with physician supervision.

5–601.

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

(v) “Physician assistant” means an individual who is licensed under Title [15] 14, SUBTITLE 5H of the Health Occupations Article to practice medicine with physician supervision.

18–214.1.

(b) Notwithstanding any other provision of law, the following health care providers may prescribe, dispense, or otherwise provide antibiotic therapy to any sexual partner of a patient diagnosed with chlamydia, gonorrhea, or trichomoniasis without making a personal physical assessment of the patient’s partner:

(3) An authorized physician assistant licensed under Title [15] 14, SUBTITLE 5H of the Health Occupations Article acting in accordance with [§ 15–302.2] § 14–5H–10 of the Health Occupations Article; and

Article – Health Occupations

1–302.

(g) Subsection (d)(12) of this section may not be construed to:

(4) Permit an arrangement that violates:

(i) [§ 14–404(a)(15)] § 14–516(A)(15) of this article; or

1–306.

(e) This section does not prohibit:

(2) A health care practitioner who takes a Pap test specimen from a patient and who orders but does not supervise or perform an anatomic pathology service on the specimen, from billing a patient or payor for the service, provided the health care practitioner complies with:

(i) The disclosure requirements of [§ 14-404(a)(16)] § 14-516(A)(16) of this article; and
8-205.

(a) In addition to the powers and duties set forth elsewhere in this title, the Board has the following powers and duties:

(3) To adopt rules and regulations for the performance of delegated medical functions 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;
11-404.2.

(h) A therapeutically certified optometrist shall be:

(2) Required to comply with the notice requirement under [§ 14-508] § 14-521 of this article.
12-102.

(c) (2) This title does not prohibit:

(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: ~~of this article;~~

2. Has obtained a special written permit under [§ 14-509] § 14-523 of this article;

(iv) A licensed physician who complies with the requirements of item (ii) of this paragraph from personally preparing and dispensing a prescription written by:

1. A physician assistant in accordance with a delegation agreement that complies with Title [15] 14, Subtitle [3] 5H of this article; or
14-101.

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

(a-1) “Allied health professional” means an individual licensed by the Board under Subtitle 5A, 5B, 5C, 5D, 5E, [or] 5F, **5G, OR 5H** of this title [or Title 15 of this article].

(A-2) “APPLICANT” MEANS AN INDIVIDUAL APPLYING FOR INITIAL LICENSURE AS A PHYSICIAN OR ALLIED HEALTH PROFESSIONAL IN THE STATE.

(g) “License” means, unless the context requires otherwise, a license issued by the Board to practice medicine **OR AN ALLIED HEALTH PROFESSION REGULATED BY THE BOARD.**

(i) “Licensee” means an individual to whom **THE BOARD ISSUES** a license [is issued], including an individual practicing medicine within or as a professional corporation or professional association.

(N) “PHYSICIAN ASSISTANT” MEANS AN INDIVIDUAL WHO IS LICENSED UNDER SUBTITLE 5H OF THIS TITLE TO PRACTICE MEDICINE WITH PHYSICIAN SUPERVISION.

(o) (1) “Practice medicine” means to engage, with or without compensation, in medical:

- (i) Diagnosis;
- (ii) Healing;
- (iii) Treatment; or
- (iv) Surgery.

(2) “Practice medicine” includes doing, undertaking, professing to do, and attempting any of the following:

(i) Diagnosing, healing, treating, preventing, prescribing for, or removing any physical, mental, or emotional ailment or supposed ailment of an individual:

1. By physical, mental, emotional, or other process that is exercised or invoked by the practitioner, the patient, or both; or

2. By appliance, test, drug, operation, or treatment;

(ii) Ending of a human pregnancy; and

(iii) Performing acupuncture as provided under [§ 14-504] **§ 14-527** of this title.

(3) “Practice medicine” does not include:

- (i) Selling any nonprescription drug or medicine;
- (ii) Practicing as an optician; or
- (iii) Performing a massage or other manipulation by hand, but by no other means.

(P-1) “REHABILITATION PROGRAM” MEANS THE PROGRAM OF THE BOARD OR THE NONPROFIT ENTITY WITH WHICH THE BOARD CONTRACTS UNDER § 14-401.1(D) OF THIS TITLE THAT EVALUATES AND PROVIDES ASSISTANCE TO IMPAIRED PHYSICIANS AND OTHER HEALTH PROFESSIONALS REGULATED BY THE BOARD WHO ARE DIRECTED BY THE BOARD TO RECEIVE TREATMENT AND REHABILITATION FOR ALCOHOLISM, CHEMICAL DEPENDENCY, OR OTHER PHYSICAL, EMOTIONAL, OR MENTAL CONDITIONS.

14-205.

(a) In addition to the powers and duties set forth in this title [and in Title 15 of this article], the Board shall:

- (1) Enforce this title [and Title 15 of this article];
- (2) Adopt regulations to carry out the provisions of this title [and Title 15 of this article];
- (3) Establish policies for Board operations;
- (4) Maintain the rules, regulations, and policies of the Board so that the rules, regulations, and policies reflect the current practices of the Board;
- (5) Oversee:
 - (i) The licensing requirements for physicians and the allied health professionals; and
 - (ii) The issuance and renewal of licenses;
- (6) Maintain secure and complete records;
- (7) Review and preliminarily investigate complaints, including acknowledging receipt of complaints and informing complainants of the final disposition of complaints;
- (8) Develop and implement methods to:

(i) Assess and improve licensee practices; and

(ii) Ensure the ongoing competence of licensees;

(9) Ensure that an opportunity for a hearing is provided to an individual, in accordance with law, before any action is taken against the individual;

(10) Adjudicate nondisciplinary matters within the Board's jurisdiction;

(11) Report on all disciplinary actions, license denials, and license surrenders;

(12) Establish appropriate fees that are adequate to fund the effective regulation of physicians and allied health professionals;

(13) Make recommendations that benefit the health, safety, and welfare of the public;

(14) Provide ongoing education and training for Board members to ensure that the Board members can competently discharge their duties;

(15) Direct educational outreach to and communicate with licensees and the public;

(16) Develop and adopt a budget that reflects revenues and supports the costs associated with each allied health profession regulated by the Board;

(17) Develop and approve an annual report and other required reports for submission to the Secretary, the Governor, the General Assembly, and the public;

(18) Approve contracts as needed and within budgetary limits;

(19) Appoint standing and ad hoc committees from among Board members as necessary;

(20) Delegate to the executive director of the Board the authority to discharge Board or disciplinary panel duties, as deemed appropriate and necessary by the Board or disciplinary panel, and hold the executive director accountable to the Board; and

(21) Appoint members of the disciplinary panels.

(b) (1) In addition to the powers set forth elsewhere in this title, the Board may:

(i) Adopt regulations to regulate the performance of acupuncture, but only to the extent authorized by [§ 14-504] § 14-527 of this title;

(ii) After consulting with the State Board of Pharmacy, adopt rules and regulations regarding the dispensing of prescription drugs by a licensed physician;

(iii) On receipt of a written and signed complaint, including a referral from the Commissioner of Labor and Industry, conduct an unannounced inspection of the office of a physician or acupuncturist, other than an office of a physician or acupuncturist in a hospital, related institution, freestanding medical facility, or a freestanding birthing center, to determine compliance at that office with the Centers for Disease Control and Prevention's guidelines on universal precautions; and

(iv) Contract with others for the purchase of administrative and examination services to carry out the provisions of this title.

(2) The Board or a disciplinary panel may investigate an alleged violation of this title.

[(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:

(i) Any of the reasons that are grounds for action under § 14-404, § 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

(ii) Failure to complete a criminal history records check in accordance with § 14-308.1 of this title.]

(c) (1) In addition to the duties set forth elsewhere in this title, the Board shall:

(i) Issue, for use in other jurisdictions, a certificate of professional standing **AND A VERIFICATION OF LICENSURE STATUS** to any [licensed physician] **LICENSEE**; and

(ii) Keep a list of all **PENDING** license applicants.

(2) (i) The Board shall keep a list of all [physicians] **LICENSEES** who are currently licensed.

(ii) The list shall include each [physician's] **LICENSEE'S** designated public address.

(iii) A [physician's] **LICENSEE'S** designated public address may be a post office box only if the [physician] **LICENSEE** provides to the Board a nonpublic address, under paragraph (3) of this subsection, that is not a post office box.

1 [(iv) Each list prepared under this paragraph shall be kept as a
2 permanent record of the Board.]

3 [(v)] **(IV)** The list of [currently licensed physicians] **CURRENT**
4 **LICENSEES** is a public record.

5 (3) (i) The Board shall [maintain on file a physician's] **COLLECT A**
6 **LICENSEE'S** designated nonpublic address, if provided by the [physician] **LICENSEE, AND**
7 **MAINTAIN THE ADDRESS** to facilitate communication between the [physician] **LICENSEE**
8 and the Board.

9 (ii) The Board shall offer a [physician] **LICENSEE** the opportunity to
10 designate a nonpublic address, in addition to the [physician's] **LICENSEE'S** public address,
11 at the time of initial licensure and license renewal.

12 (iii) A [physician] **LICENSEE** shall designate an address where the
13 Board may send the [physician] **LICENSEE** mail.

14 (iv) A [physician's] **LICENSEE'S** designated nonpublic address is not
15 a public record and may not be released by the Board.

16 **(D) THE BOARD MAY NOT RELEASE A LIST OF APPLICANTS FOR LICENSURE.**

17 **(E) THE BOARD MAY ADOPT REGULATIONS REGARDING COMMITTEES**
18 **ESTABLISHED UNDER THIS TITLE GOVERNING:**

19 **(1) THE TERM OF OFFICE FOR MEMBERS;**

20 **(2) THE PROCEDURE FOR FILLING VACANCIES ON A COMMITTEE;**

21 **(3) THE REMOVAL OF MEMBERS; AND**

22 **(4) THE DUTIES OF EACH OFFICER.**

23 **(F) EACH ADVISORY COMMITTEE SHALL:**

24 **(1) DEVELOP AND RECOMMEND TO THE BOARD REGULATIONS TO**
25 **CARRY OUT THE PROVISIONS OF THIS TITLE AND ANY OTHER STATUTORY CHANGES**
26 **THAT AFFECT THE RELEVANT ALLIED HEALTH PROFESSION;**

27 **(2) ON REQUEST OF THE BOARD OR A DISCIPLINARY PANEL:**

28 **(I) PROVIDE RECOMMENDATIONS REGARDING THE PRACTICE**
29 **OF AN ALLIED HEALTH PROFESSION; AND**

(II) ADVISE THE BOARD ON ANY OTHER MATTERS RELATED TO ALLIED HEALTH PROFESSIONS OR PRACTITIONERS;

(3) KEEP RECORD OF ITS PROCEEDINGS; AND

(4) SUBMIT AN ANNUAL REPORT TO THE BOARD.

14-207.

(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.**

(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.

(3) Funds to cover the compensation and expenses of the Board members shall be generated by fees set under this section.

(4) FEES GENERATED BY PHYSICIAN OR ALLIED HEALTH PROFESSIONAL LICENSES SHALL BE USED TO MAINTAIN THE LICENSING PROGRAM AND SERVICES PROVIDED TO THAT PARTICULAR PROFESSION.

(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.

(6) (I) IN ADDITION TO THE FEE SET BY THE BOARD UNDER THIS SECTION FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL ASSESS A SEPARATE \$15 FEE FOR A RENEWAL OF EACH LICENSE FOR A PHYSICIAN ASSISTANT.

(II) THE BOARD SHALL PAY THE FEE COLLECTED UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH TO THE PHYSICIAN ASSISTANT PRECEPTORSHIP TAX CREDIT FUND ESTABLISHED UNDER § 10-752 OF THE TAX – GENERAL ARTICLE.

(c) [The] **EXCEPT AS PROVIDED IN SUBSECTION (B)(6) OF THIS SECTION,** THE Board shall pay all fees collected under the provisions of this title to the Comptroller of the State.

(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.

(2) In fiscal year 2022, if the Governor does not include in the State budget at least \$1,000,000 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) \$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

(ii) The balance of the fees to the Board of Physicians Fund.

(3) 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)] (2) 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.

(f) **[(1)]** In addition to the requirements of subsection (e) of this section, the Board shall fund the budget of the **[Physician]** Rehabilitation Program with fees set, collected, and distributed to the Fund under this title.

[(2) After review and approval by the Board of a budget submitted by the Physician Rehabilitation Program, the Board may allocate money from the Fund to the Physician Rehabilitation Program.]

14–208.

(A) IN THIS SECTION, “FEDERAL PROPERTY” MEANS A BUILDING, LAND, OR OTHER REAL PROPERTY OWNED, LEASED, OR OCCUPIED BY A DEPARTMENT, AN AGENCY, OR AN INSTRUMENTALITY OF THE UNITED STATES, INCLUDING THE DEPARTMENT OF DEFENSE AND THE UNITED STATES POSTAL SERVICE, OR ANY OTHER INSTRUMENTALITY WHOLLY OWNED BY THE UNITED STATES, OR BY ANY DEPARTMENT OR AGENCY OF THE DISTRICT OF COLUMBIA OR ANY TERRITORY OR POSSESSION OF THE UNITED STATES.

(B) SUBJECT TO THE RULES, REGULATIONS, AND ORDERS OF THE BOARD, AN INDIVIDUAL EMPLOYED IN THE SERVICE OF THE FEDERAL GOVERNMENT AS A HEALTH CARE PRACTITIONER WHO IS REGULATED BY THE BOARD MAY PRACTICE WITHOUT A LICENSE WHILE PRACTICING WITHIN THE SCOPE OF THE EMPLOYMENT ON FEDERAL PROPERTY.

(C) SUBJECT TO THE RULES, REGULATIONS, AND ORDERS OF THE BOARD, AN AUTHORIZED SUPERVISOR MAY SUPERVISE AN UNLICENSED INDIVIDUAL EMPLOYED IN THE SERVICE OF THE FEDERAL GOVERNMENT AS A HEALTH CARE PRACTITIONER WHO IS REGULATED BY THE BOARD WHILE THE INDIVIDUAL IS PRACTICING WITHIN THE SCOPE OF THE EMPLOYMENT ON FEDERAL PROPERTY.

14–301.

(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.

(b) The applicant shall be of good moral character.

(c) **[The] EXCEPT AS PROVIDED IN § 14–5F–11 OF THIS TITLE, THE** applicant shall be at least 18 years old.

[(d) Except as provided in § 14–308 of this subtitle, the applicant shall:

(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

(ii) Submit evidence acceptable to the Board of successful completion of 1 year of training in a postgraduate medical training program that is accredited by an accrediting organization that the Board recognizes in its regulations; or

(2) (i) Have a degree of doctor of osteopathy from a school of osteopathy in the United States, its territories or possessions, Puerto Rico, or Canada that has standards for graduation equivalent to those established by the American Osteopathic Association; and

(ii) Submit evidence acceptable to the Board of successful completion of 1 year of training in a postgraduate medical training program accredited by an accrediting organization that the Board recognizes in its regulations.]

(D) THE APPLICANT SHALL COMPLETE A CRIMINAL HISTORY RECORDS CHECK IN ACCORDANCE WITH § 14–302 OF THIS SUBTITLE.

(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.

(f) The applicant shall meet any other qualifications that the Board establishes 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:

(1) Has successfully completed 2 or more years of a residency or fellowship accredited by the Accreditation Council on Graduate Medical Education or the American Osteopathic Association;

(2) (i) Has a minimum of 5 years of clinical practice of medicine:

1. In the United States or in Canada;

2. With at least 3 of the 5 years having occurred within 5 years of the date of the application; and

3. That occurred under a full unrestricted license to practice medicine; and

(ii) Has no disciplinary action pending and has had no disciplinary action taken against the applicant that would be grounds for discipline under § 14-404 of this title; or

(3) Is board certified.]

[(h)] (G) (1) The Board shall require as part of its examination or licensing procedures that an applicant for a license to practice medicine **OR AN ALLIED HEALTH PROFESSION** demonstrate an oral **AND WRITTEN** competency in the English language.

(2) Graduation from a recognized English-speaking undergraduate 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 this section.

(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.

(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.

[(i) The applicant shall complete a criminal history records check in accordance with § 14–308.1 of this subtitle.]

(j) (1) The Board shall license an applicant to practice medicine if:

(i) The applicant:

1. Became licensed or certified as a physician in another jurisdiction under requirements that the Board determines are substantially equivalent to the licensing requirements of this title;

2. Is in good standing under the laws of the other jurisdiction;

3. Submits an application to the Board on a form that the Board requires; and

4. Pays to the Board an application fee set by the Board; and

(ii) The jurisdiction in which the applicant is licensed or certified offers a similar reciprocal licensing process for individuals licensed to practice medicine by the Board.

(2) The Board shall adopt regulations to implement this subsection.]

14–303.

[(a)] To apply for a license **UNDER THIS TITLE**, an applicant shall:

(1) Complete a criminal history records check in accordance with [§ 14–308.1] **§ 14–302** of this subtitle;

(2) ~~Submit~~ Submit an application to the Board on the form that the Board requires; and

(3) Pay to the Board the application fee set by the Board.

[(b)] The Board may not release a list of applicants for licensure.]

14–304.

(b) (1) On receipt of the criminal history record information of an applicant for licensure forwarded to the Board in accordance with [§ 14–308.1] **§ 14–302** of this subtitle, in determining whether to issue a license, the Board shall consider:

(i) The age at which the crime was committed;

(ii) The nature of the crime;

(iii) The circumstances surrounding the crime;

(iv) The length of time that has passed since the crime;

(v) Subsequent work history;

(vi) Employment and character references; and

(vii) Other evidence that demonstrates whether the applicant poses a threat to the public health or safety.

(2) The Board may not issue a license if the criminal history record information required under [§ 14–308.1] **§ 14–302** of this subtitle has not been received.

14–305.

(a) Except as otherwise provided in this title, a license authorizes the licensee to practice [medicine] **IN THIS STATE THE HEALTH OCCUPATION STATED ON THE LICENSE ISSUED BY THE BOARD** while the license is effective.

(b) A licensee may practice [medicine] **THE HEALTH OCCUPATION STATED ON THE LICENSE ISSUED BY THE BOARD** using only the name in which the license is issued.

14–306.

(a) (1) This subsection does not apply to a physician who is on inactive status under [§ 14–320] **§ 14–511** of this [subtitle] **TITLE** or emeritus status under [§ 14–302.1] **§ 14–512** of this [subtitle] **TITLE**.

(2) The term of a license issued by the Board may not exceed 3 years.

(3) A license expires on a date set by the Board, unless the license is renewed for [a] **AN ADDITIONAL** term as provided in this section.

(b) (1) Subject to paragraph (2) of this subsection, at least 1 month before the license expires, the Board shall send to the licensee, by electronic or first-class mail to the last known electronic or physical address of the licensee[:

(i) A] A renewal notice that states:

[1.] (I) The date on which the current license expires;

[2.] (II) The date by which the renewal application must be received by the Board for the renewal to be issued and mailed before the license expires; and

[3.] (III) The amount of the renewal fee[; and

(ii) A blank panel data sheet supplied by the Health Care Alternative Dispute Resolution Office].

(2) If the Board chooses to send renewal notices exclusively by electronic mail under paragraph (1) of this subsection, the Board shall send a renewal notice by first-class mail to a licensee on request of the licensee.

(c) (1) Before the license expires, the licensee periodically may renew it for an additional term, if the licensee:

(i) Otherwise is entitled to be licensed;

(ii) Is of good moral character;

(iii) Pays to the Board a renewal fee set by the Board; [and]

(iv) Submits to the Board:

1. A renewal application on the form that the Board requires;

and

2. Satisfactory evidence of compliance with any continuing education **OR COMPETENCY** requirements set under this section for license renewal; **AND**

(v) MEETS ANY ADDITIONAL LICENSE RENEWAL REQUIREMENTS ESTABLISHED BY THE BOARD.

(2) Within 30 days after a license renewal under Section 7 of the Interstate Medical Licensure Compact established under § 14–3A–01 of this title, a compact physician shall submit to the Board the information required under paragraph (1)(iv) of this subsection.

(d) (1) In addition to any other qualifications and requirements established by the Board, the Board may establish continuing education **OR COMPETENCY** requirements as a condition to the renewal of licenses under this section.

[(2) In establishing these requirements, the Board shall evaluate existing methods, devices, and programs in use among the various medical specialties and other recognized medical groups.

(3) The Board shall adopt regulations that allow a licensee seeking renewal to receive up to 5 continuing education credits per renewal period for providing uncompensated, voluntary medical services during each renewal period.

(4) The Board may not establish or enforce these requirements if they would so reduce the number of physicians in a community as to jeopardize the availability of adequate medical care in that community.]

[(5)] (2) The Board may not establish a continuing education requirement that every licensee complete a specific course or program as a condition to the renewal of a license under this section.

[(6) A disciplinary panel may impose a civil penalty of up to \$100 per continuing medical education credit in lieu of a sanction under § 14–404 of this title, for a first offense, for the failure of a licensee to obtain the continuing medical education credits required by the Board.]

(e) The Board shall renew the license of each licensee who meets the requirements of this section **AND ANY ADDITIONAL REQUIREMENTS ESTABLISHED**

1 UNDER SUBTITLE 5, 5A, 5B, 5C, 5D, 5E, 5F, 5G, OR 5H OF THIS TITLE, AS
2 APPLICABLE.

3 [(f) (1) Each licensee shall notify the secretary of the Board in writing of any
4 change in the licensee's name or address within 60 days after the change.

5 (2) If a licensee fails to notify the secretary of the Board within the time
6 required under this section, the licensee is subject to an administrative penalty of \$100.]

7 [(g)] (F) (1) Beginning October 1, 2016, the Board shall require a criminal
8 history records check in accordance with [§ 14–308.1] § 14–302 of this subtitle for:

9 (i) Renewal applicants as determined by regulations adopted by the
10 Board; and

11 (ii) Each former licensee who files for reinstatement under [§ 14–317
12 of this subtitle] THIS TITLE.

13 (2) On receipt of the criminal history record information of a licensee
14 forwarded to the Board in accordance with [§ 14–308.1] § 14–302 of this subtitle, in
15 determining whether disciplinary action should be taken, based on the criminal record
16 information, against a licensee who renewed or reinstated a license, the Board shall
17 consider:

18 (i) The age at which the crime was committed;

19 (ii) The nature of the crime;

20 (iii) The circumstances surrounding the crime;

21 (iv) The length of time that has passed since the crime;

22 (v) Subsequent work history;

23 (vi) Employment and character references; and

24 (vii) Other evidence that demonstrates whether the licensee poses a
25 threat to the public health or safety.

26 (3) The Board may renew or reinstate a license only if the licensee or
27 applicant attests that the licensee or applicant has submitted to a criminal history records
28 check under [§ 14–308.1] § 14–302 of this subtitle.

29 14–307.

The Board shall reinstate the license of [a physician] **AN INDIVIDUAL** who has failed to renew the license for any reason, is on inactive status under [§ 14–320] **§ 14–511** of this [subtitle] **TITLE**, or is on emeritus status under [§ 14–320.1] **§ 14–512** of this [subtitle] **TITLE** if the [physician] **INDIVIDUAL**:

(1) Meets the renewal requirements of [§ 14–316] **§ 14–306** of this subtitle **AND THE APPLICABLE RENEWAL REQUIREMENTS IN SUBTITLE 5, 5A, 5B, 5C, 5D, 5E, 5F, 5G, OR 5H OF THIS TITLE**;

(2) **SUBMITS A REINSTATEMENT APPLICATION ON THE FORM THAT THE BOARD REQUIRES**;

~~[(2)]~~ (3) Pays to the Board a reinstatement fee set by the Board; [and]

~~[(3)]~~ (4) Submits to the Board satisfactory evidence of compliance with the qualifications and requirements established under this title for license reinstatements; **AND**

(5) MEETS ANY ADDITIONAL LICENSE REINSTATEMENT REQUIREMENTS ESTABLISHED BY THE BOARD.

14–401.1.

(a) (5) (i) If a complaint proceeds to a hearing under § 14–405 of this subtitle, [§ 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–15, § 14–5E–16, or § 14–5F–21 of this title or § 15–315 of this article,] the chair of the disciplinary panel that was assigned the complaint under paragraph (2)(i) of this subsection shall refer the complaint to the other disciplinary panel.

~~[(e)]~~ (B) (1) [In accordance with subsection (f) of this section, the Board shall enter into a written contract with an entity or individual for confidential physician peer review of allegations based on § 14–404(a)(22) of this subtitle.

(2) A peer reviewer shall:

(i) Be board certified;

(ii) Have special qualifications to judge the matter at hand;

(iii) Have received a specified amount of medical experience and training;

(iv) Have no formal actions against the peer reviewer's own license;

(v) Receive training in peer review;

(vi) Have a standard format for peer review reports; and

(vii) To the extent practicable, be licensed and engaged in the practice of medicine in the State.

(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.

~~(4)~~ For purposes of peer review, the Board may use sole source procurement under § 13–107 of the State Finance and Procurement Article.

~~[(5)] (2)~~ The hearing of charges may not be stayed or challenged because of the selection of peer reviewers under this subsection before the filing of charges.

~~[(f)] (C)~~ (1) The entity or individual peer reviewer with which the Board contracts under subsection ~~[(e)] (B)~~ of this section **OR § 14–515 OF THIS TITLE** shall have 90 days for completion of peer review.

(2) The entity or individual peer reviewer may apply to the Board for an extension of up to 30 days to the time limit imposed under paragraph (1) of this subsection.

(3) If an extension is not granted, and 90 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of subsection ~~[(e)(2)] (B)(2)~~ of this section for the services of peer review.

(4) If an extension has been granted, and 120 days have elapsed, the Board may contract with any other entity or individual who meets the requirements of subsection ~~[(e)(2)] (B)(2)~~ of this section 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.

(2) Services that may be contracted for under this subsection include the services of:

(i) Investigators;

(ii) Attorneys;

- (iii) Accountants;
- (iv) Expert witnesses;
- (v) Consultants; and
- (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.

(2) If a disciplinary panel is unable to complete the disposition of a complaint within 1 year, the Board shall include in the record of that complaint a detailed 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.

14-401.2.

(e) A disciplinary panel may issue a cease and desist order or obtain injunctive relief against an individual for:

(1) Practicing a profession regulated under this title **[or Title 15 of this article]** without a license **OR WITH AN UNAUTHORIZED PERSON**;

(2) Representing to the public, by title, description of services, methods, procedures, or otherwise, that the individual is authorized to practice:

(i) Medicine in this State, in violation of **[§ 14-602] § 14-529** of this title;

(ii) Respiratory care in this State, in violation of § 14-5A-21 of this title;

(iii) Radiation therapy, radiography, nuclear medicine technology, or radiation assistance in this State, in violation of § 14-5B-18 of this title;

(iv) Polysomnography in this State, in violation of § 14–5C–21 of this title;

(v) Athletic training in this State, in violation of § 14–5D–17(3) of this title;

(vi) Perfusion in this State, in violation of § 14–5E–21 of this title;

(vii) Naturopathic medicine in this State, in violation of § 14–5F–30 of this title; [or]

(viii) **GENETIC COUNSELING IN THIS STATE, IN ~~VIOLATIONS~~ VIOLATION OF § 14–5G–24 OF THIS TITLE; OR**

(IX) As a physician assistant in this State, in violation of [§ 15–402 of this article] **§ 14–5H–19 OF THIS TITLE; or**

(3) Taking any action:

(i) For which a disciplinary panel determines there is a preponderance of evidence of grounds for discipline under [§ 14–404] **§ 14–516** of this title; and

(ii) That poses a serious risk to the health, safety, and welfare of a patient.

14–402.

(a) In reviewing an application for licensure or in investigating an allegation brought against a licensed physician or any allied health professional regulated by the Board under this title, the [Physician] Rehabilitation Program may request the Board to 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.

(c) The unreasonable failure or refusal of the licensed individual **OR APPLICANT** to submit to an examination is prima facie evidence of the licensed individual's **OR APPLICANT'S** inability to practice medicine or the respective discipline competently, unless the Board or disciplinary panel finds that the failure or refusal was beyond the control of the licensed individual **OR APPLICANT**.

(d) The Board shall pay the costs of any examination **OF A LICENSEE** made under this section.

(e) (1) The Board or the entity or entities with which the Board contracts shall appoint the members of the [Physician] Rehabilitation Program.

(2) The chair of the Board shall appoint one member of the Board to serve as a liaison to the [Physician] Rehabilitation Program.

(f) The [Physician] Rehabilitation Program is subject to audit by the Legislative Auditor as provided in § 2-1220 of the State Government Article.

14-403.

(a) Unless a disciplinary panel agrees to accept the surrender of a license, certification, or registration of an individual the Board regulates, the individual may not surrender the license, certification, or registration nor may the license, certification, or registration lapse by operation of law **FOR PURPOSES OF INVESTIGATION OR DISCIPLINE** while the individual is under investigation or while charges are pending.

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 § 14-516, § 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.

14-405.

(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 or [§ 14-205(b)(3)] **§ 14-516(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, 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.

14-406.

(a) Following the filing of charges, if a majority of the quorum of a disciplinary panel finds that there are grounds for action under [§ 14-404] **§ 14-516, § 14-5A-17, § 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
2 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] §
5 **14-516, § 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
11 a document releasing the Board from any liability related to the charges, shall immediately
12 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,
24 [the Board] **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 [§ 14-404(b)] **§ 14-516(B), §**
30 **14-5A-17(B), § 14-5B-14(B), § 14-5C-17(B), § 14-5D-14(B), § 14-5E-16(B), §**
31 **14-5F-18(B), § 14-5G-18(B), OR § 14-5H-16(B)** of this [subtitle] **TITLE**, and the

conviction or plea subsequently is overturned at any stage of an appeal or other postconviction proceeding, the revocation ends when the conviction or plea is overturned.

14-411.

(d) The Board shall disclose any information contained in a record to:

(1) A committee of a hospital, health maintenance organization, or related institution if:

(i) The committee of a medical hospital staff concerned with [physician] **LICENSEE** discipline or other committee of a hospital, health maintenance organization, or related institution requests the information in writing;

(ii) A disciplinary panel has issued an order as to a [licensed physician] **LICENSEE** on whom the information is requested; and

(iii) The Board determines that the information requested is necessary for an investigation or action of the committee as to a medical privilege of a [licensed physician] **LICENSEE**; or

(2) The Secretary, the Office of Health Care Quality in the Department, the Maryland Health Care Commission, or the Health Services Cost Review Commission for the purpose of investigating quality or utilization of care in any entity regulated by the Office of Health Care Quality or the Health Services Cost Review Commission.

(g) (1) The Board shall notify all hospitals, health maintenance organizations, or other health care facilities where a [physician or an allied health professional] **LICENSEE** regulated by the Board has privileges, has a provider contract with a health maintenance organization, or is employed of a complaint or report filed against that [physician] **LICENSEE**, if:

(i) The Board determines, in its discretion, that the hospital, health maintenance organization, or health care facility should be informed about the report or complaint;

(ii) The nature of the complaint suggests a reasonable possibility of an imminent threat to patient safety; or

(iii) The complaint or report was as a result of a claim filed in the Health Care Alternative Dispute Resolution Office and a certificate of a qualified expert is filed in accordance with § 3-2A-04(b)(1) of the Courts Article.

(2) The Board shall disclose any information pertaining to a [physician's] **LICENSEE'S** competency to practice [medicine] **UNDER THE LICENSE** contained in record

1 to a committee of a hospital, health maintenance organization, or other health care facility
2 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 (3) 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
11 health maintenance organization, or is employed of its formal action within 10 days after
12 the 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
17 a [physician] LICENSEE, the Board shall provide the person with information on the status
18 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

(3) The authorization for the disclosure is in writing.

(p) (1) The Board may publish a summary of any allegations of grounds for disciplinary or other action.

(2) A summary may not identify:

(i) Any person who makes an allegation to the Board or any of its investigatory bodies;

(ii) A [licensed physician] LICENSEE about whom an allegation is made; or

(iii) A witness in an investigation or a proceeding before the Board or any of its investigatory bodies.

14–411.1.

(b) The Board shall create and maintain a public individual profile on each licensee that includes the following information:

(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] § 14–516 of this [subtitle] TITLE based on the charges or has rescinded the charges;

(2) 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 a copy of the public order;

(3) A description in summary form of any final disciplinary action taken by a licensing board in any other state or jurisdiction against the licensee within the most recent 10–year period;

(4) A description of a conviction or entry of a plea of guilty or nolo contendere by the licensee for a crime involving moral turpitude reported to the Board under § 14–416 of this subtitle; and

[(5) As reported to the Board by the licensee, education and practice information about the licensee including:

(i) The name of any medical school that the licensee attended and the date on which the licensee graduated from the school;

(ii) A description of any internship and residency training;

(iii) A description of any specialty board certification by a recognized board of the ~~Association~~, American Board of Medical Specialties or the American Osteopathic Association;

(iv) The name of any hospital where the licensee has medical privileges;

(v) The location of the licensee's primary practice setting;

(vi) Whether the licensee participates in the Maryland Medical Assistance Program;

(vii) Whether the licensee maintains medical professional liability insurance; and

(viii) The number of medical malpractice final court judgments and arbitration awards against the licensee within the most recent 10-year period.]

(5) FOR A PHYSICIAN, THE INFORMATION REQUIRED UNDER § 14-517 OF THIS TITLE.

(c) In addition to the requirements of subsection (b) of this section, the Board shall:

(1) FOLLOWING THE FILING OF CHARGES OR NOTICE OF INITIAL DENIAL OF A LICENSE APPLICATION, DISCLOSE THE FILING TO THE PUBLIC ON THE BOARD'S WEBSITE.

(2) Provide appropriate and accessible Internet links from the Board's [Internet site] **WEBSITE**:

(i) To the extent available, to the appropriate portion of the [Internet site] **WEBSITE** of each health maintenance organization licensed in this State which will allow the public to ascertain the names of the physicians affiliated with the health maintenance organization; and

(ii) To the appropriate portion of the [Internet site] **WEBSITE** of the American Medical Association;

[(2)] (3) Include a statement on each licensee's profile of information to be taken into consideration by a consumer when viewing a licensee's profile, including factors to consider when evaluating a licensee's malpractice data, and a disclaimer stating that a charging document does not indicate a final finding of guilt by a disciplinary panel; and

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

(i) Notification that a person may contact the Board by telephone, electronic mail, or written request to find out whether the number of medical malpractice settlements involving a particular licensee totals three or more with a settlement amount of \$150,000 or greater within the most recent 5-year period as reported to the Board; and

(ii) A telephone number, electronic mail address, and physical address through which a person may contact the Board to request the information required to be provided under item (i) of this item.

(d) The Board:

(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;

(2) Shall maintain a website that serves as a single point of entry where all physician **AND ALLIED HEALTH PROFESSIONAL** profile information is available to the public on the Internet; and

(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.

14-413.

(A) A person may not make any false statement, report, or representation to the Board or a disciplinary panel.

(B) (1) A PERSON WHO ~~VIOLATED~~ VIOLATES ANY PROVISION OF THIS SUBTITLE 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.

(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

14-416.

(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.

14-417.

(A) (1) EACH LICENSEE SHALL NOTIFY THE BOARD IN WRITING OF ANY CHANGE IN THE LICENSEE'S NAME OR ADDRESS WITHIN 60 DAYS AFTER THE CHANGE.

(2) IF THE LICENSEE FAILS TO NOTIFY THE BOARD WITHIN THE TIME REQUIRED UNDER THIS SECTION, THE LICENSEE IS SUBJECT TO AN ADMINISTRATIVE PENALTY OF \$100.

(B) A DISCIPLINARY PANEL MAY IMPOSE A CIVIL PENALTY OF UP TO \$100 PER CONTINUING MEDICAL EDUCATION CREDIT IN LIEU OF A SANCTION FOR A FIRST OFFENSE FOR THE FAILURE OF A LICENSEE TO OBTAIN THE CONTINUING MEDICAL EDUCATION ~~CREDIT~~ CREDITS REQUIRED BY THE BOARD.

Subtitle 5. [Miscellaneous Provisions] **PHYSICIANS.**

14-502.

Subject to the rules, regulations, and orders of the Board, the following individuals may practice medicine without a license:

(1) A medical student or an individual in a postgraduate medical training program that is accredited by an accrediting organization recognized by the Board in regulations, while the individual is practicing medicine in the program and doing the assigned duties at any office of a licensed physician, hospital, clinic, or similar facility;

(2) A physician licensed by and residing in another jurisdiction, if the physician:

(i) Is engaged in consultation with a physician licensed in the State about a particular patient and does not direct patient care;

(ii) 1. Has an active, unrestricted license to practice medicine in the jurisdiction where the physician regularly engages in the practice of medicine;

2. Is employed by or has a written agreement with an athletic team or a sports team based outside the State;

3. Is designated as the team physician by the athletic or sports team to provide medical care to the team's members, band members, cheerleading squad, mascot, coaches, and other staff who travel to a specified sporting event taking place in the State;

4. While in the State, provides medical care only to individuals listed in item 3 of this item;

5. Does not provide medical care in the State for more than 45 days in a calendar year; and

1 6. Does not engage in the practice of medicine at a hospital,
2 related institution, or other health care facility, including an acute care facility, located
3 within the State; or

4 (iii) Is engaged in clinical training or participates in training or
5 teaching of a skill or procedure in a hospital if:

6 1. The skill or procedure:

7 A. Is advanced beyond those skills or procedures normally
8 taught or exercised in the hospital and in standard medical education or training;

9 B. Could not be otherwise conveniently taught or
10 demonstrated in standard medical education or training in that hospital; and

11 C. Is likely to benefit Maryland patients in this instance;

12 2. The demonstration of all skills or procedures by the
13 physician does not exceed 14 days total in the calendar year;

14 3. A licensed physician who practices at a hospital in the
15 State will be responsible for the medical care provided by that visiting physician to patients
16 in the State;

17 4. The visiting physician has no history of any medical
18 disciplinary action in any other state, territory, nation, or any branch of the United States
19 uniformed services or the [Veterans Administration] **U.S. DEPARTMENT OF VETERANS**
20 **AFFAIRS**, and has no significant detrimental malpractice history;

21 5. The physician is covered by malpractice insurance in the
22 jurisdiction in which the physician practices; and

23 6. The hospital ensures that the patients will be protected by
24 adequate malpractice insurance;

25 [(3) A physician employed in the service of the federal government while
26 performing the duties incident to that employment;]

27 [(4)] **(3)** A physician who resides in and is authorized to practice medicine
28 by any state adjoining this State for the purpose of prescribing home health services to a
29 patient who resides in this State, if the physician:

30 (i) Does not have an office or other regularly appointed place in this
31 State to meet patients; and

(ii) Has performed an in-person physical examination of the patient within the jurisdictional boundaries of the adjoining state in which the prescribing physician is authorized to practice medicine; and

~~[(5)]~~ (4) An individual while under the supervision of a licensed physician who has specialty training in psychiatry, and whose specialty training in psychiatry has been approved by the Board, if the individual submits an application to the Board on or before October 1, 1993, and either:

(i) 1. Has a master's degree from an accredited college or university; and

2. Has completed a graduate program accepted by the Board in a behavioral science that includes 1,000 hours of supervised clinical psychotherapy experience; or

(ii) 1. Has a baccalaureate degree from an accredited college or university; and

2. Has 4,000 hours of supervised clinical experience that is approved by the Board.

14-503.

(c) (1) The Board shall adopt rules and regulations to delineate the scope of this section.

(2) Before it adopts any rule or regulation under this section, the Board shall invite and consider proposals from any individual or health group that could be affected by the rule or regulation.

(e) Except as otherwise provided in this section, an individual may perform X-ray duties without a license **TO PRACTICE MEDICINE** only if the duties:

(1) Do not include:

(i) Computerized or noncomputerized tomography;

(ii) Fluoroscopy;

(iii) Invasive radiology;

(iv) Mammography;

(v) Nuclear medicine;

(vi) Radiation therapy; or

(vii) Xerography;

(2) Are limited to X-ray procedures of the:

(i) Chest, anterior–posterior and lateral;

(ii) Spine, anterior–posterior and lateral; or

(iii) Extremities, anterior–posterior and lateral, not including the head; and

(3) Are performed:

(i) By an individual who is not employed primarily to perform X-ray duties;

(ii) In the medical office of the physician who delegates the duties; and

(iii) 1. By an individual who, before October 1, 2002, has:

A. Taken a course consisting of at least 30 hours of training in performing X-ray procedures approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; and

B. Successfully passed an examination based on that course that has been approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; or

2. By a licensed physician assistant who has completed a course that includes anterior–posterior and lateral radiographic studies of extremities on at least 20 separate patients under the direct supervision of the delegating physician or radiologist using a mini C-arm or similar low-level radiation machine to perform nonfluoroscopic X-ray procedures, if the duties:

A. Include only the X-ray procedures described in paragraph (2)(iii) of this subsection; and

B. Are performed pursuant to a Board-approved delegation agreement that includes a request to perform advanced duties under [§ 15–302(c)(2)] § 14–5H–08(C)(2) of this [article] TITLE.

14–504.

(A) TO QUALIFY FOR A LICENSE TO PRACTICE MEDICINE AS A PHYSICIAN IN THE STATE, AN APPLICANT SHALL BE AN INDIVIDUAL WHO MEETS THE REQUIREMENTS OF § 14-301 OF THIS TITLE AND THIS SECTION.

(B) EXCEPT AS PROVIDED IN § 14-505 OF ~~THE~~ THIS SUBTITLE, THE APPLICANT SHALL:

(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

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

(2) (I) HAVE A DEGREE OF DOCTOR OF OSTEOPATHY FROM A SCHOOL OF OSTEOPATHY IN THE UNITED STATES, ITS TERRITORIES OR POSSESSIONS, PUERTO RICO, OR CANADA THAT HAS STANDARDS FOR GRADUATION EQUIVALENT TO THOSE ESTABLISHED BY THE AMERICAN OSTEOPATHIC ASSOCIATION; AND

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

(C) IF AN EXAMINATION IS REQUIRED FOR A LICENSE TO PRACTICE MEDICINE, AN OTHERWISE QUALIFIED APPLICANT WHO PASSES THE EXAMINATION AFTER HAVING FAILED THE EXAMINATION OR ANY PART OF THE EXAMINATION THREE OR MORE TIMES MAY QUALIFY FOR A LICENSE ONLY IF THE APPLICANT:

(1) HAS SUCCESSFULLY COMPLETED 2 OR MORE YEARS OF A RESIDENCY OR FELLOWSHIP ACCREDITED BY THE ACCREDITATION COUNCIL ON GRADUATE MEDICAL EDUCATION OR THE AMERICAN OSTEOPATHIC ASSOCIATION;

(2) (I) HAS A MINIMUM OF 5 YEARS OF CLINICAL PRACTICE OF MEDICINE:

1. IN THE UNITED STATES OR IN CANADA;

2. WITH ~~A~~ AT LEAST 3 OF THE 5 YEARS HAVING OCCURRED WITHIN 5 YEARS OF THE DATE OF THE APPLICATION; AND

1 **3. THAT OCCURRED UNDER A FULL UNRESTRICTED**
2 **LICENSE TO PRACTICE MEDICINE; AND**

3 **(II) HAS NO DISCIPLINARY ACTION PENDING AND HAS HAD NO**
4 **DISCIPLINARY ACTION TAKEN AGAINST THE APPLICANT THAT WOULD BE GROUNDS**
5 **FOR DISCIPLINE UNDER § 14-515 OF THIS SUBTITLE; OR**

6 **(3) IS BOARD CERTIFIED.**

7 **(D) (1) THE BOARD SHALL LICENSE AN APPLICANT TO PRACTICE**
8 **MEDICINE IF:**

9 **(I) THE APPLICANT:**

10 **1. BECAME LICENSED OR CERTIFIED AS A PHYSICIAN IN**
11 **ANOTHER JURISDICTION UNDER REQUIREMENTS THAT THE BOARD DETERMINES**
12 **ARE SUBSTANTIALLY EQUIVALENT TO THE LICENSING REQUIREMENTS OF THIS**
13 **TITLE;**

14 **2. IS IN GOOD STANDING UNDER THE LAWS OF THE**
15 **OTHER JURISDICTION;**

16 **3. SUBMITS AN APPLICATION TO THE BOARD ON A FORM**
17 **THAT THE BOARD REQUIRES; AND**

18 **4. PAYS TO THE BOARD AN APPLICATION FEE SET BY**
19 **THE BOARD; AND**

20 **(II) THE JURISDICTION IN WHICH THE APPLICANT IS LICENSED**
21 **OR CERTIFIED OFFERS A SIMILAR RECIPROCAL LICENSING PROCESS FOR**
22 **INDIVIDUALS LICENSED TO PRACTICE MEDICINE BY THE BOARD.**

23 **(2) THE BOARD SHALL ADOPT REGULATIONS TO IMPLEMENT THIS**
24 **SUBSECTION.**

25 **(E) (1) IN ESTABLISHING ANY CONTINUING EDUCATION REQUIREMENTS**
26 **FOR THE RENEWAL OF A LICENSE, THE BOARD SHALL EVALUATE EXISTING**
27 **METHODS, DEVICES, AND PROGRAMS IN USE AMONG THE VARIOUS MEDICAL**
28 **SPECIALTIES AND OTHER RECOGNIZED MEDICAL GROUPS.**

29 **(2) THE BOARD SHALL ADOPT REGULATIONS THAT ALLOW A**
30 **LICENSEE SEEKING RENEWAL TO RECEIVE UP TO FIVE CONTINUING EDUCATION**
31 **CREDITS PER RENEWAL PERIOD FOR PROVIDING UNCOMPENSATED, VOLUNTARY**
32 **MEDICAL SERVICES DURING EACH RENEWAL PERIOD.**

(3) THE BOARD MAY NOT ESTABLISH OR ENFORCE THESE REQUIREMENTS IF THEY WOULD SO REDUCE THE NUMBER OF PHYSICIANS IN A COMMUNITY AS TO JEOPARDIZE THE AVAILABILITY OF ADEQUATE MEDICAL CARE IN THAT COMMUNITY.

14-505.

(b) An applicant for a license **TO PRACTICE MEDICINE** is exempt from the educational requirements of [§ 14-307] **§ 14-301 OF THIS TITLE AND § 14-504** of this subtitle, if the applicant:

(1) Has studied medicine at a foreign medical school;

(2) Is certified by the Educational Commission for Foreign Medical Graduates or by its successor as approved by the Board;

(3) Passes a qualifying examination for foreign medical school graduates required by the Board;

(4) Meets any other qualifications for foreign medical school graduates that the Board establishes in its regulation for licensing of applicants;

(5) Submits acceptable evidence to the Board of the requirements set in the Board's regulations; and

(6) Meets one of the following requirements:

(i) The applicant graduated from any foreign medical school and submits evidence acceptable to the Board of successful completion of 2 years of training in a postgraduate medical education program accredited by an accrediting organization recognized by the Board; or

(ii) The applicant successfully completed a fifth pathway program and submits evidence acceptable to the Board that the applicant:

1. Has a document issued by the foreign medical school certifying that the applicant completed all of the formal requirements of that school for the study of medicine, except for the postgraduate or social service components as required by the foreign country or its medical school;

2. Has successfully completed a fifth pathway program; and

3. Has successfully completed 2 years of training in a postgraduate medical education program following completion of a Board approved fifth pathway program.

1 14–506.

2 (a) An applicant who otherwise qualifies for a license **TO PRACTICE MEDICINE**
3 under this title is entitled to sit for an examination as provided under this section or any
4 regulations adopted to carry out this section.

5 14–510.

6 (a) The Board may:

7 (1) License **TO PRACTICE MEDICINE** an applicant by virtue of the
8 conceded eminence and authority of the applicant in the profession if the applicant:

9 (i) Is recommended to the Board by:

10 1. The dean of a school of medicine in the State; or

11 2. The Director of the National Institutes of Health;

12 (ii) Is to receive an appointment at the institution making the
13 recommendation under item (i) of this paragraph; and

14 (iii) Meets any other requirement the Board may adopt by regulation
15 under this section;

16 (2) Define by regulation the term “conceded eminence and authority in the
17 profession” and, for this purpose, shall consider such criteria as:

18 (i) Academic appointments;

19 (ii) Length of time in the profession;

20 (iii) Scholarly publications; and

21 (iv) Professional accomplishments;

22 (3) Adopt regulations concerning the further qualifications of an applicant
23 for licensure, including conditions of employment, application procedures, and fees under
24 this section;

25 (4) Allow an exception to the general education and examination
26 requirements of [§ 14–307(d) and (e)] **§ 14–301(E) OF THIS TITLE AND § 14–504(B)** of
27 this subtitle, but may not permit waiver of the requirements of [§ 14–307(a) through (c)] **§**
28 **14–301(A) THROUGH (C)** of this [subtitle] **TITLE**;

(5) Qualify, restrict, or otherwise limit a license granted under this section;
and

(6) Require a 6-month probationary period during which the medical services performed by the applicant granted a license under this section are supervised by another licensed physician.

14-511.

(b) A licensee on inactive status is exempt from the continuing education requirements under [§ 14-316(d)] **§ 14-306(D)** of this [subtitle] TITLE.

14-512.

(c) A licensee on emeritus status is exempt from the continuing education requirements under [§ 14-316(d)] **§ 14-306(D)** of this [subtitle] TITLE.

14-514.

(C) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION IS GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$500.

(D) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

14-515.

(A) IF AN ALLEGATION OF GROUNDS FOR DISCIPLINARY OR OTHER ACTION IS MADE BY A PATIENT OR A FAMILY MEMBER OF A PATIENT BASED ON § 14-516(A)(22) OF THIS SUBTITLE, AND A FULL INVESTIGATION RESULTS FROM THAT ALLEGATION, THE FULL INVESTIGATION SHALL INCLUDE AN OFFER FOR AN INTERVIEW WITH THE PATIENT OR A FAMILY MEMBER OF THE PATIENT WHO WAS PRESENT AT OR AROUND THE TIME THAT THE INCIDENT THAT GAVE RISE TO THE ALLEGATION OCCURRED.

(B) (1) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBSECTION, AFTER BEING ASSIGNED A COMPLAINT UNDER § 14-401.1 OF THIS TITLE, THE DISCIPLINARY PANEL MAY:

(I) REFER AN ALLEGATION FOR FURTHER INVESTIGATION TO THE ENTITY THAT HAS CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF THIS SECTION; OR

(II) TAKE ANY APPROPRIATE AND IMMEDIATE ACTION AS NECESSARY.

(2) (I) IF, AFTER BEING ASSIGNED A COMPLAINT AND COMPLETING THE PRELIMINARY INVESTIGATION, THE DISCIPLINARY PANEL FINDS THAT THE LICENSEE MAY HAVE VIOLATED § 14-516(A)(22) OF THIS SUBTITLE, THE DISCIPLINARY PANEL SHALL REFER THE ALLEGATION TO THE ENTITY OR ENTITIES THAT HAVE CONTRACTED WITH THE BOARD UNDER SUBSECTION (D) OF THIS SECTION FOR FURTHER INVESTIGATION AND PHYSICIAN PEER REVIEWS WITHIN THE INVOLVED MEDICAL SPECIALTY OR SPECIALTIES.

(II) A DISCIPLINARY PANEL SHALL OBTAIN TWO PEER REVIEW REPORTS FROM THE ENTITY OR INDIVIDUAL WITH WHOM THE BOARD CONTRACTED UNDER SUBSECTION (D) OF THIS SECTION FOR EACH ALLEGATION THE DISCIPLINARY PANEL REFERS FOR PEER REVIEW.

(C) COUNTY MEDICAL SOCIETIES SHALL REFER TO THE BOARD ALL ~~COMPLAINS~~ COMPLAINTS THAT SET FORTH ALLEGATIONS OF GROUNDS FOR DISCIPLINARY ACTION UNDER § 14-516 OF THIS SUBTITLE.

(D) (1) IN ACCORDANCE WITH § 14-401.1(C) OF THIS TITLE, THE BOARD SHALL ENTER INTO A WRITTEN CONTRACT WITH AN ENTITY OR INDIVIDUAL FOR CONFIDENTIAL PHYSICIAN PEER REVIEW OF ALLEGATIONS BASED ON § 14-516(A)(22) OF THIS SUBTITLE.

(2) A PEER REVIEWER SHALL:

(I) BE BOARD CERTIFIED;

(II) HAVE SPECIAL QUALIFICATIONS TO JUDGE THE MATTER AT HAND;

(III) HAVE RECEIVED A SPECIFIED AMOUNT OF MEDICAL EXPERIENCE AND TRAINING;

(IV) HAVE NO FORMAL ACTIONS AGAINST THE PEER REVIEWER'S OWN LICENSE;

(V) RECEIVE TRAINING IN PEER REVIEW;

(VI) HAVE A STANDARD FORMAT FOR PEER REVIEW REPORTS;
AND

(VII) TO THE EXTENT PRACTICABLE, BE LICENSED AND ENGAGED
IN THE PRACTICE OF MEDICINE IN THE STATE.

(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.

14–516.

(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:

(1) Fraudulently or deceptively obtains or attempts to obtain a license for
the applicant or licensee or for another;

(2) Fraudulently or deceptively uses a license;

(3) Is guilty of:

(i) Immoral conduct in the practice of medicine; or

(ii) Unprofessional conduct in the practice of medicine;

(4) Is professionally, physically, or mentally [incompetent] UNABLE TO
CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;

(5) Solicits or advertises in violation of [§ 14–503] § 14–514 of this [title]
SUBTITLE;

(6) Abandons a patient;

(7) Habitually is intoxicated;

(8) Is addicted to, or habitually abuses, any narcotic or controlled
dangerous substance as defined in § 5–101 of the Criminal Law Article;

(9) Provides professional services:

(i) While under the influence of alcohol; or

(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;

1 (10) Promotes the sale of drugs, devices, appliances, or goods to a patient so
2 as to exploit the patient for financial gain;

3 (11) Willfully makes or files a false report or record in the practice of
4 medicine;

5 (12) Willfully fails to file or record any medical report as required under law,
6 willfully impedes or obstructs the filing or recording of the report, or induces another to fail
7 to file or record the report;

8 (13) On proper request, and in accordance with the provisions of Title 4,
9 Subtitle 3 of the Health – General Article, fails to provide details of a patient’s medical
10 record to the patient, another physician, or hospital;

11 (14) Solicits professional patronage through an agent or other person or
12 profits from the acts of a person who is represented as an agent of the physician;

13 (15) Pays or agrees to pay any sum to any person for bringing or referring a
14 patient or accepts or agrees to accept any sum from any person for bringing or referring a
15 patient;

16 (16) Agrees with a clinical or bioanalytical laboratory to make payments to
17 the laboratory for a test or test series for a patient, unless the licensed physician discloses
18 on the bill to the patient or third-party payor:

19 (i) The name of the laboratory;

20 (ii) The amount paid to the laboratory for the test or test series; and

21 (iii) The amount of procurement or processing charge of the licensed
22 physician, if any, for each specimen taken;

23 (17) Makes a willful misrepresentation in treatment;

24 (18) Practices medicine with an unauthorized person or aids an
25 unauthorized person in the practice of medicine;

26 (19) [Grossly overutilizes] **ESTABLISHES A PATTERN OF**
27 **OVERUTILIZATION OF** health care services;

28 (20) Offers, undertakes, or agrees to cure or treat disease by a secret
29 method, treatment, or medicine;

30 (21) Is disciplined by a licensing or disciplinary authority or convicted or
31 disciplined by a court of any state or country or disciplined by any branch of the United
32 States uniformed services or the [Veterans’ Administration] **U.S. DEPARTMENT OF**

VETERANS AFFAIRS for an act that would be grounds for disciplinary action under this section;

(22) Fails to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in this State;

(23) Willfully submits false statements to collect fees for which services are not provided;

(24) Was 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 this section and the licensee:

(i) Surrendered the license issued by the state or country to the state or country; or

(ii) Allowed the license issued by the state or country to expire or lapse;

(25) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;

(26) Fails to educate a patient being treated for breast cancer of alternative methods of treatment as required by § 20–113 of the Health – General Article;

(27) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate medical purposes;

(28) Fails to comply with the provisions of § 12–102 of this article;

(29) 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;

(30) Except as to an association that has remained in continuous existence since July 1, 1963:

(i) Associates with a pharmacist as a partner or co-owner of a pharmacy for the purpose of operating a pharmacy;

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

(iii) Contracts with a pharmacist for the purpose of operating a pharmacy;

(31) Except in an emergency life-threatening situation where it is not feasible or practicable, fails to comply with the Centers for Disease Control and Prevention's guidelines on universal precautions;

(32) Fails to display the notice required under [§ 14-415] § 14-520 of this subtitle;

(33) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel;

(34) Is convicted of insurance fraud as defined in § 27-801 of the Insurance Article;

(35) Is in breach of a service obligation resulting from the applicant's or licensee's receipt of State or federal funding for the licensee's medical education;

(36) Willfully makes a false representation when seeking or making application for licensure or any other application related to the practice of medicine;

(37) By corrupt means, threats, or force, intimidates or influences, or attempts to intimidate or influence, for the purpose of causing any person to withhold or change testimony in hearings or proceedings before the Board or a disciplinary panel or those otherwise delegated to the Office of Administrative Hearings;

(38) By corrupt means, threats, or force, hinders, prevents, or otherwise delays any person from making information available to the Board or a disciplinary panel in furtherance of any investigation of the Board or a disciplinary panel;

(39) Intentionally misrepresents credentials for the purpose of testifying or rendering an expert opinion in hearings or proceedings before the Board or a disciplinary panel or those otherwise delegated to the Office of Administrative Hearings;

(40) Fails to keep adequate medical records as determined by appropriate peer review;

(41) Performs a cosmetic surgical procedure in an office or a facility that is not:

(i) Accredited by:

1. The American Association for Accreditation of Ambulatory Surgical Facilities;

2. The Accreditation Association for Ambulatory Health Care; or

(ii) Certified to participate in the Medicare program, as enacted by Title XVIII of the Social Security Act;

(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;

(45) Fails to comply with § 1-223 of this article; or

14-517.

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:

(1) THE NAME OF ANY MEDICAL SCHOOL THAT THE LICENSEE ATTENDED AND THE DATE ON WHICH THE LICENSEE GRADUATED FROM THE SCHOOL;

(2) A DESCRIPTION OF ANY INTERNSHIP AND RESIDENCY TRAINING;

(3) A DESCRIPTION OF ANY SPECIALTY BOARD CERTIFICATION BY A RECOGNIZED BOARD OF THE AMERICAN BOARD OF MEDICAL SPECIALTIES OR THE AMERICAN OSTEOPATHIC ASSOCIATION;

(4) THE NAME OF ANY HOSPITAL WHERE THE LICENSEE HAS MEDICAL PRIVILEGES;

(5) THE LOCATION OF THE LICENSEE'S PRIMARY PRACTICE SETTING:

(6) WHETHER THE LICENSEE PARTICIPATES IN THE MARYLAND MEDICAL ASSISTANCE PROGRAM:

1 **(7) WHETHER THE LICENSEE MAINTAINS MEDICAL PROFESSIONAL**
2 **LIABILITY INSURANCE; AND**

3 **(8) THE NUMBER OF MEDICAL MALPRACTICE FINAL COURT**
4 **JUDGMENTS AND ARBITRATION AWARDS AGAINST THE LICENSEE WITHIN THE MOST**
5 **RECENT 10-YEAR PERIOD.**

6 14-518.

7 (a) (1) Each hospital and related institution shall submit to the Board a report
8 within 10 days after:

9 (i) The hospital or related institution denied the application of a
10 physician for staff privileges or limited, reduced, otherwise changed, or terminated the staff
11 privileges of a physician, or the physician resigned whether or not under formal accusation,
12 if the denial, limitation, reduction, change, termination, or resignation is for reasons that
13 might be grounds for disciplinary action under [§ 14-404] **§ 14-516** of this subtitle;

14 (ii) The hospital or related institution took any disciplinary action
15 against a salaried, licensed physician without staff privileges, including termination of
16 employment, suspension, or probation, for reasons that might be grounds for disciplinary
17 action under [§ 14-404] **§ 14-516** of this subtitle;

18 (iii) A licensed physician voluntarily resigned from the staff, employ,
19 or training program of the hospital or related institution for reasons that might be grounds
20 for disciplinary action under [§ 14-404] **§ 14-516** of this subtitle; or

21 (iv) The hospital or related institution placed any other restrictions
22 or conditions on any of the licensed physicians as listed in items (i) through (iii) of this
23 paragraph for any reasons that might be grounds for disciplinary action under [§ 14-404]
24 **§ 14-516** of this subtitle.

25 14-519.

26 (a) (1) Each alternative health system as defined in § 1-401 of this article shall
27 submit to the Board a report within 10 days after:

28 (i) The alternative health system denied the formal application of a
29 physician to contract with the alternative health system or limited, reduced, otherwise
30 changed, or terminated the contract of a physician, or the physician resigned whether or
31 not under formal accusation, if the denial, limitation, reduction, change, termination, or
32 resignation is for reasons that might be grounds for disciplinary action under [§ 14-404] **§**
33 **14-516** of this subtitle; or

(ii) The alternative health system placed any other restrictions or conditions on any licensed physician for any reasons that might be grounds for disciplinary action under [§ 14-404] **§ 14-516** of this subtitle.

14-522.

(C) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION 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.

(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

14-525.

(B) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION 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.

(2) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

[(b)] (C) (1) The Board shall investigate any alleged violation of this section or [§ 14-507] **§ 14-524** of this [title] **SUBTITLE** and may enforce any provision of this title by injunction or other appropriate proceedings.

[(c)] (2) An action under this [section] **SUBSECTION** is in addition to and not instead of criminal prosecution under [§ 14-606 of this subtitle] **SUBSECTION (B) OF THIS SECTION.**

14-526.

(D) (1) A PERSON WHO VIOLATES ANY PROVISION OF THIS SECTION 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.

(2) A PERSON WHO IS REQUIRED TO GIVE NOTICE UNDER THIS SECTION, AND WHO FAILS TO GIVE THE REQUIRED NOTICE, ~~IS LIABLE TO~~ MAY BE SUBJECT TO A CIVIL PENALTY OF NOT MORE THAN \$100.

(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

14-528.

(A) Except as otherwise provided in this title:

(1) A person may not practice, attempt to practice, or offer to practice medicine in the State unless licensed by the Board; and

(2) A licensee on inactive status under [§ 14–320] **§ 14–511** of this subtitle or emeritus status under [§ 14–320.1] **§ 14–512** of this subtitle may not:

(i) Practice, attempt to practice, or offer to practice medicine in the State; or

(ii) Delegate medical acts.

(B) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A PERSON WHO VIOLATES THIS SECTION IS:

(I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH; AND

(II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO BE LEVIED BY A DISCIPLINARY PANEL.

(2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER § 14–306 OF THIS TITLE IF:

(I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION OF THE LICENSE; AND

(II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.

(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS SECTION INTO THE BOARD OF PHYSICIANS FUND.

14–529.

(a) Unless authorized to practice medicine under this title, a person may not represent to the public, by description of services, methods, or procedures, or otherwise, that the person is authorized to practice medicine in this State.

(b) Except as otherwise provided in this [article] **TITLE**, a person may not use the words or terms “Dr.”, “doctor”, “physician”, “D.O.”, or “M.D.” with the intent to represent that the person practices medicine, unless the person is:

(1) Licensed to practice medicine under this title;

(2) A physician licensed by and residing in another jurisdiction, while engaging in consultation with a physician licensed in this State;

(3) A physician employed by the federal government while performing duties incident to that employment;

(4) A physician who resides in and is licensed to practice medicine by any state adjoining this State and whose practice extends into this State;

(5) An individual in a postgraduate medical program that is accredited by an accrediting organization recognized by the Board in regulations while the individual is practicing medicine in the program; or

(6) A licensee who is on emeritus status under [§ 14–320.1] **§ 14–512** of this [title] **SUBTITLE**, [provided that] **IF** the licensee does not represent to the public that the licensee is authorized to practice medicine in the State.

(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 assistant” or “physician’s aide”.

(D) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A PERSON WHO VIOLATES THIS SECTION IS:

(I) GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$10,000 OR IMPRISONMENT NOT EXCEEDING 5 YEARS OR BOTH; AND

(II) SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO BE LEVIED BY A DISCIPLINARY PANEL.

(2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO NOT APPLY TO A FORMER LICENSEE WHO HAS FAILED TO RENEW A LICENSE UNDER § 14–306 OF THIS TITLE IF:

(I) LESS THAN 60 DAYS HAVE ELAPSED SINCE THE EXPIRATION OF THE LICENSE; AND

(II) THE FORMER LICENSEE HAS APPLIED FOR LICENSE REINSTATEMENT, INCLUDING PAYMENT OF THE REINSTATEMENT FEE.

1 **(3) THE BOARD SHALL PAY ANY PENALTY COLLECTED UNDER THIS**
2 **SECTION INTO THE BOARD OF PHYSICIANS FUND.**

3 14-5A-01.

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

5 (c) “Committee” means the Respiratory Care [Professional Standards]
6 **ADVISORY** Committee established under § 14-5A-05 of this subtitle.

7 14-5A-05.

8 There is a Respiratory Care [Professional Standards] **ADVISORY** Committee within
9 the Board.

10 14-5A-06.

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

12 14-5A-08.

13 (a) Except as otherwise provided in this [subtitle] **TITLE**, an individual shall be
14 licensed by the Board before the individual may practice respiratory care in this State.

15 (b) This section does not apply to:

16 [(1) An individual employed by the federal government as a respiratory care
17 practitioner while the individual is practicing within the scope of that employment;

18 (2)] **(1)** A respiratory care practitioner student enrolled in an education
19 program which is accredited by an approved accrediting organization while practicing
20 respiratory care in the program; or

21 [(3)] **(2)** An individual practicing respiratory care who is licensed by and
22 residing in another jurisdiction if:

23 (i) The individual is participating in the transportation of a patient
24 from that individual’s jurisdiction of licensure into the State;

25 (ii) The individual practices respiratory care only during the
26 transportation of the patient;

27 (iii) The individual does not practice respiratory care on another
28 individual who is not the patient being transported into the State; and

(iv) The individual does not practice respiratory care in the State for more than a total of 14 days within a calendar year.

14-5A-09.

[(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.

(b) The applicant shall be of good moral character.

(c) The applicant shall be at least 18 years old.

(d) The applicant] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS TITLE, AN APPLICANT** shall[:

(1) Meet] **MEET** any educational, training, or examination requirements established by the Board including:

[(i)] **(1)** Graduation from an appropriate educational program as determined by the Board; and

[(ii)] **(2)** Certification by a national certifying board approved by the Board[; and

(2) Demonstrate oral and written competency in English as required by the Board].

[(e) The applicant shall complete a criminal history records check in accordance with § 14-308.1 of this title.]

14-5A-17.

(a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel, 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, if the [applicant or] licensee:

(1) Fraudulently or deceptively obtains or attempts to obtain a license for the applicant, licensee, or for another;

(2) Fraudulently or deceptively uses a license; ~~respiratory care;~~

(3) Is guilty of unprofessional or immoral conduct in the practice of respiratory care;

1 (4) Is professionally, physically, or mentally [incompetent] **UNABLE TO**
2 **CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

3 (5) Abandons a patient;

4 (6) Is habitually intoxicated;

5 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous
6 substance as defined in § 5–101 of the Criminal Law Article;

7 (8) Provides professional services while:

8 (i) Under the influence of alcohol; or

9 (ii) Using any narcotic or controlled dangerous substance as defined
10 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic
11 amounts or without valid medical indication;

12 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a
13 patient so as to exploit the patient for financial gain;

14 (10) Willfully makes or files a false report or record in the practice of
15 respiratory care;

16 (11) Willfully fails to file or record any report as required under law,
17 willfully impedes or obstructs the filing or recording of a report, or induces another to fail
18 to file or record a report;

19 (12) Breaches patient confidentiality;

20 (13) Pays or agrees to pay any sum or provide any form of remuneration or
21 material benefit to any person for bringing or referring a patient or accepts or agrees to
22 accept any sum or any form of remuneration or material benefit from an individual for
23 bringing or referring a patient;

24 (14) Knowingly makes a misrepresentation while practicing respiratory
25 care;

26 (15) Knowingly practices respiratory care with an unauthorized individual
27 or aids an unauthorized individual in the practice of respiratory care;

28 (16) Offers, undertakes, or agrees to cure or treat disease by a secret
29 method, treatment, or medicine;

30 (17) Is disciplined by a licensing or disciplinary authority or is convicted or
31 disciplined by a court of any state or country or is disciplined by any branch of the United
32 States uniformed services or the [Veterans' Administration] **U.S. DEPARTMENT OF**

VETERANS AFFAIRS for an act that would be grounds for disciplinary action under the Board's disciplinary statutes;

(18) Fails to meet appropriate standards for the delivery of respiratory care performed in any inpatient or outpatient facility, office, hospital or related institution, domiciliary care facility, patient's home, or any other location in this State;

(19) Knowingly submits false statements to collect fees for which services are not provided;

(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

(ii) Has:

1. Surrendered the license issued by the state or country; or

2. Allowed the license issued by the state or country to expire or lapse;

(21) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;

(22) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate medical purposes;

(23) Practices or attempts to practice beyond the authorized scope of practice;

(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;

(25) Practices or attempts to practice a respiratory care procedure or uses or attempts to use respiratory care equipment if the [applicant or] licensee has not received education and training in the performance of the procedure or the use of the equipment;

(26) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel;

(27) Fails to practice under the supervision of a physician or violates a supervisory order of a supervising physician; or

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

1 14-5A-20.

2 Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice,
3 attempt to practice, or offer to practice respiratory care in this State unless licensed to
4 practice respiratory care by the Board.

5 14-5A-21.

6 (a) Unless authorized to practice respiratory care under this [subtitle] **TITLE**, a
7 person may not represent to the public by title, by description of services, methods, or
8 procedures, or otherwise, that the person is authorized to practice respiratory care in this
9 State.

10 (b) Unless authorized to practice respiratory care under this [subtitle] **TITLE**, a
11 person may not use the abbreviation "R.C.P." or any other words, letters, or symbols with
12 the intent to represent that the person practices respiratory care.

13 14-5A-22.

14 A person may not provide, attempt to provide, offer to provide, or represent that the
15 person provides respiratory care unless the respiratory care is provided by an individual
16 who is authorized to practice respiratory care under this [subtitle] **TITLE**.

17 14-5A-22.1.

18 (a) Except as otherwise provided in this [subtitle] **TITLE**, a licensed physician
19 may not employ or supervise an individual practicing respiratory care without a license.

20 14-5B-05.

21 **(F) A QUORUM OF THE COMMITTEE CONSISTS OF FIVE MEMBERS.**

22 14-5B-07.

23 (a) (2) The failure of a licensed physician to properly supervise a licensee is
24 unprofessional conduct in the practice of medicine under [§ 14-404(a)(3)] **§ 14-516(A)(3)**
25 of this title.

26 14-5B-08.

27 (a) (1) Except as otherwise provided in this [subtitle] **TITLE**, an individual
28 shall be licensed by the Board before the individual may practice radiation therapy,
29 radiography, nuclear medicine technology, or radiology assistance in this State.

30 (2) A radiologist assistant may not:

- (i) Interpret images;
- (ii) Make diagnoses; or
- (iii) Prescribe medications or therapies.

(b) This section does not apply to[:

(1) An individual employed by the federal government as a radiation therapist, radiographer, a nuclear medicine technologist, or radiologist assistant while the individual is practicing within the scope of that employment; or

(2) A] A radiation therapy student, a radiography student, a nuclear medicine technology student, or a radiology assistant student enrolled in an education program which is accredited by an approved accrediting organization while practicing radiation therapy, radiography, nuclear medicine technology, or radiology assistance in that program.

14-5B-09.

(a) [To qualify for a license, an applicant shall be an individual who meets the requirements of this section.

(b)] Except as provided in subsection [(c)] **(B)** of this section, [the] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS TITLE, AN** applicant shall[:

- (1) Be of good moral character;
- (2) Be at least 18 years old;
- (3) Demonstrate oral and written competency in English as required by the Board;

(4) Meet] **MEET** any educational, training, or examination requirements established by the Board, including:

[**(i)] (1)** Graduation from an appropriate educational program as determined by the Board; and

[**(ii)] (2)** Certification[; and

(5) Complete a criminal history records check in accordance with § 14-308.1 of this title].

1 [(c)] (B) To qualify for a license to practice as a radiologist assistant, an
2 applicant shall:

3 (1) Be issued a general license to perform radiography;

4 (2) Complete an advanced academic program with a nationally recognized
5 radiology curriculum that results in a baccalaureate degree, post baccalaureate certificate,
6 or graduate degree and incorporates a radiologist-directed clinical preceptorship;

7 (3) Be certified in advanced cardiac life support; and

8 (4) Be certified as a radiologist assistant by the American Registry of
9 Radiologic Technologists.

10 [(d)] (C) Except for requirements adopted by the Board for license renewal under
11 [§ 14-5B-12 of this subtitle] **§ 14-306 OF THIS TITLE**, nothing in this subtitle may be
12 construed to require an individual who is certified by the Board as a radiation
13 oncology/therapy technologist, medical radiation technologist, or nuclear medicine
14 technologist as of October 1, 2008, to meet additional education, training, or examination
15 requirements.

16 14-5B-11.

17 (a) Licensure as a radiation therapist authorizes an individual to practice
18 radiation therapy **IN THE STATE** while the license is effective.

19 (b) Licensure as a radiographer authorizes an individual to practice radiography
20 **IN THE STATE** while the license is effective.

21 (c) Licensure as a nuclear medicine technologist authorizes an individual to
22 practice nuclear medicine technology **IN THE STATE** while the license is effective.

23 (d) Licensure as a radiologist assistant authorizes an individual to practice
24 radiology assistance **IN THE STATE** while the license is effective.

25 14-5B-14.

26 (a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,
27 on the affirmative vote of a majority of the quorum of the disciplinary panel, may [deny a
28 license to any applicant,] reprimand any licensee, place any licensee on probation, or
29 suspend or revoke a license, if the [applicant or] licensee:

30 (1) Fraudulently or deceptively obtains or attempts to obtain a license for
31 the applicant, licensed individual, or for another;

32 (2) Fraudulently or deceptively uses a license;

1 (3) Is guilty of unprofessional or immoral conduct in the practice of
2 radiation therapy, radiography, nuclear medicine technology, or radiology assistance;

3 (4) Is professionally, physically, or mentally [incompetent] **UNABLE TO**
4 **CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

5 (5) Abandons a patient;

6 (6) Is habitually intoxicated;

7 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous
8 substance as defined in § 5–101 of the Criminal Law Article;

9 (8) Provides professional services while:

10 (i) Under the influence of alcohol; or

11 (ii) Using any narcotic or controlled dangerous substance as defined
12 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic
13 amounts or without valid medical indication;

14 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a
15 patient so as to exploit the patient for financial gain;

16 (10) Willfully makes or files a false report or record in the practice of
17 radiation therapy, radiography, nuclear medicine technology, or radiology assistance;

18 (11) Willfully fails to file or record any report as required under law,
19 willfully impedes or obstructs the filing or recording of a report, or induces another to fail
20 to file or record a report;

21 (12) Breaches patient confidentiality;

22 (13) Pays or agrees to pay any sum or provide any form of remuneration or
23 material benefit to any person for bringing or referring a patient or accepts or agrees to
24 accept any sum or any form of remuneration or material benefit from an individual for
25 bringing or referring a patient;

26 (14) Knowingly makes a misrepresentation while practicing radiation
27 therapy, radiography, nuclear medicine technology, or radiology assistance;

28 (15) Knowingly practices radiation therapy, radiography, nuclear medicine
29 technology, or radiology assistance with an unauthorized individual or aids an
30 unauthorized individual in the practice of radiation therapy, radiography, nuclear medicine
31 technology, or radiology assistance;

1 (16) Offers, undertakes, or agrees to cure or treat disease by a secret
2 method, treatment, or medicine;

3 (17) Is disciplined by a licensing or disciplinary authority or is convicted or
4 disciplined by a court of any state or country or is disciplined by any branch of the United
5 States uniformed services or the [Veterans' Administration] **U.S. DEPARTMENT OF**
6 **VETERANS AFFAIRS** for an act that would be grounds for disciplinary action under the
7 Board's disciplinary statutes;

8 (18) Fails to meet appropriate standards for the delivery of quality radiation
9 therapy, radiography, nuclear medicine technology, or radiology assistance care performed
10 in any outpatient surgical facility, office, hospital or related institution, or any other
11 location in this State;

12 (19) Knowingly submits false statements to collect fees for which services
13 are not provided;

14 (20) (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 issued by the state or country; or

19 2. Allowed the license issued by the state or country to expire
20 or lapse;

21 (21) Knowingly fails to report suspected child abuse in violation of § 5–704
22 of the Family Law Article;

23 (22) Sells, prescribes, gives away, or administers drugs for illegal or
24 illegitimate medical purposes;

25 (23) Practices or attempts to practice beyond the authorized scope of
26 practice;

27 (24) Refuses, withholds from, denies, or discriminates against an individual
28 with regard to the provision of professional services for which the licensee is licensed and
29 qualified to render because the individual is HIV positive;

30 (25) Practices or attempts to practice a radiation therapy, radiography,
31 nuclear medicine technology, or radiology assistance procedure or uses radiation therapy,
32 radiography, nuclear medicine technology, or radiology assistance equipment if the
33 [applicant or] licensee has not received education, internship, training, or experience in the
34 performance of the procedure or the use of the equipment;

(26) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel;

(27) Fails to practice under the supervision of a physician or violates a supervisory order of a supervising physician; or

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

14–5B–17.

(a) Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice, attempt to practice, or offer to practice radiation therapy in this State unless licensed to practice radiation therapy by the Board.

(b) Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice, attempt to practice, or offer to practice nuclear medicine technology in this State unless licensed to practice nuclear medicine technology by the Board.

(c) Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice, attempt to practice, or offer to practice radiography in this State unless licensed to practice radiography by the Board.

(d) Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice, attempt to practice, or offer to practice radiology assistance in this State unless licensed to practice radiology assistance by the Board.

14–5B–18.

(b) A person may not provide, attempt to provide, offer to provide, or represent that the person provides radiation therapy, radiography, nuclear medicine technology, or radiology assistance care unless the radiation therapy, radiography, nuclear medicine technology, or radiology assistance care is provided by an individual who is authorized to practice radiation therapy, radiography, nuclear medicine technology, or radiology assistance under this [subtitle] **TITLE**.

14–5B–18.1.

(a) Except as otherwise provided in this [subtitle] **TITLE**, a licensed physician may not employ or supervise an individual practicing radiation therapy, radiography, nuclear medicine technology, or radiology assistance without a license or temporary license.

(b) Except as otherwise provided in this [subtitle] **TITLE**, a hospital, related institution, alternative health system, or employer may not employ an individual practicing radiation therapy, radiography, nuclear medicine technology, or radiology assistance without a license or temporary license.

1 14-5C-01.

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

3 (c) “Committee” means the Polysomnography [Professional Standards]
4 **ADVISORY** Committee established under § 14-5C-05 of this subtitle.

5 14-5C-05.

6 There is a Polysomnography [Professional Standards] **ADVISORY** Committee within
7 the Board.

8 14-5C-06.

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

10 14-5C-08.

11 (b) This section does not apply to a student enrolled in an education program
12 under [§ 14-5C-09(c)(3)] **§ 14-5C-09(3)** of this subtitle while practicing polysomnography
13 in that program.

14 14-5C-09.

15 [(a) To qualify for a license, an applicant shall be an individual who meets the
16 requirements of this section.

17 (b) The applicant shall:

18 (1) Be of good moral character;

19 (2) Be at least 18 years old; and

20 (3) Complete a criminal history records check in accordance with §
21 14-308.1 of this title.

22 (c) **An] TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS**
23 **SET FORTH IN § 14-301 OF THIS TITLE, AN** applicant for a polysomnographic technologist
24 license shall:

25 (1) Have passed the national certifying examination given by the Board of
26 Registered Polysomnographic Technologists or another examination approved by the
27 Board;

(2) Submit to the Board proof of certification as a registered polysomnographic technologist or other national certification approved by the Board;

(3) (i) 1. Have graduated from a polysomnographic educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; or

2. A. Have graduated from a sleep technologist educational program that is accredited by the American Academy of Sleep Medicine; and

B. Have completed a clinical component of an educational program as established by the Committee and approved by the Board;

(ii) 1. Have graduated from a respiratory care educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; and

2. Have completed the Committee on Accreditation for Respiratory Care's curriculum for a polysomnography certificate that is accredited by the Commission on Accreditation of Allied Health Education Programs; or

(iii) 1. Have graduated from an electroneuro-diagnostic educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; and

2. Have completed additional units, modules, and courses of instruction focused on polysomnographic technology that are accredited by the Commission on Accreditation of Allied Health Education Programs; and

(4) Meet any other educational or clinical requirements established by the Committee and approved by the Board.

14-5C-10.

[(a)] The Board shall waive the education requirement under **[§ 14-5C-09(c)(3)] § 14-5C-09(3)** of this subtitle if on or before September 30, 2013, an individual:

(1) Has passed the national certifying examination by the Board of Registered Polysomnographic Technologists or another examination approved by the Board;

(2) Is certified by the Board of Registered Polysomnographic Technologists as a registered polysomnographic technologist;

(3) Has submitted an application for licensure to the Board; and

(4) Meets all of the requirements under [§ 14-5C-09(b) and (c)(1) and (2)]
§ 14-301(B), (C), AND (D) OF THIS TITLE AND § 14-5C-09(1) AND (2) of this subtitle.

[(b) (1) If an individual has not satisfied the requirements under subsection (a)
of this section on or before September 30, 2013, the individual may petition the Board for
an extension.]

(2) The Board shall determine whether to grant an extension under this
subsection on a case-by-case basis.]

14-5C-17.

(a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel,
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, if the [applicant or] licensee:

(1) Fraudulently or deceptively obtains or attempts to obtain a license for
the applicant, licensee, or for another;

(2) Fraudulently or deceptively uses a license;

(3) Is guilty of unprofessional or immoral conduct in the practice of
polysomnography;

(4) Is professionally, physically, or mentally [incompetent] **UNABLE TO
CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

(5) Abandons a patient;

(6) Is habitually intoxicated;

(7) Is addicted to or habitually abuses any narcotic or controlled dangerous
substance as defined in § 5-101 of the Criminal Law Article;

(8) Provides professional services while:

(i) Under the influence of alcohol; or

(ii) 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
amounts or without valid medical indication;

(9) Promotes the sale of services, drugs, devices, appliances, or goods to a
patient so as to exploit the patient for financial gain;

1 (10) Willfully makes or files a false report or record in the practice of
2 polysomnography;

3 (11) 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
5 to file or record a report;

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 (14) Knowingly makes a misrepresentation while practicing
12 polysomnography;

13 (15) Knowingly practices polysomnography with an unauthorized individual
14 or aids an unauthorized individual in the practice of polysomnography;

15 (16) Knowingly delegates a polysomnographic duty to an unlicensed
16 individual;

17 (17) Offers, undertakes, or agrees to cure or treat disease by a secret
18 method, treatment, or medicine;

19 (18) 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
21 States uniformed services or the U.S. Department of Veterans Affairs for an act that would
22 be grounds for disciplinary action under the Board's disciplinary statutes;

23 (19) Fails to meet appropriate standards for the delivery of
24 polysomnographic services performed in a hospital sleep laboratory or a stand-alone sleep
25 center;

26 (20) Knowingly submits false statements to collect fees for which services
27 are not provided;

28 (21) (i) Has been subject to investigation or disciplinary action by a
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:

32 1. Surrendered the license, if any, issued by the state or
33 country; or

14-5D-05.

(F) A QUORUM OF THE COMMITTEE CONSISTS OF SIX MEMBERS.

14-5D-07.

(a) Except as otherwise provided in this [subtitle] **TITLE**, an individual shall be licensed by the Board before the individual may practice athletic training in the State.

(b) This section does not apply to:

[(1) An individual employed by the federal government as an athletic trainer while the individual is practicing within the scope of that employment;

(2)] **(1)** An individual employed by or under contract with an entity located in another state who represents that entity:

(i) At an athletic event in the State;

(ii) For a period of time not to exceed 45 days within a calendar year;

and

(iii) By providing athletic training services to individuals representing the entity at the event; or

[(3)] **(2)** A student enrolled in an education program that meets the criteria of [§ 14-5D-08(c)(2)] **§ 14-5D-08(A)(2)** of this subtitle while engaged in an unpaid, clinical educational experience of athletic training.

14-5D-08.

[(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.

(b) The applicant shall:

(1) Be of good moral character;

(2) Be at least 18 years old; and

(3) Complete a criminal history records check in accordance with § 14-308.1 of this title.]

[(c)] **(A)** [The] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS TITLE, AN** applicant shall:

(1) Have a current certification by a national certifying board approved by the Board; **AND**

(2) Have received a bachelor's or master's degree from an athletic training educational program that is accredited by the Commission on Accreditation of Athletic Training Education or its successor[;

(3) Demonstrate oral and written competency in English as required by the Board; and

(4) Meet any other requirements established by the Board].

[(d)] (B) The Board shall waive the education requirements under this section if an individual was certified by the National Athletic Trainers' Association Board of Certification, Inc., on or before October 1, 2012, and is currently in good standing.

14-5D-10.

(a) An athletic trainer license authorizes the licensee to practice athletic training services **IN THE STATE** while the license is effective.

14-5D-11.1.

(a) Except as otherwise provided in this [subtitle] **TITLE**, a licensed physician may not employ or supervise an individual practicing athletic training without a license or without an approved evaluation and treatment protocol.

(b) Except as otherwise provided in this [subtitle] **TITLE**, a hospital, an institution, an alternative health system, or any other employer may not employ an individual practicing athletic training without a license or without an approved evaluation and treatment protocol.

14-5D-14.

(a) Subject to the hearing provisions of § 14-405 of this title, a disciplinary panel, 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, if the [applicant or] licensee:

(1) Fraudulently or deceptively obtains or attempts to obtain a license for the [applicant,] licensee[, or for another;

(2) Fraudulently or deceptively uses a license;

(3) Is guilty of unprofessional or immoral conduct in the practice of athletic training;

(4) Is professionally, physically, or mentally [incompetent] **UNABLE TO CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

(5) Abandons a patient;

(6) Habitually is intoxicated;

(7) Is addicted to, or habitually abuses, any narcotic or controlled dangerous substances as defined in § 5–101 of the Criminal Law Article;

(8) Provides professional services while:

(i) Under the influence of alcohol; or

(ii) 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 amounts or without valid medical indication;

(9) Promotes the sale of services, drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;

(10) Willfully makes or files a false report or record in the practice of athletic training;

(11) Willfully fails to file or record any report as required under law, willfully impedes or obstructs the filing or recording of the report, or induces another to fail to file or record the report;

(12) Breaches patient confidentiality;

(13) Pays or agrees to pay any sum or provide any form of remuneration or 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 bringing or referring a patient;

(14) Knowingly makes a misrepresentation while practicing athletic training;

(15) Knowingly practices athletic training with an unauthorized individual or aids an unauthorized individual in the practice of athletic trainer services;

(16) Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine;

(17) Is disciplined by a licensing, certifying, or disciplinary authority or is convicted or disciplined by a court of any state or country or is disciplined by any branch of the United States uniformed services or the [Veterans Administration] **U.S.**

1 **DEPARTMENT OF VETERANS AFFAIRS** for an act that would be grounds for disciplinary
2 action under this section;

3 (18) Fails to meet appropriate standards for the delivery of athletic training
4 services;

5 (19) Knowingly submits false statements to collect fees for which services
6 have not been provided;

7 (20) (i) Has been subject to investigation or disciplinary action by a
8 licensing or disciplinary authority or by a court of any state or country for an act that would
9 be grounds for disciplinary action under the Board's disciplinary statutes; and

10 (ii) Has:

11 1. Surrendered the license issued by the state or country; or

12 2. Allowed the license issued by the state or country to expire
13 or lapse;

14 (21) Knowingly fails to report suspected child abuse in violation of § 5–704
15 of the Family Law Article;

16 (22) Sells, prescribes, gives away, or administers drugs for illegal or
17 illegitimate medical purposes;

18 (23) Practices or attempts to practice beyond the authorized scope of
19 practice;

20 (24) Refuses, withholds from, denies, or discriminates against an individual
21 with regard to the provision of professional services for which the licensee is licensed and
22 qualified to render because the individual is HIV positive;

23 (25) Practices or attempts to practice an athletic training procedure or uses
24 or attempts to use athletic training equipment if the applicant or licensee has not received
25 education and training in the performance of the procedure or the use of the equipment;

26 (26) Fails to cooperate with a lawful investigation conducted by the Board
27 or a disciplinary panel;

28 (27) Fails to practice under the supervision of a physician or violates the
29 approved evaluation and treatment protocol;

30 (28) Violates an order of the Board or a disciplinary panel, including any
31 condition of probation;

(29) Fails to complete a criminal history records check under [§ 14–308.1] §
14–302 of this title; or

(30) Performs dry needling without the approval of the Board issued under
§ 14–5D–11.4 of this subtitle.

14–5D–17.

Unless authorized to practice athletic training under this [subtitle] TITLE, a person
may not:

(1) Practice athletic training in this State;

(2) Attempt to practice or offer to practice athletic training in this State;

(3) Represent to the public by title, by description of services, methods, or
procedures, or otherwise, that the person is authorized to practice athletic training in this
State; or

(4) Use the abbreviation “A.T.”, “A.T.L.”, “L.A.T.”, or any other words,
letters, or symbols with the intent to represent that the person practices athletic training.

14–5E–01.

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

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

(1) Enrolled in an accredited educational program to qualify for a license
under this subtitle; and

(2) Performing perfusion services within the accredited program under the
supervision of a licensed perfusionist and without compensation.

14–5E–06.

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

14–5E–08.

(a) Except as otherwise provided in this [subtitle] TITLE, on or after October 1,
2013, an individual shall be licensed by the Board before the individual may practice
perfusion in this State.

(b) This section does not apply to a student enrolled in an education program under [§ 14-5E-09(c)(2)] **§ 14-5E-09(2)** of this subtitle while practicing perfusion in that program.

14-5E-09.

[(a) To qualify for a license, an applicant shall be an individual who meets the requirements of this section.

(b) The applicant shall:

(1) Be of good moral character;

(2) Be at least 18 years old; and

(3) Complete a criminal history records check in accordance with § 14-308.1 of this title.

(c) An] **TO QUALIFY FOR A LICENSE, IN ADDITION TO THE REQUIREMENTS UNDER § 14-301 OF THIS TITLE, AN** applicant for a license to practice perfusion shall:

(1) (i) Submit to the Board satisfactory evidence of certification as a certified perfusionist or other national certification approved by the Board; and

(ii) Meet any other educational or clinical requirements established by the Committee and approved by the Board; or

(2) (i) Submit to the Board satisfactory evidence of graduation from a perfusion educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs, or the Commission's predecessor or successor; and

(ii) Meet any other educational or clinical requirements established by the Committee and approved by the Board.

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.

14-5E-13.

[(a) (1) A license expires on a date set by the Board, unless the license is renewed for an additional term as provided in this section.

(2) The term of a license issued by the Board may not exceed 3 years.

(b) At least 1 month before a license expires, the Board shall send to the licensed perfusionist a renewal notice that states:

(1) The date on which the current license expires;

(2) The date by which the renewal application must be received by the Board for the renewal to be issued and sent before the license expires;

(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 THE 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:

(i) Otherwise is entitled to be licensed;

(ii) Is of good moral character;

(iii) Pays to the Board a renewal fee set by the Board; and

(iv) Except as provided in paragraph (2) of this subsection, submits to the Board:

1. A renewal application on the form that the Board requires; and

2. Satisfactory evidence of compliance with any continuing education or competency requirements and other requirements set under this section for license renewal.]

[(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 evidence of a passing score on 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.

1 [(d) In addition to any other qualifications and requirements established by the
2 Board, the Board shall establish continuing education or competency requirements as a
3 condition of the renewal of a license under this section.]

4 [(e)] (C) (1) The Board shall renew the license of each licensee who meets the
5 requirements of this section **AND § 14-306 OF THIS TITLE.**

6 (2) The Board may not renew the license of a licensee who fails to submit
7 satisfactory evidence of a passing score on the examination as required under subsection
8 [(c)(2)] (B) of this section.

9 [(f) The Board shall reinstate the license of an individual who has failed to renew
10 the license for any reason if the individual:

11 (1) Applies for reinstatement after the date the license expires;

12 (2) Meets the renewal requirements of this section; and

13 (3) Pays to the Board the reinstatement fee set by the Board.

14 (g) (1) Beginning October 1, 2016, the Board shall require a criminal history
15 records check in accordance with § 14-308.1 of this title for:

16 (i) Renewal applicants as determined by regulations adopted by the
17 Board; and

18 (ii) Each former licensee who files for reinstatement under
19 subsection (f) of this section.

20 (2) On receipt of the criminal history record information of a licensee
21 forwarded to the Board in accordance with § 14-308.1 of this title, in determining whether
22 disciplinary action should be taken, based on the criminal history record information,
23 against a licensee who renewed or reinstated a license, the Board shall consider:

24 (i) The age at which the crime was committed;

25 (ii) The nature of the crime;

26 (iii) The circumstances surrounding the crime;

27 (iv) The length of time that has passed since the crime;

28 (v) Subsequent work history;

29 (vi) Employment and character references; and

(vii) Other evidence that demonstrates whether the licensee poses a threat to the public health or safety.

(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.

(h) A disciplinary panel may impose a civil penalty of up to \$100 per continuing education credit in lieu of a sanction under § 14–5E–16 of this subtitle, for a first offense for failure of a licensee to obtain the continuing education credits required by the Board.]

14–5E–14.

[(a) (1) A licensed perfusionist shall notify the Board in writing of a change in name or address within 60 days after the change.

(2) A licensed perfusionist who fails to comply with the requirements of paragraph (1) of this subsection is subject to an administrative penalty of \$100.]

[(b)] Each licensed perfusionist shall:

(1) Keep a copy of the license in the licensee's employment file; and

(2) Make the license available for inspection on request.

14–5E–16.

(a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, on the affirmative vote of a majority of the 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, if the [applicant or] licensee:

(1) Fraudulently or deceptively obtains or attempts to obtain a license for the [applicant or] licensee or for another;

(2) Fraudulently or deceptively uses a license;

(3) Is guilty of unprofessional or immoral conduct in the practice of perfusion;

(4) Is professionally, physically, or mentally [incompetent] **UNABLE TO CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

(5) Abandons a patient;

(6) Is habitually intoxicated;

1 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous
2 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 (ii) Using any narcotic or controlled dangerous substance as defined
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;

8 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a
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
11 perfusion;

12 (11) Willfully fails to file or record any report as required under law,
13 willfully impedes or obstructs the filing or recording of a report, or induces another to fail
14 to file or record a report;

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 person for bringing or referring a patient or accepts or agrees to
18 accept any sum or any form of remuneration or material benefit from an individual for
19 bringing or referring a patient;

20 (14) Knowingly makes a misrepresentation while practicing perfusion;

21 (15) Knowingly practices perfusion with an unauthorized individual or aids
22 an unauthorized individual in the practice of perfusion;

23 (16) Knowingly delegates a perfusion duty to an unlicensed individual;

24 (17) Offers, undertakes, or agrees to cure or treat disease by a secret
25 method, treatment, or medicine;

26 (18) Is disciplined by a licensing or disciplinary authority or is convicted or
27 disciplined by a court of any state or country or is disciplined by any branch of the United
28 States uniformed services or the U.S. Department of Veterans Affairs for an act that would
29 be grounds for disciplinary action under the Board's disciplinary statutes;

30 (19) Fails to meet appropriate standards for the delivery of perfusion
31 services;

(20) Knowingly submits false statements to collect fees for which services are not provided;

(21) (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

(ii) Has:

1. Surrendered the license, if any, issued by the state or country; or

2. Allowed the license, if any, issued by the state or country to expire or lapse;

(22) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;

(23) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate medical purposes;

(24) Practices or attempts to practice beyond the authorized scope of practice;

(25) 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;

(26) Practices or attempts to practice a perfusion procedure or uses or attempts to use perfusion equipment if the applicant or licensee has not received education and training in the performance of the procedure or the use of the equipment;

(27) Fails to cooperate with a lawful investigation of the Board or a disciplinary panel; or

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

14–5E–20.

Except as otherwise provided in this [subtitle] TITLE, a person may not practice, attempt to practice, or offer to practice perfusion in this State unless licensed to practice perfusion by the Board.

14–5E–21.

(a) Unless authorized to practice perfusion under this [subtitle] **TITLE**, a person may not represent to the public by title, by description of services, methods, or procedures, or otherwise, that the person is authorized to practice perfusion in this State.

(b) Unless authorized to practice perfusion under this [subtitle] **TITLE**, a person may not use the titles “certified clinical perfusionist”, “licensed perfusionist”, or “licensed clinical perfusionist”, the abbreviations “C.C.P.”, “L.P.”, or “L.C.P.”, or any other words, letters, or symbols with the intent to represent that the person practices perfusion, holds a certificate as a certified clinical perfusionist issued by the American Board of Cardiovascular Perfusion or its successor entity, or holds a license as a licensed perfusionist issued by the Board.

14–5E–22.

A person may not provide, attempt to provide, offer to provide, or represent that the person provides perfusion services unless the perfusion is provided by an individual who is authorized to practice perfusion under this [subtitle] **TITLE**.

14–5F–07.

(G) A QUORUM OF THE COMMITTEE CONSISTS OF THREE MEMBERS.

14–5F–10.

(a) Beginning March 1, 2016, except as otherwise provided in this [subtitle] **TITLE**, an individual shall be licensed by the Board before the individual may practice naturopathic medicine in the State.

(b) This section does not apply to:

[(1) An individual who is employed by the United States government to practice naturopathic medicine while practicing within the scope of that employment;

(2)] (1) A student who is enrolled in an approved naturopathic medical program while the student is participating in a course of study under the supervision of a licensed naturopathic doctor or a licensed professional in the field of study;

[(3)] (2) An individual who is licensed in another state to practice naturopathic medicine and whose practice of naturopathic medicine in the State is limited to examination, recommendation, or testimony in litigation; or

[(4)] (3) A naturopathic doctor licensed by and residing in another jurisdiction, if the naturopathic doctor is engaged in consultation with the naturopathic doctor in the State about a particular patient and does not direct patient care.

(c) The Board may not discriminate, in any manner, against any applicant or licensee for reason of sex, age, race, color, creed, sexual orientation, gender identity, or national origin.

14–5F–11.

(a) **[To] IN ADDITION TO THE REQUIREMENTS UNDER § 14–301 OF THIS TITLE, TO** qualify for a license, an **[applicant shall be an individual who meets the requirements of this section.**

(b) The applicant shall be of good moral character.

(c) The] applicant shall be at least 21 years old.

[(d)] (B) Except as provided in § 14–5F–12 of this subtitle, the applicant shall:

(1) Have a doctorate in naturopathic medicine from an approved naturopathic medical program; and

(2) Pass the competency–based national naturopathic licensing examination Part I and Part II administered by the North American Board of Naturopathic Examiners, or its successor agency that has been nationally recognized to administer a naturopathic examination that represents federal standards of education and training.

[(e)] (C) An applicant shall be physically and mentally capable of safely practicing naturopathic medicine with or without reasonable accommodation.

[(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 authority.

[(g)] An applicant shall complete a criminal history records check in accordance with § 14–308.1 of this title.]

14–5F–12.

To apply for a license, an applicant shall:

[(1)] Complete a criminal history records check in accordance with § 14–308.1 of this title;

(2) Submit an application to the Board on a form that the Board requires;

(3) Pay to the Board an application fee set by the Board;]

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 (i) 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 (ii) 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 (ii) Includes the name and license number of the physician with
14 whom the applicant has a collaboration and consultation agreement;

15 (iii) 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
22 has been named.

23 14-5F-15.

24 **[(a)] (1)** The term of a license issued by the Board may not exceed 3 years.

25 (2) A license expires on a date set by the Board, unless the license is
26 renewed as provided in this section.

27 **(b)** At least 1 month before the license expires, the Board shall send to the licensee
28 a renewal notice that states:

29 (1) The date on which the current license expires;

30 (2) The date by which the renewal application must be received by the
31 Board for the renewal to be issued and mailed before the license expires; and

32 (3) The amount of the renewal fee.

(c) The Board shall renew the license of a licensee who:

(1) Submits a renewal application on the form that the Board requires;

(2) Is of good moral character;

(3) Pays a renewal fee set by the Board;

(4) Is otherwise entitled to be licensed;

(5) Meets the continuing education requirements adopted by the Board;

and

(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.

[(d) (1) Beginning October 1, 2016, the Board shall require a criminal history records check in accordance with § 14-308.1 of this title for:

(i) Renewal applicants as determined by regulations adopted by the Board; and

(ii) Each former licensee who files for reinstatement under § 14-5F-16(b) of this subtitle.

(2) On receipt of the criminal history record information of a licensee forwarded 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, against a licensee who renewed or reinstated a license, the Board shall consider:

(i) The age at which the crime was committed;

(ii) The nature of the crime;

(iii) The circumstances surrounding the crime;

(iv) The length of time that has passed since the crime;

(v) Subsequent work history;

(vi) Employment and character references; and

(vii) Other evidence that demonstrates whether the licensee poses a threat to the public health or safety.

(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.

(e) A disciplinary panel may impose a civil penalty of up to \$100 per continuing education credit in lieu of a sanction under § 14–5F–18 of this subtitle, for a first offense for failure of a licensee to obtain the continuing education credits required by the Board.]

14–5F–16.

(a) [(1)] The Board may place a licensee on inactive status if the licensee submits to the Board:

[(i)] (1) An application for inactive status on the form required by the Board; and

[(ii)] (2) The inactive status fee set by the Board.

[(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:

[(i)] (1) Satisfactory evidence of compliance with the requirements of [§ 14–308.1] § 14–302 of this title;

[(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:

(1) Meets the renewal requirements of § 14–5F–15 of this subtitle;

(2) Pays to the Board a reinstatement fee set by the Board; and

(3) Submits to the Board satisfactory evidence of compliance with the qualifications and requirements adopted by the Board under this subtitle for license reinstatements.]

14–5F–18.

(a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, 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;

(2) Has been found to be mentally [incompetent] **UNABLE TO CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES** by a physician if [the mental incompetence impairs the ability of the applicant or licensee to] **THE LICENSEE’S ABILITY TO** undertake the practice of naturopathic medicine in a manner consistent with the safety of the public **IS IMPAIRED**;

(3) Has entered into a consent agreement with or has been assessed an administrative penalty by a licensing authority in another state;

(4) Fraudulently or deceptively obtains, attempts to obtain, or uses a license for [the applicant,] the licensee[,] or another;

(5) Has a license revoked or suspended, or was otherwise acted against, including the denial of licensure, by the licensing authority of another state;

(6) Uses false, deceptive, or misleading advertising;

(7) Advertises, practices, or attempts to practice under a name other than the [applicant’s or] licensee’s own name;

(8) Aids, assists, employs, or advises any unlicensed individual to practice naturopathic medicine in violation of this subtitle;

(9) Willfully makes or files a false report or record in the practice of naturopathic medicine;

(10) Willfully or negligently fails to file a report or record as required by law, willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report;

(11) Pays or receives any commission, bonus, kickback, or rebate, or engages in any split-fee arrangement in any form with a licensed physician, organization, agency, or other person, either directly or indirectly, for patients referred to health care providers;

(12) Exercises influence within a patient–doctor relationship for purposes of engaging a patient in sexual activity;

(13) Engages in sexual misconduct with a patient;

(14) Fails to keep written medical records justifying the course of treatment of a patient;

(15) Engages in an act or omission that does not meet generally accepted standards of practice of naturopathic medicine or of safe care of patients, whether or not actual injury to a patient is established;

(16) Delegates professional responsibilities to an individual when the licensee delegating the responsibilities knows or has reason to know that the individual is not qualified by training, experience, or licensure to perform the responsibilities;

(17) Promotes the sale of services, drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;

(18) Breaches patient confidentiality;

(19) Is guilty of unprofessional or immoral conduct in the practice of naturopathic medicine;

(20) Offers, undertakes, or agrees to cure or treat a disease by a secret method, treatment, or medicine;

(21) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;

(22) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate purposes;

(23) 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;

(24) Fails to cooperate with a lawful investigation of the Board;

(25) Abandons a patient;

(26) Violates any provision of this title or any regulation adopted by the Board; or

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

14–5F–21.

1 [(a) The Board shall give notice and hold a hearing in accordance with the
2 Administrative Procedure Act.

3 (b) The individual may be represented at the hearing by counsel.

4 (c) Over the signature of an officer or the administrator of the Board, the Board
5 or a disciplinary panel may issue subpoenas and administer oaths in connection with any
6 investigation under this subtitle and any hearings or proceedings before the Board or a
7 disciplinary panel.

8 (d) If, without lawful excuse, a person disobeys a subpoena from the Board or a
9 disciplinary panel or an order by the Board or a disciplinary panel to take an oath or to
10 testify or answer a question, then, on petition of the Board, a court of competent jurisdiction
11 may punish the person as for contempt of court.

12 (e) If, after due notice, the individual against whom the action is contemplated
13 fails or refuses to appear, the Board or a disciplinary panel may hear and determine the
14 matter.

15 (f)] If, after a hearing **IN ACCORDANCE WITH THE ADMINISTRATIVE**
16 **PROCEDURE ACT**, an individual is found in violation of § 14–5F–18 of this subtitle, the
17 individual shall pay the costs of the hearing as specified in a regulation adopted by the
18 Board.

19 14–5F–24.

20 (c) A disciplinary panel may not reinstate a surrendered or revoked license that
21 has been surrendered or revoked for a period of more than 1 year unless the licensee:

22 (1) Meets the requirements for reinstatement as established under this
23 title; and

24 (2) Completes a criminal history records check in accordance with [§
25 14–308.1] **§ 14–302** of this title.

26 14–5F–29.

27 (a) Except as otherwise provided in this [subtitle] **TITLE**, an individual may not
28 practice, attempt to practice, or offer to practice naturopathic medicine in this State without
29 a license.

30 14–5G–08.

31 (a) Except as otherwise provided in this [subtitle] **TITLE**, on or after January 1,
32 2024, an individual shall be licensed by the Board before the individual may practice
33 genetic counseling in the State.

(b) This section does not apply to:

[(1) An individual who is employed by the United States government to practice genetic counseling while practicing within the scope of that employment;]

[(2)] (1) An individual who resides in and holds an active license in another state if the individual is engaged in consultation with a physician or genetic counselor licensed in the State about a particular patient and the individual:

(i) Does not order or coordinate genetic laboratory tests or other diagnostic studies; and

(ii) Does not provide consultation in the State for more than a total of 10 patients within a calendar year; or

[(3)] (2) A student enrolled in a genetic counseling training program that is accredited by a national accrediting organization recognized by the Board in regulations while the student is practicing genetic counseling in the program and doing the assigned duties at any office of a licensed physician or genetic counselor, hospital, clinic, or similar facility.

14-5G-09.

(a) To qualify for a license to practice genetic counseling, an applicant shall be an individual who meets the requirements of this section **AND § 14-301 OF THIS TITLE**.

(b) [The applicant must be of good moral character.

(c) The applicant must be at least 18 years old.

[(d)] The applicant must be a graduate of an appropriate education program 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.

[(f)] (D) If an applicant does not meet the requirement under subsection [(e)] (C) of this section, the applicant may qualify for licensure if the applicant:

(1) Has worked as a genetic counselor for:

(i) At least 10 years before January 1, 2024; and

(ii) At least 5 consecutive years immediately preceding the date on which the applicant submits the application for licensure;

(2) Has graduated from an education program approved by the Board;

(3) Submits to the Board three letters of recommendation from licensed physicians who have been licensed for at least 5 years or certified genetic counselors eligible for licensure and who:

(i) Have worked with the applicant in an employment or professional setting for 3 years before the applicant submits the application for licensure; and

(ii) Can attest to the applicant's competency in providing genetic counseling services; and

(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.

14–5G–14.

(h) A supervised genetic counselor is subject to discipline under [§ 14–5G–19] § 14–5G–18 of this subtitle to the same extent as a genetic counselor.

14–5G–17.

A disciplinary panel may issue a cease and desist order for[:

(1) Practicing genetic counseling without a license or with an unauthorized person; or

(2) Supervising] SUPERVISING or aiding an unauthorized person in the practice of genetic counseling.

14–5G–18.

(a) Subject to the hearing provisions of § 14–405 of this title, a disciplinary panel, on the affirmative vote of a majority of the 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, if the [applicant or] licensee:

1 (1) Fraudulently or deceptively obtains or attempts to obtain a license for
2 the applicant or licensee or for another;

3 (2) Fraudulently or deceptively uses a license;

4 (3) Is guilty of unprofessional or immoral conduct while practicing genetic
5 counseling;

6 (4) Is professionally, physically, or mentally [incompetent] **UNABLE TO**
7 **CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES**;

8 (5) Abandons a patient;

9 (6) Is habitually intoxicated;

10 (7) Is addicted to or habitually abuses any narcotic or controlled dangerous
11 substance as defined in § 5–101 of the Criminal Law Article;

12 (8) Provides professional services while:

13 (i) Under the influence of alcohol; or

14 (ii) Using any narcotic or controlled dangerous substance as defined
15 in § 5–101 of the Criminal Law Article or any other drug that is in excess of therapeutic
16 amounts or without valid medical indication;

17 (9) Promotes the sale of services, drugs, devices, appliances, or goods to a
18 patient so as to exploit the patient for financial gain;

19 (10) Willfully makes or files a false report or record in the practice of genetic
20 counseling;

21 (11) Willfully fails to file or record any report as required under law,
22 willfully impedes or obstructs the filing or recording of a report, or induces another to fail
23 to file or record a report;

24 (12) Breaches patient confidentiality;

25 (13) Pays or agrees to pay any sum or provide any form of remuneration or
26 material benefit to any person for bringing or referring a patient or accepts or agrees to
27 accept any sum or any form of remuneration or material benefit from an individual for
28 bringing or referring a patient;

29 (14) Knowingly makes a misrepresentation while practicing genetic
30 counseling;

(15) Knowingly practices genetic counseling with an unauthorized individual or aids an unauthorized individual in practicing genetic counseling;

(16) Knowingly delegates a genetic counseling duty to an unlicensed individual;

(17) [Grossly overutilizes] **ESTABLISHES A PATTERN OF OVERUTILIZATION OF** health care services;

(18) Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine;

(19) Is disciplined by a licensing or disciplinary authority or is convicted or disciplined by a court of any state or country or is disciplined by any branch of the United 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;

(20) Fails to meet appropriate standards for the delivery of genetic counseling services;

(21) Knowingly submits false statements to collect fees for which services are not provided;

(22) (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

(ii) Has:

1. Surrendered the license, if any, issued by the state or country; or

2. Allowed the license, if any, issued by the state or country to expire or lapse;

(23) Knowingly fails to report suspected child abuse in violation of § 5–704 of the Family Law Article;

(24) Practices or attempts to practice beyond the authorized scope of practice;

(25) 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;

(26) Practices or attempts to practice genetic counseling procedures or uses or attempts to use genetic assessments if the applicant or licensee has not received

1 education and training in the performance of the procedure or the use of the genetic
2 assessment;

3 (27) Fails to cooperate with a lawful investigation of the Board or a
4 disciplinary panel;

5 (28) Fails to complete a criminal history records check under [§ 14–308.1] §
6 **14–302** of this title; or

7 (29) Violates any provision of this title or any rule or regulation pertaining
8 to genetic counseling that is adopted by the Board, the State, or the federal government.

9 14–5G–23.

10 Except as otherwise provided in this [subtitle] **TITLE**, a person may not practice,
11 attempt to practice, or offer to practice genetic counseling in this State unless licensed to
12 practice genetic counseling by the Board.

13 14–5G–24.

14 (a) Unless authorized to practice genetic counseling under this [subtitle] **TITLE**,
15 a person may not represent to the public by title, by description of services, methods, or
16 procedures, or otherwise, that the person is authorized to practice genetic counseling in this
17 State.

18 (b) Unless authorized to practice genetic counseling under this [subtitle] **TITLE**,
19 a person may not use the titles “genetic counselor”, “licensed genetic counselor”, “certified
20 genetic counselor”, “gene counselor”, “genetic consultant”, “genetic associate”, or any words,
21 letters, or symbols with the intent to imply that the person practices genetic counseling or
22 is a certified genetic counselor or licensed genetic counselor.

23 14–5G–25.

24 A person may not provide, attempt to provide, offer to provide, or represent that the
25 person provides genetic counseling services unless the genetic counseling is provided by an
26 individual who is authorized to practice genetic counseling under this [subtitle] **TITLE**.

27 14–5G–26.

28 (a) Except as otherwise provided in this [subtitle] **TITLE**, a licensed genetic
29 counselor or a licensed physician may not employ or supervise an individual practicing
30 genetic counseling without a license.

31 (b) Except as otherwise provided in this [subtitle] **TITLE**, a hospital, related
32 institution, alternative health system, or employer may not employ an individual practicing
33 genetic counseling without a license.

SUBTITLE 5H. PHYSICIAN ASSISTANTS.

14-5H-01.

(a) In this [title] **SUBTITLE** the following words have the meanings indicated.

[(d) “Board” means the State Board of Physicians, established under § 14-201 of 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.]

[(j) **(I)** “Dispense” or “dispensing” has the meaning stated in § 12-101 of this article.

[(k) **(J)** “Drug sample” means a unit of a prescription drug that is intended to promote the sale of the drug and is not intended for sale.

[(l) **(K)** “Hospital” means:

(1) A hospital as defined under § 19-301 of the Health – General Article;

(2) A comprehensive care facility that:

(i) Meets the requirements of a hospital-based skilled nursing facility under federal law; and

(ii) Offers acute care in the same building; and

(3) An emergency room that is physically connected to a hospital or a freestanding medical facility that is licensed under Title 19, Subtitle 3A of the Health – General Article.

[(m)] (L) “License” means a license issued by the Board to a physician assistant under this title.

[(n)] (M) “National certifying examination” means the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants or its successor.

[(o)] (N) “Physician assistant” means an individual who is licensed under this title to practice medicine with physician supervision.

[(p)] (O) “Practice as a physician assistant” means the performance of medical acts that are:

- (1) Delegated by a supervising physician to a physician assistant;
- (2) Within the supervising physician’s scope of practice; and
- (3) Appropriate to the physician assistant’s education, training, and experience.

[(q)] (P) “Prescriptive authority” means the authority delegated by a primary or alternate supervising physician to a physician assistant to:

- (1) Prescribe and administer controlled dangerous substances, prescription drugs, medical devices, and the oral, written, or electronic ordering of medications; and
- (2) Dispense as provided under **[§ 15–302.2(b), (c), and (d)] § 14–5H–10(B), (C), AND (D)** of this **[title] SUBTITLE**.

[(r)] (Q) “Primary supervising physician” means a physician who:

- (1) Completes a delegation agreement that meets the requirements under **[§§ 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;
- (2) Acts as the physician responsible to ensure that a physician assistant practices medicine in accordance with this title and the regulations adopted under this title;
- (3) Ensures that a physician assistant practices within the scope of practice of the primary supervising physician or any designated alternate supervising physician; and

(4) Ensures that a list of alternate supervising physicians is maintained at the practice setting.

[(s)] (R) “Public health facility” means a site where clinical public health services are rendered under the auspices of the Department, a local health department in a county, or the Baltimore City Health Department.

[(t)] (S) “Starter dosage” means an amount of a drug sufficient to begin therapy:

(1) Of short duration of 72 hours or less; or

(2) Prior to obtaining a larger quantity of the drug to complete therapy.

[(u)] (T) (1) “Supervision” means the responsibility of a physician to exercise on-site supervision or immediately available direction for physician assistants performing delegated medical acts.

(2) “Supervision” includes physician oversight of and acceptance of direct 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.

14-5H-02.

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

(1) Nursing;

(2) Optometry;

(3) Physical therapy; or

(4) Psychology.

[(b)] This title does not limit the right of an individual to practice a health occupation that the individual is authorized to practice under this article.]

14-5H-03.

(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**.

(d) A hospital, related institution, alternative health care 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:

(1) The hospital, related institution, alternative health care system, or employer knows that the physician assistant is:

(i) In an alcohol or drug treatment program that is accredited by the Joint Commission [on the Accreditation of Healthcare Organizations] or is certified by the Department; or

(ii) Under the care of a health care practitioner who is competent and capable of dealing with alcoholism and drug abuse;

(2) The hospital, related institution, alternative health care system, or employer is able to verify that the physician assistant remains in the treatment program until discharge; and

(3) The action or condition of the physician assistant has not caused injury to any person while the physician assistant is practicing as a licensed physician assistant.

(e) (1) If the physician assistant enters, or is considering entering, an alcohol or drug treatment program that is accredited by the Joint Commission [on Accreditation of Healthcare Organizations] or that is certified by the Department, the physician assistant shall notify the hospital, related institution, alternative health care system, or employer of the physician assistant's decision to enter the treatment program.

14–5H–06.

(a) In addition to the powers set forth elsewhere in this title, the Committee, on its initiative or on the Board's request, may:

(1) Recommend to the Board regulations for carrying out the provisions of this title;

(2) Recommend to the Board approval, modification, or disapproval of an application for licensure or a delegation agreement;

(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 or under [§ 14–404 of this article] § 14–516 OF THIS TITLE; and

(4) Report to the Board any alleged unauthorized practice of a physician assistant.

14-5H-07.

(c) Patient services that may be provided by a physician assistant include:

(1) (i) Taking complete, detailed, and accurate patient histories; and

(ii) Reviewing patient records to develop comprehensive medical status reports;

(2) Performing physical examinations and recording all pertinent patient data;

(3) Interpreting and evaluating patient data as authorized by the primary or alternate supervising physician for the purpose of determining management and treatment of patients;

(4) Initiating requests for or performing diagnostic procedures as indicated by pertinent data and as authorized by the supervising physician;

(5) Providing instructions and guidance regarding medical care matters to patients;

(6) Assisting the primary or alternate supervising physician in the delivery of services to patients who require medical care in the home and in health care institutions, including:

(i) Recording patient progress notes;

(ii) Issuing diagnostic orders; and

(iii) Transcribing or executing specific orders at the direction of the primary or alternate supervising physician; and

(7) Exercising prescriptive authority under a delegation agreement and in accordance with [§ 15-302.2] § 14-5H-10 of this subtitle.

(f) (1) Except as provided in [subsection (g) of this section, the following individuals may practice as a physician assistant without a license:

(1) A] PARAGRAPH (2) OF THIS SUBSECTION, A physician assistant student enrolled in a physician assistant educational program that is accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor and approved by the Board[; or

(2) A physician assistant employed in the service of the federal government while performing duties incident to that employment] **MAY PRACTICE AS A PHYSICIAN ASSISTANT WITHOUT A LICENSE.**

[(g)] (2) A physician may not delegate prescriptive authority to a physician assistant student in a training program that is accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor.

[(h)] (G) (1) If a medical act that is to be delegated under this section is a part of the practice of a health occupation that is regulated under this article by another board, any rule or regulation concerning that medical act shall be adopted jointly by the State Board of Physicians and the board that regulates the other health occupation.

(2) If the two boards cannot agree on a proposed rule or regulation, the proposal shall be submitted to the Secretary for a final decision.

14-5H-08.

(c) (2) (ii) 1. Before a physician assistant may perform X-ray duties authorized under [§ 14-306(e)] **§ 14-503(E)** of this [article] **TITLE** in the medical office of the physician delegating the duties, a primary supervising physician shall obtain the Board's approval of a delegation agreement that includes advanced duties in accordance 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 § 14-516** 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.

(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.

14-5H-09.

(a) If a delegation agreement does not include advanced duties or the advanced duties have been approved under ~~[\S 15-302(c)(1)]~~ **\S 14-5H-08(C)(1)** of this subtitle, a physician assistant may assume the duties under a delegation agreement on the date that 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 ~~[\S 15-302(c)(1)]~~ **\S 14-5H-08(C)(1)** of this subtitle has been executed and submitted to the Board for its approval, but:

(1) The Committee has not made a recommendation to the Board; or

(2) The Board has not made a final decision regarding the delegation agreement.

~~14-5H-10.~~

(e) Before a physician assistant may renew a license for an additional 2-year term under ~~[\S 15-307]~~ **\S 14-306** of this [subtitle] **TITLE**, the physician assistant shall submit evidence to the Board of successful completion of 8 category 1 hours of pharmacology education within the previous 2 years.

~~14-5H-12.~~

(a) ~~[To]~~ **IN ADDITION TO THE REQUIREMENTS UNDER \S 14-301 OF THIS TITLE, TO** qualify for a license, an applicant shall:

[(1) Complete a criminal history records check in accordance with \S 14-308.1 of this article;

(2) Be of good moral character;

(3) Demonstrate oral and written competency in the English language as required by the Board;

(4) Be at least 18 years old; and

(5) (i) **(1)** Be a graduate of a physician assistant training program 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.

1 14-5H-14.

2 [(a)] Each licensee shall keep a license and delegation agreement for inspection at
3 the primary place of business of the licensee.

4 [(b) (1)] Each licensee shall give the Board written notice of any change of name
5 or address within 60 days of the date of the change.

6 (2) A licensee who fails to comply with this subsection is subject to an
7 administrative penalty of \$100.]

8 14-5H-15.

9 (a) [(1)] Except as otherwise provided under § 10-226 of the State Government
10 Article, before the Board takes any action to reject or modify a delegation agreement or
11 advanced duty, the Board shall give the licensee the opportunity for a hearing before the
12 Board.

13 [(2)] (B) The Board shall give notice and hold the hearing under Title 10,
14 Subtitle 2 of the State Government Article.

15 [(3)] (C) The Board may administer oaths in connection with any
16 proceeding under this section.

17 [(4)] (D) At least 14 days before the hearing, the hearing notice shall be
18 sent to the last known address of the applicant or licensee.

19 [(b)] Any licensee aggrieved under this subtitle by a final decision of the Board
20 rejecting or modifying a delegation agreement or advanced duty may petition for judicial
21 review as allowed by the Administrative Procedure Act.]

22 14-5H-16.

23 (a) Subject to the hearing provisions of [§ 15-315] **§ 14-405** of this [subtitle]
24 **TITLE**, a disciplinary panel, on the affirmative vote of a majority of the quorum, may
25 reprimand any physician assistant, place any physician assistant on probation, or suspend
26 or revoke a license if the physician assistant:

27 (1) Fraudulently or deceptively obtains or attempts to obtain a license for
28 the applicant or licensee or for another;

29 (2) Fraudulently or deceptively uses a license;

30 (3) Is guilty of:

31 (i) Immoral conduct in the practice of medicine; or

(ii) Unprofessional conduct in the practice of medicine;

(4) Is professionally, physically, or mentally [incompetent] **UNABLE TO CARRY OUT IMPORTANT PROFESSIONAL ACTIVITIES;**

(5) Solicits or advertises in violation of [§ 14–503] **§ 14–5H–13** of this [article] **SUBTITLE;**

(6) Abandons a patient;

(7) Habitually is intoxicated;

(8) Is addicted to, or habitually abuses, any narcotic or controlled dangerous substance as defined in § 5–101 of the Criminal Law Article;

(9) Provides professional services:

(i) While under the influence of alcohol; or

(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;

(10) Promotes the sale of drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;

(11) Willfully makes or files a false report or record in the practice of medicine;

(12) Willfully fails to file or record any medical report as required under law, willfully impedes or obstructs the filing or recording of the report, or induces another to fail to file or record the report;

(13) On proper request, and in accordance with the provisions of Title 4, Subtitle 3 of the Health – General Article, fails to provide details of a patient’s medical record to the patient, another physician, or hospital;

(14) Solicits professional patronage through an agent or other person or profits from the acts of a person who is represented as an agent of the physician;

(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;

1 (16) Agrees with a clinical or bioanalytical laboratory to make payments to
2 the laboratory for a test or test series for a patient, unless the licensed physician assistant
3 discloses on the bill to the patient or third-party payor:

4 (i) The name of the laboratory;

5 (ii) The amount paid to the laboratory for the test or test series; and

6 (iii) The amount of procurement or processing charge of the licensed
7 physician, if any, for each specimen taken;

8 (17) Makes a willful misrepresentation in treatment;

9 (18) Practices medicine with an unauthorized person or aids an
10 unauthorized person in the practice of medicine;

11 (19) [Grossly overutilizes] **ESTABLISHES A PATTERN OF**
12 **OVERUTILIZATION OF** health care services;

13 (20) Offers, undertakes, or agrees to cure or treat disease by a secret
14 method, treatment, or medicine;

15 (21) Is disciplined by a licensing or disciplinary authority or convicted or
16 disciplined by a court of any state or country or disciplined by any branch of the United
17 States uniformed services or the [Veterans' Administration] **U.S. DEPARTMENT OF**
18 **VETERANS AFFAIRS** for an act that would be grounds for disciplinary action under this
19 section;

20 (22) Fails to meet appropriate standards for the delivery of quality medical
21 and surgical care performed in an outpatient surgical facility, office, hospital, or any other
22 location in this State;

23 (23) Willfully submits false statements to collect fees for which services are
24 not provided;

25 (24) Was subject to investigation or disciplinary action by a licensing or
26 disciplinary authority or by a court of any state or country for an act that would be grounds
27 for disciplinary action under this section and the licensee ~~state or country, or;~~

28 (i) Surrendered the license issued by the state or country to the
29 state or country; or

30 (ii) Allowed the license issued by the state or country to expire or
31 lapse;

32 (25) Knowingly fails to report suspected child abuse in violation of § 5-704
33 of the Family Law Article;

1 (26) Fails to educate a patient being treated for breast cancer of alternative
2 methods of treatment as required by § 20–113 of the Health – General Article;

3 (27) Sells, prescribes, gives away, or administers drugs for illegal or
4 illegitimate medical purposes;

5 (28) Fails to comply with the provisions of § 12–102 of this article;

6 (29) Refuses, withholds from, denies, or discriminates against an individual
7 with regard to the provision of professional services for which the physician assistant is
8 licensed and qualified to render because the individual is HIV positive;

9 (30) Except as to an association that has remained in continuous existence
10 since July 1, 1963:

11 (i) Associates with a pharmacist as a partner or co-owner of a
12 pharmacy for the purpose of operating a pharmacy;

13 (ii) Employs a pharmacist for the purpose of operating a pharmacy;
14 or

15 (iii) Contracts with a pharmacist for the purpose of operating a
16 pharmacy;

17 (31) Except in an emergency life-threatening situation where it is not
18 feasible or practicable, fails to comply with the Centers for Disease Control and
19 Prevention's guidelines on universal precautions;

20 (32) Fails to display the notice required under [§ 14–415] **§ 14–519** of this
21 [article] **TITLE**;

22 (33) Fails to cooperate with a lawful investigation conducted by the Board
23 or a disciplinary panel;

24 (34) Is convicted of insurance fraud as defined in § 27–801 of the Insurance
25 Article;

26 (35) Is in breach of a service obligation resulting from the applicant's or
27 licensee's receipt of State or federal funding for the physician assistant's medical education;

28 (36) Willfully makes a false representation when seeking or making
29 application for licensure or any other application related to the practice of medicine;

30 (37) By corrupt means, threats, or force, intimidates or influences, or
31 attempts to intimidate or influence, for the purpose of causing any person to withhold or

change testimony in hearings or proceedings before the Board or a disciplinary panel or those otherwise delegated to the Office of Administrative Hearings;

(38) By corrupt means, threats, or force, hinders, prevents, or otherwise delays any person from making information available to the Board or a disciplinary panel in furtherance of any investigation of the Board or a disciplinary panel;

(39) Intentionally misrepresents credentials for the purpose of testifying or rendering an expert opinion in hearings or proceedings before the Board or a disciplinary panel or those otherwise delegated to the Office of Administrative Hearings;

(40) Fails to keep adequate medical records;

(41) Performs delegated medical acts beyond the scope of the delegation agreement filed with the Board or after notification from the Board that an advanced duty has been disapproved;

(42) Performs delegated medical acts without the supervision of a physician;

(43) Fails to complete a criminal history records check under [§ 14–308.1] § 14–302 of this [article] TITLE;

(44) Fails to comply with the requirements of the Prescription Drug Monitoring Program under Title 21, Subtitle 2A of the Health – General Article; or

(45) Fails to comply with any State or federal law pertaining to the practice as a physician assistant.

(C) IF, AFTER A HEARING UNDER § 14–405 OF THIS TITLE, A DISCIPLINARY PANEL FINDS THAT THERE ARE GROUNDS FOR DISCIPLINE UNDER SUBSECTION (A) OF THIS SECTION TO SUSPEND OR REVOKE A LICENSE OF A PHYSICIAN ASSISTANT, REPRIMAND A LICENSED PHYSICIAN ASSISTANT, OR PLACE THE LICENSED PHYSICIAN ASSISTANT ON PROBATION, THE DISCIPLINARY PANEL MAY IMPOSE A FINE SUBJECT TO THE BOARD’S REGULATIONS IN ADDITION TO SUSPENDING OR REVOKING THE LICENSE, REPRIMANDING THE LICENSEE, OR PLACING THE LICENSEE ON PROBATION.

(D) THE BOARD SHALL PAY ANY FINES COLLECTED UNDER THIS SECTION IN THE GENERAL FUND OF THE STATE.

(E) IN ADDITION TO ANY SANCTION AUTHORIZED UNDER THIS SUBTITLE, A DISCIPLINARY PANEL MAY REQUIRE A LICENSEE TO COMPLY WITH SPECIFIED TERMS AND CONDITIONS DETERMINED BY THE DISCIPLINARY PANEL.

14–5H–20.

(a) Except as otherwise provided in this [subtitle] **TITLE**, a licensed physician may not employ or supervise an individual practicing as a physician assistant who does not have a license.

(b) Except as otherwise provided in this [subtitle] **TITLE**, a hospital, related institution, alternative health care system, or employer may not employ an individual practicing as a physician assistant who does not have a license.

14-5H-21.

(a) A person who violates [§ 15-401 or § 15-402] **§ 14-5H-18 OR § 14-5H-19** of this subtitle:

(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

(2) Shall lose licensure as a physician assistant under this title.

(b) (1) In addition to the penalties under subsection (a) of this section, a person who violates [§ 15-401] **§ 14-5H-18** of this subtitle may be subject to a civil penalty assessed by a disciplinary panel in an amount not exceeding \$5,000.

(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.

(3) The Board shall pay any civil penalty collected under this subsection into the Board of Physicians Fund.

14-5H-22.

This [title] **SUBTITLE** may be cited as the “Maryland Physician Assistants Act”.

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.

Article – Transportation

13-616.

(a) (1) In this subtitle the following words have the meanings indicated.

(7) “Licensed physician assistant” means an individual who is licensed under Title [15] 14, **SUBTITLE 5H** of the Health Occupations Article to practice medicine with physician supervision.

SECTION 4. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Health Occupations

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:

SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE

(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.

SECTION 5. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Tax – General

10–752.

(a) (1) In this section the following words have the meanings indicated.

(3) “Health care practitioner” means an individual who:

(i) is licensed to practice medicine under Title 14 of the Health Occupations Article;

(ii) is a physician assistant, as defined in [§ 15–101] **§ 14–5H–01** of the Health Occupations Article; or

(iii) is a registered nurse practitioner, as defined in § 8–101 of the Health Occupations Article.

(d) (7) The Fund consists of:

(i) revenue distributed to the Fund under [§ 15–206] § 14–207 of the Health Occupations Article;

(ii) money appropriated in the State budget to the Fund; and ~~of the Fund.~~

(iii) any other money from any other source accepted for the benefit 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 the section affected.

SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2024. 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.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.