

Chapter 217

(Senate Bill 549)

AN ACT concerning

**State Board of Physicians and Allied Health Advisory Committees – Sunset
Extension and Program Evaluation**

FOR the purpose of continuing the State Board of Physicians and the related allied health advisory committees in accordance with the provisions of the Maryland Program Evaluation Act (Sunset Law) by extending to a certain date the termination provisions relating to statutory and regulatory authority of the State Board of Physicians and the committees; altering the content of a certain statistical report regarding complaints of sexual misconduct; authorizing certain health occupations boards to enter into a certain agreement regarding prescriber–pharmacist agreements with the State Board of Pharmacy; altering the definition of “allied health professional” to include naturopathic doctors; authorizing a disciplinary panel, rather than the State Board of Physicians and subject to the Administrative Procedure Act and certain hearing provisions, to deny a license to an applicant or under certain circumstances to refuse to renew or reinstate an applicant’s license for certain reasons; requiring the State Board of Physicians to submit an annual report on or before a certain date each year to the Governor, the Secretary of Health and Mental Hygiene, and the General Assembly that includes certain data ~~related to criminal history records checks~~ on a fiscal year basis; ~~codifying the requirement that requiring the State Board of Physicians to provide certain training on a certain basis rather than at least annually at certain intervals to the Office of Administrative Hearings;~~ ~~authorizing the State Board of Physicians to discipline individuals exempt from licensure under a certain provision of this Act in a certain manner and for certain grounds;~~ altering the circumstances under which certain individuals may practice medicine without a license; authorizing a disciplinary panel, instead of the State Board of Physicians, to issue a cease and desist order or obtain injunctive relief against an individual for practicing medicine without a license or taking a certain action for which a disciplinary panel, instead of the State Board of Physicians, determines there is certain evidence and that poses a serious risk; requiring the State Board of Physicians to consider certain factors in determining whether to take disciplinary action based on criminal history record information against certain physicians or allied health professionals, rather than in determining whether to renew or reinstate the license; altering the circumstances under which the State Board of Physicians may renew or reinstate a license to practice medicine; altering the circumstances under which a disciplinary panel is required to refer an allegation to peer review; clarifying the application of the requirement that the State Board of Physicians or a disciplinary panel give certain individuals an opportunity for a certain hearing before taking certain action; *requiring a disciplinary panel to give an individual against whom certain action is contemplated an opportunity for a hearing before a hearing officer;* repealing certain provisions of law rendered obsolete by certain provisions of this Act; repealing the requirement that hospitals, related

institutions, and alternative health systems report certain information to the State Board of Physicians at certain intervals; authorizing a disciplinary panel, instead of the State Board of Physicians, on a certain vote of a disciplinary panel, instead of the State Board of Physicians, to deny a license to an applicant; authorizing a disciplinary panel, instead of the State Board of Physicians, to levy certain fines; requiring certain licensees to notify the State Board of Physicians in writing of a change in name or address within a certain time period; establishing a certain penalty; altering a certain penalty provision; requiring the State Board of Physicians to pay certain penalties into the Board of Physicians Fund; altering the circumstances under which certain provisions of law related to penalties for the unlicensed practice of medicine do not apply to certain licensees; making conforming and technical changes requiring the State Board of Physicians, under certain circumstances, to submit a certain proposal to certain committees of the General Assembly regarding moving certain cases from the jurisdiction of the full State Board of Physicians to the jurisdiction of the disciplinary panels; requiring that the State Board of Physicians include certain information in certain reports; limiting the scope of a certain full evaluation to certain matters; making this Act an emergency measure; and generally relating to the State Board of Physicians and the related allied health advisory committees.

BY repealing and reenacting, with amendments,

Article – Health Occupations

Section 1–212(e), 12–6A–03(b), 14–101(a–1), 14–205(b), 14–206(e), 14–302(a), 14–302.1, 14–316(g), 14–401.1(a)(5)(i), (c)(2), (k), and (l), 14–405(a), 14–411.1(b)(6)(iv), 14–413(a)(1) and (2), 14–414(a)(1) and (2), 14–5A–13(g), 14–5A–17(a), 14–5A–23(b), 14–5A–25, 14–5B–12(g), 14–5B–14(a), 14–5B–21, 14–5C–14(g), 14–5C–17(a), 14–5C–25, 14–5D–12(h), 14–5D–14(a), 14–5D–18(b), 14–5D–20, 14–5E–13(g), 14–5E–16(a), 14–5E–23(b), 14–5E–25, 14–5F–15(d), 14–5F–18(a), 14–5F–25, 14–5F–29, 14–5F–32, 14–602(e), 14–606(a)(5), 14–606(a)(4) and (5), 14–702, 15–307(g), 15–311, 15–313, 15–315(a)(1), and 15–502

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

BY adding to

Article – Health Occupations

Section 14–205.1, 14–205.2, and 14–302.2 14–5C–14.1, and 14–5F–15.1

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

BY repealing and reenacting, without amendments,

Article – Health Occupations

Section 14–401.1(c)(1) and 14–606(a)(4)

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

BY repealing

Article – Health Occupations

Section 14–401.1(j)

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

~~BY repealing and reenacting, without amendments,~~~~Article – Insurance~~~~Section 24–201(a)~~~~Annotated Code of Maryland~~~~(2011 Replacement Volume and 2016 Supplement)~~~~BY repealing and reenacting, with amendments,~~~~Article – Insurance~~~~Section 24–201(d)~~~~Annotated Code of Maryland~~~~(2011 Replacement Volume and 2016 Supplement)~~

BY repealing and reenacting, without amendments,

Article – State Government

Section 8–405(a)

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

BY repealing and reenacting, with amendments,

Article – State Government

Section 8–405(b)(5)

Annotated Code of Maryland

(2014 Replacement Volume and 2016 Supplement)

BY repealing

Chapter 539 of the Acts of the General Assembly of 2007

Section 4 and 5

BY repealingChapter 109 of the Acts of the General Assembly of 1988, as amended by Chapter 271 of the Acts of the General Assembly of 1992 and Chapter 662 of the Acts of the General Assembly of 1994Section 5

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Health Occupations

1–212.

(e) (1) (i) Each year, each health occupations board shall submit a statistical report to the Secretary, indicating [the]:

1. **THE** number of complaints of sexual misconduct received [and the resolution of each complaint];

2. **THE NUMBER OF LICENSEES, CERTIFICATE HOLDERS, AND COMPLAINANTS INVOLVED IN THE COMPLAINTS OF SEXUAL MISCONDUCT LISTED SEPARATELY BY CATEGORY;**

3. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT STILL UNDER INVESTIGATION;**

4. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT THAT WERE CLOSED WITH NO DISCIPLINARY ACTION;**

5. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT THAT RESULTED IN INFORMAL OR NONPUBLIC ACTION;**

6. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT THAT WERE REFERRED TO THE OFFICE OF THE ATTORNEY GENERAL FOR PROSECUTORIAL ACTION;**

7. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT THAT RESULTED IN EACH OF THE FOLLOWING:**

A. **LICENSE REVOCATION;**

B. **SUSPENSION;**

C. **PROBATION;**

D. **REPRIMAND; AND**

E. **DENIAL OF LICENSURE;**

8. **THE NUMBER OF COMPLAINTS OF SEXUAL MISCONDUCT THAT WERE FORWARDED TO LAW ENFORCEMENT FOR POSSIBLE CRIMINAL PROSECUTION; AND**

9. **FOR ANY OTHER ACTIONS TAKEN REGARDING COMPLAINTS OF SEXUAL MISCONDUCT, A DETAILED BREAKDOWN OF THE TYPES OF ACTIONS TAKEN.**

(ii) The report shall cover the period beginning October 1 and ending the following September 30 and shall be submitted by the board not later than the November 15 following the reporting period.

(2) The Secretary shall compile the information received from the health occupations boards and submit an annual report to the General Assembly, in accordance with § 2–1246 of the State Government Article, not later than December 31 of each year.

12–6A–03.

(b) (1) **(I) [An] EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH,** AN authorized prescriber who has entered into a prescriber–pharmacist agreement shall submit to the health occupations board that regulates the authorized prescriber a copy of the prescriber–pharmacist agreement and any subsequent modifications made to the prescriber–pharmacist agreement or the protocols specified in the prescriber–pharmacist agreement.

(II) A HEALTH OCCUPATIONS BOARD MAY ENTER INTO AN AGREEMENT WITH THE BOARD OF PHARMACY THAT REQUIRES AUTHORIZED PRESCRIBERS REGULATED BY THE HEALTH OCCUPATIONS BOARD TO SUBMIT TO THE BOARD OF PHARMACY DOCUMENTATION THAT OTHERWISE WOULD BE REQUIRED TO BE SUBMITTED TO THE HEALTH OCCUPATIONS BOARD UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH.

(2) A licensed pharmacist who has entered into a prescriber–pharmacist agreement shall submit to the Board of Pharmacy a copy of the prescriber–pharmacist agreement and any subsequent modifications made to the prescriber–pharmacist agreement or the protocols specified in the prescriber–pharmacist agreement.

14–101.

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

14–205.

(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 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)] Subject to the Administrative Procedure Act, 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:

1. Any of the reasons that are grounds for action under § 14-404 of this title; or

2. Failure to submit to a criminal history records check in accordance with § 14-308.1 of this title;]

[(iv)] (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

[(v)] (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 OF THIS TITLE; OR

(II) FAILURE TO SUBMIT TO A CRIMINAL HISTORY RECORDS CHECK IN ACCORDANCE WITH § 14-308.1 OF THIS TITLE.

14-205.1.

ON OR BEFORE ~~DECEMBER~~ OCTOBER 1 EACH YEAR, THE BOARD SHALL SUBMIT TO THE GOVERNOR, THE SECRETARY, AND, IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY AN ANNUAL REPORT THAT INCLUDES THE FOLLOWING DATA ~~FOR BOTH PHYSICIANS AND ALLIED HEALTH PROFESSIONALS~~ CALCULATED ON A FISCAL YEAR BASIS:

(1) RELEVANT DISCIPLINARY INDICATORS, INCLUDING:

(I) THE NUMBER OF PHYSICIANS INVESTIGATED UNDER EACH OF THE DISCIPLINARY GROUNDS ENUMERATED UNDER § 14-404 OF THIS ARTICLE;

(II) THE NUMBER OF PHYSICIANS WHO WERE REPRIMANDED OR PLACED ON PROBATION OR WHO HAD THEIR LICENSES SUSPENDED OR REVOKED;

(III) THE NUMBER OF CASES PROSECUTED AND DISMISSED AND ON WHAT GROUNDS;

(IV) THE CRITERIA USED TO ACCEPT AND REJECT CASES FOR PROSECUTION; AND

(V) THE NUMBER OF UNRESOLVED ALLEGATIONS PENDING BEFORE THE BOARD;

(2) THE AVERAGE LENGTH OF THE TIME SPENT INVESTIGATING ALLEGATIONS BROUGHT AGAINST PHYSICIANS UNDER EACH OF THE DISCIPLINARY GROUNDS ENUMERATED UNDER § 14-404 OF THIS ARTICLE;

(3) THE NUMBER OF CASES NOT COMPLETED WITHIN 18 MONTHS AND THE REASONS FOR THE FAILURE TO COMPLETE THE CASES IN 18 MONTHS;

(4) FOR BOTH PHYSICIANS AND ALLIED HEALTH PROFESSIONALS;

~~(1)~~ (I) THE NUMBER OF INITIAL AND RENEWAL LICENSES ISSUED;

~~(2)~~ (II) THE NUMBER OF POSITIVE AND NEGATIVE CRIMINAL HISTORY RECORDS CHECKS RESULTS RECEIVED;

~~(3)~~ (III) THE NUMBER OF INDIVIDUALS DENIED INITIAL OR RENEWAL LICENSURE DUE TO POSITIVE CRIMINAL HISTORY RECORDS CHECKS RESULTS; AND

~~(4)~~ (IV) THE NUMBER OF INDIVIDUALS DENIED INITIAL OR RENEWAL LICENSURE DUE TO REASONS OTHER THAN A POSITIVE CRIMINAL HISTORY RECORDS CHECK; AND

(5) THE ADEQUACY OF CURRENT BOARD STAFFING IN MEETING THE WORKLOAD OF THE BOARD.

14-205.2.

~~(A) SUBJECT TO SUBSECTION (B) OF THIS SECTION, THE~~ THE BOARD SHALL PROVIDE TRAINING AT LEAST ANNUALLY ON AN AS-NEEDED BASIS TO THE PERSONNEL OF THE OFFICE OF ADMINISTRATIVE HEARINGS IN ORDER TO IMPROVE THE QUALITY AND EFFICIENCY OF THE HEARINGS IN PHYSICIAN DISCIPLINE CASES.

~~(B) THE TRAINING PROVIDED UNDER SUBSECTION (A) OF THIS SECTION SHALL INCLUDE MEDICAL TERMINOLOGY, MEDICAL ETHICS, AND, TO THE EXTENT POSSIBLE, DESCRIPTIONS OF BASIC MEDICAL AND SURGICAL PROCEDURES CURRENTLY IN USE.~~

14-206.

(e) [The Board] A DISCIPLINARY PANEL may issue a cease and desist order or obtain injunctive relief against an individual for:

(1) Practicing medicine without a license; or

(2) Taking any action:

(i) For which [the Board] A DISCIPLINARY PANEL determines there is a preponderance of evidence of grounds for discipline under § 14-404 of this title; and

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

14-302.

(a) Subject to the rules, regulations, and orders of the Board, the following individuals may practice medicine without a license if the individuals submit to a criminal history records check in accordance with § 14-308.1 of this subtitle:

~~[(1)~~ (1) A medical student or an individual in a postgraduate medical training program that is approved by the Board, while doing the assigned duties at any office of a licensed physician, hospital, clinic, or similar facility;

~~[(2)] (4)~~ (4) 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; or

(ii) Meets the requirements of § 14-302.1 of this subtitle;

~~[(3)] (2)~~ A physician employed in the service of the federal government while performing the duties incident to that employment;

~~[(4)] (3)~~ A physician who resides in and is authorized to practice medicine by any state adjoining this State and whose practice extends into this State, if:

(i) The physician does not have an office or other regularly appointed place in this State to meet patients; and

(ii) The same privileges are extended to licensed physicians of this State by the adjoining state; 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.

14-302.1.

[(a) Subject to subsection (b) of this section, a] A physician who is licensed and resides in another jurisdiction may practice medicine without a license while engaged in clinical training with a licensed physician if:

(1) The Board finds, on application by a hospital in the State, that:

(i) The physician possesses a skill or uses a procedure that:

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

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

3. Is likely to benefit Maryland patients in this instance;

(ii) The demonstration of the skill or procedure would take no more than 14 consecutive days within a calendar year;

(iii) A licensed physician who practices at a hospital in the State has certified to the Board that the licensed physician will be responsible for the medical care provided by that visiting physician to patients in the State;

(iv) The visiting physician has no history of any medical disciplinary action in any other state, territory, nation, or any branch of the United States uniformed services or the Veterans Administration, and has no significant detrimental malpractice history in the judgment of the Board;

(v) The physician is covered by malpractice insurance in the jurisdiction in which the physician practices; and

(vi) The hospital assures the Board that the patients will be protected by adequate malpractice insurance; or

(2) The Board finds, on application by a Maryland hospital, that:

(i) The hospital provides training in a skill or uses a procedure that:

1. Is advanced beyond those skills or procedures normally taught or exercised in standard medical education or training;

2. Could not be otherwise conveniently taught or demonstrated in the visiting physician's practice; and

3. Is likely to benefit Maryland patients in this instance;

(ii) The demonstration or exercise of the skill or procedure will take no more than 14 consecutive days within a calendar year;

(iii) A hospital physician licensed in the State has certified to the Board that the physician will be responsible for the medical care provided by that visiting physician to patients in the State;

(iv) The visiting physician has no history of any medical disciplinary action in any other state, territory, nation, or any branch of the United States uniformed services or the Veterans Administration, and has no significant detrimental malpractice history in the judgment of the Board;

(v) The physician is covered by malpractice insurance in the jurisdiction where the physician practices; and

(vi) The hospital assures the Board that the patients will be protected by adequate malpractice insurance.

[(b) A physician who is licensed and resides in another jurisdiction may practice medicine without a license under subsection (a) of this section if the physician submits to a criminal history records check in accordance with § 14-308.1 of this subtitle.]

~~14-302.2.~~

~~(A) SUBJECT TO THE RULES, REGULATIONS, AND ORDERS OF THE BOARD, A MEDICAL STUDENT OR AN INDIVIDUAL IN A POSTGRADUATE MEDICAL TRAINING PROGRAM THAT IS APPROVED BY THE BOARD, WHILE DOING ASSIGNED DUTIES AT ANY OFFICE OF A LICENSED PHYSICIAN, HOSPITAL, CLINIC, OR SIMILAR FACILITY, MAY PRACTICE MEDICINE WITHOUT A LICENSE IF THE INDIVIDUAL SUBMITS TO A CRIMINAL HISTORY RECORDS CHECK IN ACCORDANCE WITH § 14-308.1 OF THIS SUBTITLE.~~

~~(B) THE BOARD MAY DISCIPLINE AN INDIVIDUAL WHO IS EXEMPT FROM LICENSURE UNDER SUBSECTION (A) OF THIS SECTION IN THE SAME MANNER AND BASED ON THE SAME GROUNDS AS IF THE INDIVIDUAL WERE A LICENSED PHYSICIAN.~~

14-316.

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

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

(ii) Each former licensee who files for reinstatement under § 14-317 of this subtitle ~~after failing to renew the license for a period of 1 year or more.~~

(2) On receipt of the criminal history record information of a licensee forwarded to the Board in accordance with § 14-308.1 of this subtitle, in determining whether [to renew or reinstate a license] **DISCIPLINARY ACTION SHOULD BE TAKEN, BASED ON THE CRIMINAL 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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required** under § 14-308.1 of this subtitle ~~has not been received~~.

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, [or] § 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.

(c) (1) Except as otherwise provided in this subsection, after being assigned a complaint under subsection (a) of this section, the disciplinary panel may:

- (i) Refer an allegation for further investigation to the entity that has contracted with the Board under subsection (e) of this section;
- (ii) Take any appropriate and immediate action as necessary; or
- (iii) Come to an agreement for corrective action with a licensee pursuant to paragraph (4) of this subsection.

(2) (i) [After] **IF, AFTER** being assigned a complaint **AND COMPLETING THE PRELIMINARY INVESTIGATION**, the disciplinary panel **FINDS THAT THE LICENSEE MAY HAVE VIOLATED § 14-404(A)(22) OF THIS SUBTITLE, THE DISCIPLINARY PANEL** shall refer [any] **THE** allegation [in the complaint based on § 14-404(a)(22) of this subtitle] to the entity or entities that have contracted with the Board under subsection (e) of this section for further investigation and physician peer review 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 (e) of this section for each allegation the disciplinary panel refers for peer review.

[(j)] Those individuals not licensed under this title but covered under § 14-413(a)(1)(ii)3 and 4 of this subtitle are subject to the hearing provisions of § 14-405 of this subtitle.]

[(k)] **(J)** (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.

[(l)] **(K)** 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.

14-405.

(a) Except as otherwise provided in the Administrative Procedure Act, before the Board or a disciplinary panel takes any action under § 14-404(a) of this subtitle or § 14-205(B)(3), § 14-5A-17(a), § 14-5B-14(A), § 14-5C-17(A), § 14-5D-14(A), § 14-5E-16(A), OR § 14-5F-18 of this title, it shall give the individual against whom the action is contemplated an opportunity for a hearing before a hearing officer.

14-411.1.

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

(6) Medical education and practice information about the licensee including:

(iv) The name of any hospital where the licensee has medical privileges [as reported], **IF KNOWN** to the Board [under § 14-413 of this subtitle];

14-413.

(a) (1) [Every 6 months, each] **EACH** hospital and related institution shall [file with] **SUBMIT TO** the Board a report [that:

(i) Contains the name of each licensed physician who, during the 6 months preceding the report:

1. Is employed by the hospital or related institution;
2. Has privileges with the hospital or related institution; and
3. Has applied for privileges with the hospital or related institution; and

(ii) States whether, as to each licensed physician, during the 6 months preceding the report] **WITHIN 10 DAYS AFTER:**

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

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

~~[3.] (III) The hospital or related institution took any disciplinary action against an individual in a postgraduate medical training program, including removal from the training program, suspension, or probation for reasons that might be grounds for disciplinary action under § 14-404 of this subtitle;~~

[4.] ~~(IV)~~ (III) A licensed physician ~~or an individual in a postgraduate training program~~ voluntarily resigned from the staff, employ, or training program of the hospital or related institution for reasons that might be grounds for disciplinary action under § 14-404 of this subtitle; or

[5.] ~~(V)~~ (IV) The hospital or related institution placed any other restrictions or conditions on any of the licensed physicians ~~OR INDIVIDUALS IN A POSTGRADUATE TRAINING PROGRAM~~ as listed in items [1 through 4 of this item] (I) **THROUGH ~~(IV)~~ (III) OF THIS PARAGRAPH** for any reasons that might be grounds for disciplinary action under § 14-404 of this subtitle.

(2) The hospital or related institution shall[:

(i) Submit the report within 10 days of any action described in paragraph (1)(ii) of this subsection; and

(ii) State] **STATE** in the report the reasons for its action or the nature of the formal accusation pending when the physician resigned.

14-414.

(a) (1) [Every 6 months, each] **EACH** alternative health system as defined in § 1-401 of this article shall [file with] **SUBMIT TO** the Board a report [that:

(i) Contains the name of each licensed physician who, during the 6 months preceding the report:

1. Is employed by the alternative health system;

2. Is under contract with the alternative health system; and

3. Has completed a formal application process to become under contract with the alternative health system; and

(ii) States whether, as to each licensed physician, during the 6 months preceding the report] **WITHIN 10 DAYS AFTER:**

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

[2.] (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 of this subtitle.

(2) The alternative health system shall[:

(i) Submit the report within 10 days of any action described in paragraph (1)(ii) of this subsection; and

(ii) State] **STATE** in the report the reasons for its action or the nature of the formal accusation pending when the physician resigned.

14-5A-13.

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

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

(ii) Each former licensee who files for reinstatement under subsection (f) of this section ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required** under § 14-308.1 of this title ~~has not been received.~~

14-5A-17.

(a) Subject to the hearing provisions of § 14-405 of this title, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of a quorum of the [Board] DISCIPLINARY PANEL, may deny a license to any applicant, [or a disciplinary panel, on the affirmative vote of a majority of a quorum of the disciplinary panel, may] 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 respiratory care;

- (4) Is professionally, physically, or mentally incompetent;
- (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;
- (10) Willfully makes or files a false report or record in the practice of respiratory care;
- (11) Willfully fails to file or record any report as required under law, willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report;
- (12) Breaches patient confidentiality;
- (13) Pays or agrees to pay any sum or provide any form of remuneration or material benefit to any person 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 respiratory care;
- (15) Knowingly practices respiratory care with an unauthorized individual or aids an unauthorized individual in the practice of respiratory care;
- (16) Offers, undertakes, or agrees to cure or treat disease by a secret method, treatment, or medicine;
- (17) 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 Veterans' Administration 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 submit to a criminal history records check under § 14–308.1 of this title.

14-5A-23.

(b) Any person who violates a provision of this subtitle is subject to a civil fine of not more than \$5,000 to be levied by [the Board] A DISCIPLINARY PANEL.

14-5A-25.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act and subject to the termination of this title under § 14-702 of this title, this subtitle and all rules and regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

14-5B-12.

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

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

(ii) Each former licensee who files for reinstatement under subsection (f) of this section ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license ONLY if the LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required under § 14-308.1 of this title has not been received.

14-5B-14.

(a) Subject to the hearing provisions of § 14-405 of this title, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of the quorum of the [Board] DISCIPLINARY PANEL, may deny a license to any applicant, [or 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 applicant or licensee:

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

(2) Fraudulently or deceptively uses a license;

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

(4) Is professionally, physically, or mentally incompetent;

(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;

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

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

(12) Breaches patient confidentiality;

(13) Pays or agrees to pay any sum or provide any form of remuneration or material benefit to any person 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 radiation therapy, radiography, nuclear medicine technology, or radiology assistance;

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

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

(17) 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 Veterans' Administration 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 quality radiation therapy, radiography, nuclear medicine technology, or radiology assistance care performed in any outpatient surgical facility, office, hospital or related institution, 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 radiation therapy, radiography, nuclear medicine technology, or radiology assistance procedure or uses radiation therapy, radiography, nuclear medicine technology, or radiology assistance equipment if the applicant or licensee has not received education, internship, training, or experience 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 submit to a criminal history records check under § 14–308.1 of this title.

14–5B–21.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act, and subject to the termination of this title under § 14–702 of this title, this subtitle and all rules and regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

14–5C–14.

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

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

(ii) Each former licensee who files for reinstatement under subsection (f) of this section ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required** under § 14–308.1 of this title ~~has not been received~~.

14–5C–14.1.

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

(B) A LICENSEE WHO FAILS TO COMPLY WITH SUBSECTION (A) OF THIS SECTION IS SUBJECT TO AN ADMINISTRATIVE PENALTY OF \$100.

14–5C–17.

(a) Subject to the hearing provisions of § 14–405 of this title, ~~[the Board]~~ **A DISCIPLINARY PANEL**, on the affirmative vote of a majority of a quorum of the ~~[Board]~~ **DISCIPLINARY PANEL**, may deny a license to any applicant, ~~[or a disciplinary panel, on the affirmative vote of a majority of a quorum of the disciplinary panel, may]~~ 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;
- (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;
- (10) Willfully makes or files a false report or record in the practice of polysomnography;
- (11) Willfully fails to file or record any report as required under law, willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report;
- (12) Breaches patient confidentiality;
- (13) Pays or agrees to pay any sum or provide any form of remuneration or material benefit to any person 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 polysomnography;
- (15) Knowingly practices polysomnography with an unauthorized individual or aids an unauthorized individual in the practice of polysomnography;

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

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

(18) 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;

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

(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) Is convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside;

(26) 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;

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

(28) Fails to cooperate with a lawful investigation conducted by the Board;
or

(29) Fails to submit to a criminal history records check under § 14–308.1 of this title.

14–5C–25.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act and subject to the termination of this title under § 14–702 of this title, this subtitle and all regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

14–5D–12.

(h) (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) Annual renewal applicants as determined by regulations adopted by the Board; and

(ii) Each former licensee who files for reinstatement under subsection (f) of this section ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required under § 14–308.1 of this title ~~has not been received~~.**

14–5D–14.

(a) Subject to the hearing provisions of § 14–405 of this title, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of a quorum of the [Board] DISCIPLINARY PANEL, may deny a license to any applicant, [or a disciplinary panel, on the affirmative vote of a majority of a quorum of the disciplinary panel, may] 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;

(5) Abandons a patient;

(6) Habitually is 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;

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

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

(19) Knowingly submits false statements to collect fees for which services have not been 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 an athletic training procedure or uses or attempts to use athletic training equipment if the applicant or licensee has not received education and training in the performance of the procedure or the use of the equipment;

(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 the approved evaluation and treatment protocol;

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

(29) Fails to submit to a criminal history records check under § 14–308.1 of this title.

14–5D–18.

(b) Any person who violates any provision of this subtitle is subject to a civil fine of not more than \$5,000 to be levied by [the Board] **A DISCIPLINARY PANEL.**

14–5D–20.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act and subject to the termination of this title under § 14–702 of this title, this subtitle and all rules and regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

14–5E–13.

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

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

(ii) Each former licensee who files for reinstatement under subsection (f) of this section ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history ~~record~~ RECORDS CHECK information required** under § 14–308.1 of this title ~~has not been received~~.

14–5E–16.

(a) Subject to the hearing provisions of § 14–405 of this title, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of the quorum of the [Board] DISCIPLINARY PANEL, may deny a license to any applicant, [or 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 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;

- perfusion;
- (3) Is guilty of unprofessional or immoral conduct in the practice of
 - (4) Is professionally, physically, or mentally incompetent;
 - (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;
 - (10) Willfully makes or files a false report or record in the practice of perfusion;
 - (11) Willfully fails to file or record any report as required under law, willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record a report;
 - (12) Breaches patient confidentiality;
 - (13) Pays or agrees to pay any sum or provide any form of remuneration or material benefit to any person 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 perfusion;
 - (15) Knowingly practices perfusion with an unauthorized individual or aids an unauthorized individual in the practice of perfusion;
 - (16) Knowingly delegates a perfusion duty to an unlicensed individual;

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

(18) 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;

(19) Fails to meet appropriate standards for the delivery of perfusion 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) Is convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside;

(26) 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;

(27) 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;

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

(29) Fails to submit to a criminal history records check under § 14–308.1 of this title.

14–5E–23.

(b) A person who violates any provision of this subtitle is subject to a civil fine of not more than \$5,000 to be levied by [the Board] **A DISCIPLINARY PANEL.**

14–5E–25.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act and subject to the termination of this title under § 14–702 of this title, this subtitle and all regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

14–5F–15.

(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) Annual 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 ~~after failing to renew the license for a period of 1 year or more.~~

(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 [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license ONLY if the LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required under § 14-308.1 of this title has not been received.

14-5F-15.1.

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

(B) A LICENSEE WHO FAILS TO COMPLY WITH SUBSECTION (A) OF THIS SECTION IS SUBJECT TO AN ADMINISTRATIVE PENALTY OF \$100.

14-5F-18.

(a) Subject to the hearing provisions of § 14-405 of this title, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of a quorum of the [Board] DISCIPLINARY PANEL, may deny a license to any applicant, [or a disciplinary panel, on the affirmative vote of a majority of a quorum of the disciplinary panel, may] 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 by a physician if the mental incompetence impairs the ability of the applicant or licensee to undertake the practice of naturopathic medicine in a manner consistent with the safety of the public;

(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 submit to a criminal history records check under § 14–308.1 of this title.

14–5F–25.

[The Board] A DISCIPLINARY PANEL may issue a cease and desist order for:

(1) Practicing naturopathic medicine without a license or with an unauthorized person; or

(2) Supervising or aiding an unauthorized person in the practice of naturopathic medicine.

14–5F–29.

(a) Except as otherwise provided in this subtitle, an individual may not practice, attempt to practice, or offer to practice naturopathic medicine in this State without a license.

(b) An individual who violates [this section] ANY PROVISION OF THIS SUBTITLE is guilty of a felony and on conviction is subject to[

(1) A] A fine not exceeding \$10,000 or imprisonment not exceeding 5 years or both[; and

(2) A civil fine of no more than \$50,000 to be levied by the Board].

(C) ANY INDIVIDUAL WHO VIOLATES A PROVISION OF THIS SUBTITLE IS SUBJECT TO A CIVIL FINE OF NOT MORE THAN \$50,000 TO BE LEVIED BY A DISCIPLINARY PANEL.

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

14-5F-32.

Subject to the evaluation and reestablishment provisions of the Program Evaluation Act, this subtitle and all rules and regulations adopted under this subtitle shall terminate and be of no effect after July 1, [2018] **2023**.

~~14-602.~~

~~(e) An unlicensed individual who acts under § 14-302, § 14-302.2, or § 14-306 of this title 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”.~~

14-606.

(a) (4) Except as provided in paragraph (5) of this subsection, a person who violates § 14-601 or § 14-602 of this subtitle 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 ~~the Board~~ **A DISCIPLINARY PANEL.**

(5) The provisions of paragraph (4) of this subsection do not apply to a **FORMER** licensee who has failed to renew a license under § 14-316 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 [renewal] **REINSTATEMENT**, including payment of the [renewal] **REINSTATEMENT** fee.

14-702.

Subject to the evaluation and reestablishment provisions of the Program Evaluation Act, this title and all rules and regulations adopted under this title shall terminate and be of no effect after July 1, [2018] **2023**.

15-307.

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

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

(ii) Each former licensee who files for reinstatement under this title ~~after failing to renew the license for a period of 1 year or more.~~

(2) On receipt of the criminal history record information of a licensee forwarded to the Board in accordance with § 14-308.1 of this article, in determining whether [to renew or reinstate a license] **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 ~~not~~ renew or reinstate a license **ONLY** if the **LICENSEE OR APPLICANT ATTESTS THAT THE LICENSEE OR APPLICANT HAS SUBMITTED TO A criminal history record RECORDS CHECK information required** under § 14-308.1 of this article ~~has not been received.~~

15-311.

Subject to the hearing provisions of ~~§ 15-313~~ ~~§ 15-315~~ § 15-315 of this subtitle, [the Board] A DISCIPLINARY PANEL, on the affirmative vote of a majority of a quorum, may deny a license to any applicant for:

(1) Any of the reasons that are grounds for disciplinary action under § 15-314 of this subtitle; and

(2) Failure to submit to a criminal history records check in accordance with § 14-308.1 of this article.

15-313.

(a) (1) Except as otherwise provided under § 10-226 of the State Government Article, before the Board takes any action [to deny a license or] to reject or modify a delegation agreement or advanced duty ~~OR A DISCIPLINARY PANEL TAKES ANY ACTION TO DENY A LICENSE~~, the Board ~~OR THE DISCIPLINARY PANEL~~ shall give the applicant or licensee the opportunity for a hearing before the Board ~~OR THE DISCIPLINARY PANEL~~, ***THE BOARD SHALL GIVE THE LICENSEE THE OPPORTUNITY FOR A HEARING BEFORE THE BOARD.***

(2) The Board ~~OR DISCIPLINARY PANEL~~ shall give notice and hold the hearing under Title 10, Subtitle 2 of the State Government Article.

(3) The Board ~~OR DISCIPLINARY PANEL~~ may administer oaths in connection with any proceeding under this section.

(4) At least 14 days before the hearing, the hearing notice shall be sent to the last known address of the applicant or licensee.

(b) Any ~~applicant~~ ***LICENSEE*** aggrieved under this subtitle by a final decision of the Board [denying a license or] rejecting or modifying a delegation agreement or advanced duty ~~OR A DISCIPLINARY PANEL DENYING A LICENSE~~ may petition for judicial review as allowed by the Administrative Procedure Act.

15-315.

(a) (1) Except as otherwise provided under § 10-226 of the State Government Article, before a disciplinary panel takes any action under ***§ 15-311 OR § 15-314(a)*** of this subtitle, the disciplinary panel shall give the individual against whom the action is contemplated an opportunity for a hearing before a hearing officer.

15-502.

Subject to the evaluation and reestablishment provisions of the Maryland Program Evaluation Act, this title and all regulations adopted under this title shall terminate and be of no effect after July 1, [2018] **2023**.

~~Article—Insurance~~

~~24-201.~~~~(a) In this subtitle the following words have the meanings indicated.~~~~(d) "Physician" means an individual who:~~~~(1) is licensed to practice medicine in the State; or~~~~(2) lawfully practices medicine without a license under [§ 14-302(1) through (4)] § 14-302(1) THROUGH (3) OR § 14-302.2 of the Health Occupations Article.~~**Article – State Government**

8-405.

(a) The Department shall:

(1) conduct a full evaluation of each governmental activity or unit to be evaluated under this section; and

(2) prepare a report on each full evaluation conducted.

(b) Each of the following governmental activities or units and the statutes and regulations that relate to the governmental activities or units are subject to full evaluation, in the evaluation year specified, without the need for a preliminary evaluation:

(5) Physicians, State Board of (§ 14-201 of the Health Occupations Article: **[2016] 2021**), including:(i) Athletic Training Advisory Committee (§ 14-5D-04 of the Health Occupations Article: **[2016] 2021**);(ii) Naturopathic Medicine Advisory Committee (§ 14-5F-04 of the Health Occupations Article: **[2016] 2021**);(iii) Perfusion Advisory Committee (§ 14-5E-05 of the Health Occupations Article: **[2016] 2021**);(iv) Physician Assistant Advisory Committee (§ 15-201 of the Health Occupations Article: **[2016] 2021**);(v) Polysomnography Professional Standards Committee (§ 14-5C-05 of the Health Occupations Article: **[2016] 2021**);

(vi) Radiation Therapy, Radiography, Nuclear Medicine Technology Advisory, and Radiology Assistance Committee (§ 14–5B–05 of the Health Occupations Article: [2016] **2021**); and

(vii) Respiratory Care Professional Standards Committee (§ 14–5A–05 of the Health Occupations Article: [2016] **2021**).

Chapter 539 of the Acts of 2007

[SECTION 4. AND BE IT FURTHER ENACTED, That the Chief Administrative Law Judge shall designate a pool of administrative law judges in the Office of Administrative Hearings to hear cases referred to it by the State Board of Physicians.]

[SECTION 5. AND BE IT FURTHER ENACTED, That the State Board of Physicians shall provide training at least annually to the personnel of the Office of Administrative Hearings in order to improve the quality and efficiency of the hearings in physician discipline cases. The training shall include medical terminology, medical ethics, and, to the extent practicable, descriptions of basic medical and surgical procedures currently in use.]

Chapter 109 of the Acts of 1988, as amended by Chapter 271 of the Acts of 1992 and Chapter 662 of the Acts of 1994

[SECTION 5. AND BE IT FURTHER ENACTED, That the Department, on or before October 1 of each year, shall report to the Legislative Policy Committee for the previous fiscal year regarding:

(1) Relevant disciplinary indicators, which may include:

(i) The number of physicians investigated under each of the disciplinary grounds enumerated under § 14–404 of the Health Occupations Article;

(ii) The number of physicians who were reprimanded or placed on probation or who had their licenses suspended or revoked;

(iii) The number of cases prosecuted and dismissed and on what grounds;

(iv) The criteria used to accept and reject cases for prosecution; and

(v) The number of unresolved allegations pending before the Board;

(2) The average length of the time spent investigating allegations brought against physicians under each of the disciplinary grounds enumerated under § 14–404 of the Health Occupations Article;

(3) The number of cases not completed within 18 months and the reasons for the failure to complete the cases in 18 months;

(4) The number and nature of allegations filed with the Board concerning cardiac rescue technicians, aviation trauma technicians, emergency medical technicians, medical radiation technicians, and physician assistants; and

(5) The adequacy of current Board staffing in meeting the workload of the Board.]

SECTION 2. AND BE IT FURTHER ENACTED, That, in the annual report the State Board of Physicians is required to submit under ~~Section 2 of Chapter 401 of the Acts of the General Assembly of 2013~~ § 14-205.1 of the Health Occupations Article, as enacted by Section 1 of this Act, on or before October 1, 2017, the Board shall include:

(1) a description of the efforts the Board has taken to meet the goal of issuing licenses within 10 days after the receipt of the last qualifying document, especially for the allied health professionals; and

~~(2) the findings and recommendations of the Board and the Physician Assistant Advisory Committee regarding ways to expedite the process for physician assistants to assume the duties under a delegation agreement; and~~

~~(3)~~ (2) whether it is feasible to describe any underlying sexual misconduct in order summaries and, if it is not feasible, a description of other steps that the Board can take to make it easier for the public to determine whether a case involved sexual misconduct.

SECTION 3. AND BE IT FURTHER ENACTED, That, in the annual report the State Board of Physicians is required to submit under ~~Section 2 of Chapter 401 of the Acts of the General Assembly of 2013~~ § 14-205.1 of the Health Occupations Article, as enacted by Section 1 of this Act, on or before October 1, ~~2018~~ 2019, the Board shall include:

(1) the results of the internal fiscal analysis and reassessment of fees that was recommended by the Department of Legislative Services in the December 2016 publication “Sunset Review: Evaluation of the State Board of Physicians and the Related Allied Health Advisory Committees”, including any possible changes to the fee schedules for physicians and allied health professionals;

(2) comments on the Board’s fund balance in light of the additional retained revenue that resulted from Chapter 178 of the Acts of the General Assembly of 2016; and

(3) steps the Board has taken to address ongoing issues with filling staff vacancies and the impact that filling vacancies will have on Board expenditures and the Board’s fund balance.

SECTION 4. AND BE IT FURTHER ENACTED, That, in the annual report the State Board of Physicians is required to submit under § 14–205.1 of the Health Occupations Article, *as enacted by Section 1 of this Act*, on or before ~~December~~ October 1, 2019, ~~as enacted by Section 1 of this Act~~, the Board shall report:

- (1) whether criminal history records checks are causing delays in licensure;
- (2) whether existing Board staff are able to manage the criminal history records checks workload; and
- (3) any other concerns the Board has regarding the criminal history records checks requirement.

~~SECTION 5. AND BE IT FURTHER ENACTED, That, if the State Board of Physicians determines it is practicable to move certain cases that are under the jurisdiction of the full Board to the jurisdiction of the disciplinary panels, the Board shall submit to the Senate Education, Health, and Environmental Affairs Committee and the House Health and Government Operations Committee, in accordance with § 2–1246 of the State Government Article, a proposal that includes the following:~~

- ~~(1) a list of the types of cases that should be moved;~~
- ~~(2) the reasons that justify moving the cases; and~~
- ~~(3) any necessary draft legislation.~~

SECTION ~~6~~ 5. AND BE IT FURTHER ENACTED, That, notwithstanding § 8–405(e) of the State Government Article, the full evaluation required to be conducted by the Department of Legislative Services on or before December 1, 2021, shall be limited to evaluating:

- (1) the implementation of recommendations made by the Department in the December 2016 publication “Sunset Review: Evaluation of the State Board of Physicians and the Related Allied Health Advisory Committees”;
- (2) the efficacy of the two-panel disciplinary system; and
- ~~(3) if a proposal is not submitted under Section 5 of this Act by April 1, 2021, whether certain cases should be moved from the jurisdiction of the full State Board of Physicians to the jurisdiction of the disciplining panels; and~~
- ~~(4)~~ the impact of the criminal history records checks on the State Board of Physicians and its licensees.

~~SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2017.~~

SECTION 6. AND BE IT FURTHER ENACTED, That this Act is an emergency measure, is necessary for the immediate preservation of the public health or safety, has been passed by a yea and nay vote supported by three-fifths of all the members elected to each of the two Houses of the General Assembly, and shall take effect from the date it is enacted.

Approved by the Governor, April 18, 2017.