7lr3278 CF SB 549

# By: Chair, Health and Government Operations Committee Introduced and read first time: February 10, 2017 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

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

4 FOR the purpose of continuing the State Board of Physicians and the related allied health  $\mathbf{5}$ advisory committees in accordance with the provisions of the Maryland Program 6 Evaluation Act (Sunset Law) by extending to a certain date the termination 7 provisions relating to statutory and regulatory authority of the State Board of 8 Physicians and the committees; altering the content of a certain statistical report 9 regarding complaints of sexual misconduct; authorizing certain health occupations boards to enter into a certain agreement regarding prescriber-pharmacist 1011 agreements with the State Board of Pharmacy; altering the definition of "allied 12health professional" to include naturopathic doctors; requiring the State Board of 13Physicians to submit an annual report on or before a certain date each year to the 14Governor, the Secretary of Health and Mental Hygiene, and the General Assembly 15that includes certain data on a fiscal year basis, codifying the requirement that the 16State Board of Physicians provide certain training at least at certain intervals to the 17Office of Administrative Hearings; authorizing the State Board of Physicians to 18 discipline individuals exempt from licensure under a certain provision of this Act in 19a certain manner and for certain grounds; requiring the State Board of Physicians 20to consider certain factors in determining whether to take disciplinary action based 21 on criminal history record information against certain physicians or allied health 22professionals, rather than in determining whether to renew or reinstate the license; 23altering the circumstances under which a disciplinary panel is required to refer an 24allegation to peer review; repealing certain provisions of law rendered obsolete by certain provisions of this Act; repealing the requirement that hospitals, related 2526institutions, and alternative health systems report certain information to the State 27Board of Physicians at certain intervals; altering the circumstances under which 28certain provisions of law related to penalties for the unlicensed practice of medicine 29do not apply to certain licensees; making conforming and technical changes requiring 30 the State Board of Physicians, under certain circumstances, to submit a certain 31proposal to certain committees of the General Assembly regarding moving certain

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 cases from the jurisdiction of the full State Board of Physicians to the jurisdiction of  $\mathbf{2}$ the disciplinary panels; requiring that the State Board of Physicians include certain 3 information in certain reports; limiting the scope of a certain full evaluation to 4 certain matters; and generally relating to the State Board of Physicians and the related allied health advisory committees.  $\mathbf{5}$ 

6 BY repealing and reenacting, with amendments,

7 Article – Health Occupations

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- Section 1–212(e), 12–6A–03(b), 14–101(a–1), 14–302(a), 14–316(g), 14–401.1(a)(5)(i), (c)(2), (k), and (l), 14-411.1(b)(6)(iv), 14-413(a)(1) and (2), 14-414(a)(1) and
- (2), 14-5A-13(g), 14-5A-25,14-5B-12(g), 14-5B-21, 14-5C-14(g),
- 10 14-5C-25, 14-5D-12(h), 14-5D-20, 14-5E-13(g), 14-5E-25, 14-5F-15(d), 11
  - 14-5F-32, 14-602(c), 14-606(a)(5), 14-702, 15-307(g), and 15-502
- Annotated Code of Maryland 13
- (2014 Replacement Volume and 2016 Supplement) 14
- 15BY adding to
- 16 Article – Health Occupations
- 17Section 14–205.1, 14–205.2, and 14–302.2
- 18 Annotated Code of Maryland
- (2014 Replacement Volume and 2016 Supplement) 19
- 20BY repealing and reenacting, without amendments,
- 21Article – Health Occupations
- 22Section 14–401.1(c)(1) and 14–606(a)(4)
- 23Annotated Code of Maryland
- 24(2014 Replacement Volume and 2016 Supplement)
- 25BY repealing
- Article Health Occupations 26
- 27Section 14–401.1(j)
- 28Annotated Code of Maryland
- 29(2014 Replacement Volume and 2016 Supplement)
- 30 BY repealing and reenacting, without amendments,
- 31 Article – Insurance
- 32 Section 24-201(a)
- Annotated Code of Maryland 33
- 34 (2011 Replacement Volume and 2016 Supplement)
- 35BY repealing and reenacting, with amendments,
- 36 Article – Insurance
- 37 Section 24-201(d)
- 38 Annotated Code of Maryland
- 39 (2011 Replacement Volume and 2016 Supplement)
- 40BY repealing and reenacting, without amendments,

 $\mathbf{2}$ 

1	Article – State Government		
2	Section 8–405(a)		
3	Annotated Code of Maryland		
4	(2014 Replacement Volume and 2016 Supplement)		
5	BY repealing and reenacting, with amendments,		
6	Article – State Government		
$\overline{7}$	Section $8-405(b)(5)$		
8	Annotated Code of Maryland		
9	(2014 Replacement Volume and 2016 Supplement)		
10	BY repealing		
11	Chapter 539 of the Acts of the General Assembly of 2007		
12	Section 4 and 5		
13	BY repealing		
14	Chapter 109 of the Acts of the General Assembly of 1988, as amended by Chapter		
15	271 of the Acts of 1992 and Chapter 662 of the Acts of 1994		
16	Section 5		
17	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,		
18	That the Laws of Maryland read as follows:		
19	Article – Health Occupations		
20	1–212.		
21	(e) (1) (i) Each year, each health occupations board shall submit a		
22	statistical report to the Secretary, indicating [the]:		
23	<b>1. THE</b> number of complaints of sexual misconduct received		
24	[and the resolution of each complaint];		
25	2. THE NUMBER OF LICENSEES, CERTIFICATE HOLDERS,		
26	AND COMPLAINANTS INVOLVED IN THE COMPLAINTS OF SEXUAL MISCONDUCT		
27	LISTED SEPARATELY BY CATEGORY;		
28	3. THE NUMBER OF COMPLAINTS OF SEXUAL		
29	MISCONDUCT STILL UNDER INVESTIGATION;		
30	4. THE NUMBER OF COMPLAINTS OF SEXUAL		
31	MISCONDUCT THAT WERE CLOSED WITH NO DISCIPLINARY ACTION;		
<u>.</u>			
32	5. THE NUMBER OF COMPLAINTS OF SEXUAL		
33	MISCONDUCT THAT RESULTED IN INFORMAL OR NONPUBLIC ACTION;		

16.THE NUMBER OF COMPLAINTS OF SEXUAL2MISCONDUCT THAT WERE REFERRED TO THE OFFICE OF THE ATTORNEY GENERAL3FOR PROSECUTORIAL ACTION;

- 47. THE NUMBER OF COMPLAINTS OF SEXUAL5MISCONDUCT THAT RESULTED IN EACH OF THE FOLLOWING:
- 6A.LICENSE REVOCATION;7B.SUSPENSION;8C.PROBATION;9D.REPRIMAND; AND10E.DENIAL OF LICENSURE;

118.THE NUMBER OF COMPLAINTS OF SEXUAL12MISCONDUCT THAT WERE FORWARDED TO LAW ENFORCEMENT FOR POSSIBLE13CRIMINAL PROSECUTION; AND

14
9. FOR ANY OTHER ACTIONS TAKEN REGARDING
15 COMPLAINTS OF SEXUAL MISCONDUCT, A DETAILED BREAKDOWN OF THE TYPES OF
16 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.

20 (2) The Secretary shall compile the information received from the health 21 occupations boards and submit an annual report to the General Assembly, in accordance 22 with § 2–1246 of the State Government Article, not later than December 31 of each year.

23 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.

30(II) A HEALTH OCCUPATIONS BOARD MAY ENTER INTO AN31 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.

5 (2) A licensed pharmacist who has entered into a prescriber-pharmacist 6 agreement shall submit to the Board of Pharmacy a copy of the prescriber-pharmacist 7 agreement and any subsequent modifications made to the prescriber-pharmacist 8 agreement or the protocols specified in the prescriber-pharmacist agreement.

9 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.

12 **14–205.1.** 

13 ON OR BEFORE OCTOBER 1 EACH YEAR, THE BOARD SHALL SUBMIT TO THE 14 GOVERNOR, THE SECRETARY, AND, IN ACCORDANCE WITH § 2–1246 OF THE STATE 15 GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY AN ANNUAL REPORT THAT 16 INCLUDES THE FOLLOWING DATA CALCULATED ON A FISCAL YEAR BASIS:

17

(1) **RELEVANT DISCIPLINARY INDICATORS, INCLUDING:** 

18 (I) THE NUMBER OF PHYSICIANS INVESTIGATED UNDER EACH 19 OF THE DISCIPLINARY GROUNDS ENUMERATED UNDER § 14–404 OF THE HEALTH 20 OCCUPATIONS ARTICLE;

21(II)THE NUMBER OF PHYSICIANS WHO WERE REPRIMANDED OR22PLACED ON PROBATION OR WHO HAD THEIR LICENSES SUSPENDED OR REVOKED;

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

25(IV)THE CRITERIA USED TO ACCEPT AND REJECT CASES FOR26PROSECUTION; AND

27(V)THE NUMBER OF UNRESOLVED ALLEGATIONS PENDING28BEFORE THE BOARD;

29 (2) THE AVERAGE LENGTH OF THE TIME SPENT INVESTIGATING 30 ALLEGATIONS BROUGHT AGAINST PHYSICIANS UNDER EACH OF THE DISCIPLINARY 31 GROUNDS ENUMERATED UNDER § 14–404 OF THE HEALTH OCCUPATIONS ARTICLE;

	6 HOUSE BILL 1265
1	(3) THE NUMBER OF CASES NOT COMPLETED WITHIN 18 MONTHS AND
2	THE REASONS FOR THE FAILURE TO COMPLETE THE CASES IN 18 MONTHS;
3	(4) FOR BOTH PHYSICIANS AND ALLIED HEALTH PROFESSIONALS:
4	(I) THE NUMBER OF INITIAL AND RENEWAL LICENSES ISSUED;
5	(II) THE NUMBER OF POSITIVE AND NEGATIVE CRIMINAL
6	HISTORY RECORDS CHECKS RESULTS RECEIVED;
7	(III) THE NUMBER OF INDIVIDUALS DENIED INITIAL OR
8	RENEWAL LICENSURE DUE TO POSITIVE CRIMINAL HISTORY RECORDS CHECKS
9	RESULTS; AND
10	(IV) THE NUMBER OF INDIVIDUALS DENIED INITIAL OR
11	RENEWAL LICENSURE DUE TO REASONS OTHER THAN A POSITIVE CRIMINAL
12	HISTORY RECORDS CHECK; AND
13	(5) THE ADEQUACY OF CURRENT BOARD STAFFING IN MEETING THE
14	WORKLOAD OF THE BOARD.
15	14-205.2.
16	(A) SUBJECT TO SUBSECTION (B) OF THIS SECTION, THE BOARD SHALL
17	PROVIDE TRAINING AT LEAST ONCE EVERY 3 YEARS TO THE PERSONNEL OF THE
$\frac{18}{19}$	OFFICE OF ADMINISTRATIVE HEARINGS IN ORDER TO IMPROVE THE QUALITY AND EFFICIENCY OF THE HEARINGS IN PHYSICIAN DISCIPLINE CASES.
19	EFFICIENCI OF THE HEARINGS IN FHISICIAN DISCIFLINE CASES.
20	(B) THE TRAINING PROVIDED UNDER SUBSECTION (A) OF THIS SECTION
21	SHALL INCLUDE MEDICAL TERMINOLOGY, MEDICAL ETHICS, AND, TO THE EXTENT
22 92	POSSIBLE, DESCRIPTIONS OF BASIC MEDICAL AND SURGICAL PROCEDURES
23	CURRENTLY IN USE.
24	14-302.
25	(a) Subject to the rules, regulations, and orders of the Board, the following

(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) 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;]

1 **[**(2)**] (1)** A physician licensed by and residing in another jurisdiction, if  $\mathbf{2}$ the physician: 3 Is engaged in consultation with a physician licensed in the State (i) about a particular patient and does not direct patient care; or 4  $\mathbf{5}$ (ii) Meets the requirements of § 14–302.1 of this subtitle; 6 A physician employed in the service of the federal government **[**(3)**] (2)** 7while performing the duties incident to that employment; **[**(4)**]**(3) 8 A physician who resides in and is authorized to practice medicine 9 by any state adjoining this State and whose practice extends into this State, if: 10 The physician does not have an office or other regularly (i) appointed place in this State to meet patients; and 11 12The same privileges are extended to licensed physicians of this (ii) 13State by the adjoining state; and 14**[**(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 15been approved by the Board, if the individual submits an application to the Board on or 1617before October 1, 1993, and either: 18 (i) 1. Has a master's degree from an accredited college or 19university; and 202. Has completed a graduate program accepted by the Board 21in a behavioral science that includes 1,000 hours of supervised clinical psychotherapy experience; or 2223(ii) 1. Has a baccalaureate degree from an accredited college or 24university; and 252. Has 4,000 hours of supervised clinical experience that is 26approved by the Board. 14 - 302.2.2728(A) SUBJECT TO THE RULES, REGULATIONS, AND ORDERS OF THE BOARD, A MEDICAL STUDENT OR AN INDIVIDUAL IN A POSTGRADUATE MEDICAL TRAINING 29PROGRAM THAT IS APPROVED BY THE BOARD, WHILE DOING ASSIGNED DUTIES AT 30 31 ANY OFFICE OF A LICENSED PHYSICIAN, HOSPITAL, CLINIC, OR SIMILAR FACILITY,

32 MAY PRACTICE MEDICINE WITHOUT A LICENSE IF THE INDIVIDUAL SUBMITS TO A

1 CRIMINAL HISTORY RECORDS CHECK IN ACCORDANCE WITH § 14–308.1 OF THIS 2 SUBTITLE.

3 (B) THE BOARD MAY DISCIPLINE AN INDIVIDUAL WHO IS EXEMPT FROM 4 LICENSURE UNDER SUBSECTION (A) OF THIS SECTION IN THE SAME MANNER AND 5 BASED ON THE SAME GROUNDS AS IF THE INDIVIDUAL WERE A LICENSED PHYSICIAN.

6 14-316.

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

9 (i) Annual renewal applicants as determined by regulations 10 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:

- 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 not renew or reinstate a license if the criminal history 27 record information required under § 14–308.1 of this subtitle has not been received.

28 14-401.1.

29 (a) (5) (i) If a complaint proceeds to a hearing under § 14–405 of this 30 subtitle, § 14–5A–17, § 14–5B–14, § 14–5C–17, § 14–5D–15, [or] § 14–5E–16, OR §

1 14-5F-21 of this title, or § 15-315 of this article, the chair of the disciplinary panel that 2 was assigned the complaint under paragraph (2)(i) of this subsection shall refer the 3 complaint to the other disciplinary panel.

4 (c) (1) Except as otherwise provided in this subsection, after being assigned a 5 complaint under subsection (a) of this section, the disciplinary panel may:

- 6 (i) Refer an allegation for further investigation to the entity that 7 has contracted with the Board under subsection (e) of this section;
- 8
- (ii) Take any appropriate and immediate action as necessary; or

9 (iii) Come to an agreement for corrective action with a licensee 10 pursuant to paragraph (4) of this subsection.

11 (2)(i) [After] IF, AFTER being assigned a complaint AND 12**COMPLETING THE PRELIMINARY INVESTIGATION**, the disciplinary panel **FINDS THAT** 13THE LICENSEE MAY HAVE VIOLATED § 14-404(A)(22) OF THIS SUBTITLE, THE DISCIPLINARY PANEL shall refer [any] THE allegation [in the complaint based on § 141514-404(a)(22) of this subtitle to the entity or entities that have contracted with the Board 16under subsection (e) of this section for further investigation and physician peer review 17within 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.

21 [(j) Those individuals not licensed under this title but covered under § 22 14-413(a)(1)(ii)3 and 4 of this subtitle are subject to the hearing provisions of § 14-405 of 23 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.

28 (2) If a disciplinary panel is unable to complete the disposition of a 29 complaint within 1 year, the Board shall include in the record of that complaint a detailed 30 explanation of the reason for the delay.

[(1)] (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.

- 10
- 1 14-411.1.

2 (b) The Board shall create and maintain a public individual profile on each 3 licensee that includes the following information:

4 (6) Medical education and practice information about the licensee 5 including:

6 (iv) The name of any hospital where the licensee has medical 7 privileges [as reported], IF KNOWN to the Board [under § 14–413 of this subtitle];

8 14-413.

14

9 (a) (1) [Every 6 months, each] EACH hospital and related institution shall 10 [file with] SUBMIT TO the Board a report [that:

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

131.Is employed by the hospital or related institution;

2. Has privileges with the hospital or related institution; and

153.Has applied for privileges with the hospital or related16institution; and

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

19 [1.] (I) The hospital or related institution denied the 20 application of a physician for staff privileges or limited, reduced, otherwise changed, or 21 terminated the staff privileges of a physician, or the physician resigned whether or not 22 under formal accusation, if the denial, limitation, reduction, change, termination, or 23 resignation is for reasons that might be grounds for disciplinary action under § 14–404 of 24 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;

1 [4.] (IV) A licensed physician or an individual in a 2 postgraduate training program voluntarily resigned from the staff, employ, or training 3 program of the hospital or related institution for reasons that might be grounds for 4 disciplinary action under § 14–404 of this subtitle; or

5 [5.] (V) The hospital or related institution placed any other 6 restrictions or conditions on any of the licensed physicians OR INDIVIDUALS IN A 7 POSTGRADUATE TRAINING PROGRAM as listed in items [1 through 4 of this item] (I) 8 THROUGH (IV) OF THIS PARAGRAPH for any reasons that might be grounds for 9 disciplinary action under § 14-404 of this subtitle.

10

The hospital or related institution shall[:

11 (i) Submit the report within 10 days of any action described in 12 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.

15 14-414.

(2)

16 (a) (1) [Every 6 months, each] **EACH** alternative health system as defined in 17 § 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 6months preceding the report:

201.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

24 (ii) States whether, as to each licensed physician, during the 6 25 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

$1 \\ 2 \\ 3$	restrictions or conditions on any licensed physician for any reasons that migh	•
4	(2) The alternative health system shall[:	
$5 \\ 6$		described in
7 8		or the nature
9	14–5A–13.	
10 11		ninal history
12 13		regulations
$\begin{array}{c} 14 \\ 15 \end{array}$		
16 17 18 19 20	forwarded to the Board in accordance with § 14–308.1 of this title, in determine [to renew or reinstate a license] DISCIPLINARY ACTION SHOULD BE TAKEN THE CRIMINAL HISTORY RECORD INFORMATION, AGAINST A LICH	ning whether N, BASED ON
21	(i) The age at which the crime was committed;	
22	(ii) The nature of the crime;	
23	(iii) The circumstances surrounding the crime;	
24	(iv) The length of time that has passed since the crime;	
25	(v) Subsequent work history;	
26	(vi) Employment and character references; and	
$\begin{array}{c} 27\\ 28 \end{array}$		ensee poses a
29 30		•

1 14–5A–25.

2 Subject to the evaluation and reestablishment provisions of the Maryland Program 3 Evaluation Act and subject to the termination of this title under § 14–702 of this title, this 4 subtitle and all rules and regulations adopted under this subtitle shall terminate and be of 5 no effect after July 1, [2018] **2023**.

6 14–5B–12.

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

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

11 (ii) Each former licensee who files for reinstatement under 12 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:

- 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 not renew or reinstate a license if the criminal history 27 record information required under § 14–308.1 of this title has not been received.

28 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.

3 14–5C–14.

4 (g) (1) Beginning October 1, 2016, the Board shall require a criminal history 5 records check in accordance with § 14–308.1 of this title for:

6 (i) Annual renewal applicants as determined by regulations 7 adopted by the Board; and

8 (ii) Each former licensee who files for reinstatement under 9 subsection (f) of this section after failing to renew the license for a period of 1 year or more.

10 (2) On receipt of the criminal history record information of a licensee 11 forwarded to the Board in accordance with § 14–308.1 of this title, in determining whether 12 [to renew or reinstate a license] DISCIPLINARY ACTION SHOULD BE TAKEN, BASED ON 13 THE CRIMINAL HISTORY RECORD INFORMATION, AGAINST A LICENSEE WHO 14 RENEWED OR REINSTATED A LICENSE, the Board shall consider:

15

- (i) The age at which the crime was committed;
- 16 (ii) The nature of the crime;
- 17 (iii) The circumstances surrounding the crime;
- 18 (iv) The length of time that has passed since the crime;
- 19 (v) Subsequent work history;
- 20 (vi) Employment and character references; and
- 21 (vii) Other evidence that demonstrates whether the licensee poses a 22 threat to the public health or safety.

(3) The Board may not renew or reinstate a license if the criminal history
 record information required under § 14–308.1 of this title has not been received.

25 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**.

30 14–5D–12.

1 (h) (1) Beginning October 1, 2016, the Board shall require a criminal history 2 records check in accordance with § 14–308.1 of this title for:

3 (i) Annual renewal applicants as determined by regulations 4 adopted by the Board; and

5 (ii) Each former licensee who files for reinstatement under 6 subsection (f) of this section after failing to renew the license for a period of 1 year or more.

7 (2) On receipt of the criminal history record information of a licensee 8 forwarded to the Board in accordance with § 14–308.1 of this title, in determining whether 9 [to renew or reinstate a license] DISCIPLINARY ACTION SHOULD BE TAKEN, BASED ON 10 THE CRIMINAL HISTORY RECORD INFORMATION, AGAINST A LICENSEE WHO 11 RENEWED OR REINSTATED A LICENSE, the Board shall consider:

- 12 (i) The age at which the crime was committed;
- 13 (ii) The nature of the crime;
- 14 (iii) The circumstances surrounding the crime;
- 15 (iv) The length of time that has passed since the crime;
- 16 (v) Subsequent work history;
- 17 (vi) Employment and character references; and

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

20 (3) The Board may not renew or reinstate a license if the criminal history 21 record information required under § 14–308.1 of this title has not been received.

22 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**.

27 14–5E–13.

28 (g) (1) Beginning October 1, 2016, the Board shall require a criminal history 29 records check in accordance with § 14–308.1 of this title for:

30 (i) Annual renewal applicants as determined by regulations 31 adopted by the Board; and

Each former licensee who files for reinstatement under 1 (ii)  $\mathbf{2}$ subsection (f) of this section after failing to renew the license for a period of 1 year or more. 3 (2)On receipt of the criminal history record information of a licensee 4 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  $\mathbf{5}$ THE CRIMINAL HISTORY RECORD INFORMATION, AGAINST A LICENSEE WHO 6 7 **RENEWED OR REINSTATED A LICENSE**, the Board shall consider: 8 (i) The age at which the crime was committed; 9 (ii) The nature of the crime; 10 (iii) The circumstances surrounding the crime; The length of time that has passed since the crime; 11 (iv) 12Subsequent work history; (v) (vi) 13 Employment and character references; and 14Other evidence that demonstrates whether the licensee poses a (vii) threat to the public health or safety. 1516 (3)The Board may not renew or reinstate a license if the criminal history 17record information required under § 14–308.1 of this title has not been received. 18 14-5E-25. 19 Subject to the evaluation and reestablishment provisions of the Maryland Program 20Evaluation 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 21after July 1, [2018] 2023. 222314–5F–15. 24(d) Beginning October 1, 2016, the Board shall require a criminal history (1)25records check in accordance with § 14–308.1 of this title for: 26(i) Annual renewal applicants as determined by regulations adopted by the Board; and 2728Each former licensee who files for reinstatement under § (ii) 2914–5F–16(b) of this subtitle after failing to renew the license for a period of 1 year or more.

$1 \\ 2 \\ 3 \\ 4 \\ 5$	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		
6	(i)	The age at which the crime was committed;	
7	(ii)	The nature of the crime;	
8	(iii)	The circumstances surrounding the crime;	
9	(iv)	The length of time that has passed since the crime;	
10	(v)	Subsequent work history;	
11	(vi)	Employment and character references; and	
12 13	(vii) threat to the public healt	Other evidence that demonstrates whether the licensee poses a th or safety.	
$\begin{array}{c} 14 \\ 15 \end{array}$		Board may not renew or reinstate a license if the criminal history red under § 14–308.1 of this title has not been received.	
16	14–5F–32.		
$17 \\ 18 \\ 19$	-	luation and reestablishment provisions of the Program Evaluation rules and regulations adopted under this subtitle shall terminate July 1, <b>[</b> 2018 <b>] 2023</b> .	
20	14-602.		
21 22 23 24	of this title may use th	sed individual who acts under § 14–302, § 14–302.2, or § 14–306 e word "physician" together with another word to describe the dual as in phrases such as "physician's assistant" or "physician's	
25	14–606.		
$\frac{26}{27}$	(a) (4) Exception (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	pt as provided in paragraph (5) of this subsection, a person who -602 of this subtitle is:	
$\begin{array}{c} 28\\ 29 \end{array}$	(i) exceeding \$10,000 or imp	Guilty of a felony and on conviction is subject to a fine not prisonment not exceeding 5 years or both; and	

30 (ii) Subject to a civil fine of not more than \$50,000 to be levied by the

31 Board.

1 (5)The provisions of paragraph (4) of this subsection do not apply to a  $\mathbf{2}$ FORMER licensee who has failed to renew a license under § 14–316 of this title if: 3 Less than 60 days have elapsed since the expiration of the (i) 4 license: and  $\mathbf{5}$ (ii) The **FORMER** licensee has applied for license [renewal] **REINSTATEMENT**, including payment of the [renewal] **REINSTATEMENT** fee. 6 7 14 - 702.8 Subject to the evaluation and reestablishment provisions of the Program Evaluation 9 Act, this title and all rules and regulations adopted under this title shall terminate and be of no effect after July 1, [2018] 2023. 10 11 15 - 307.12(g) (1)Beginning October 1, 2016, the Board shall require a criminal history 13records check in accordance with § 14–308.1 of this article for: 14Annual renewal applicants as determined by regulations (i) 15adopted by the Board; and 16Each former licensee who files for reinstatement under this title (ii) 17after failing to renew the license for a period of 1 year or more. On receipt of the criminal history record information of a licensee 18(2)forwarded to the Board in accordance with § 14-308.1 of this article, in determining 19 20whether [to renew or reinstate a license] **DISCIPLINARY ACTION SHOULD BE TAKEN**, 21BASED ON THE CRIMINAL HISTORY RECORD INFORMATION, AGAINST A LICENSEE 22WHO RENEWED OR REINSTATED A LICENSE, the Board shall consider: 23The age at which the crime was committed: (i) 24The nature of the crime; (ii) 25(iii) The circumstances surrounding the crime; 26(iv) The length of time that has passed since the crime; 27Subsequent work history; (v) 28Employment and character references; and (vi)

$\frac{1}{2}$	threat to th	(vii) Other evidence that demonstrates whether the licensee poses a ne public health or safety.	
$\frac{3}{4}$	record info	(3) The Board may not renew or reinstate a license if the criminal history rmation required under § 14–308.1 of this article has not been received.	
5	15-502.		
6 7 8	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, <b>[</b> 2018 <b>] 2023</b> .		
9		Article – Insurance	
10	24-201.		
11	(a)	In this subtitle the following words have the meanings indicated.	
12	(d)	"Physician" means an individual who:	
13		(1) is licensed to practice medicine in the State; or	
$\begin{array}{c} 14 \\ 15 \end{array}$	through (4)	(2) lawfully practices medicine without a license under [§ 14–302(1)] § 14–302(1) THROUGH (3) OR § 14–302.2 of the Health Occupations Article.	
16		Article – State Government	
17	8–405.		
18	(a)	The Department shall:	
19 20	evaluated u	(1) conduct a full evaluation of each governmental activity or unit to be under this section; and	
21		(2) prepare a report on each full evaluation conducted.	
$22 \\ 23 \\ 24$	-	Each of the following governmental activities or units and the statutes and a that relate to the governmental activities or units are subject to full evaluation, uation year specified, without the need for a preliminary evaluation:	
$\begin{array}{c} 25\\ 26 \end{array}$	[2016] <b>202</b>	<ul><li>(5) Physicians, State Board of (§ 14–201 of the Health Occupations Article:</li><li>1), including:</li></ul>	
$\begin{array}{c} 27\\ 28 \end{array}$	Occupation	(i) Athletic Training Advisory Committee (§ 14–5D–04 of the Health as Article: [2016] <b>2021</b> );	

1 2	(ii) Naturopathic Medicine Advisory Committee (§ 14–5F–04 of the Health Occupations Article: [2016] <b>2021</b> );
$\frac{3}{4}$	(iii) Perfusion Advisory Committee (§ 14–5E–05 of the Health Occupations Article: [2016] <b>2021</b> );
$5\\6$	(iv) Physician Assistant Advisory Committee (§ 15–201 of the Health Occupations Article: [2016] <b>2021</b> );
7 8	(v) Polysomnography Professional Standards Committee (§ 14–5C–05 of the Health Occupations Article: [2016] <b>2021</b> );
9 10 11	(vi) Radiation Therapy, Radiography, Nuclear Medicine Technology Advisory, and Radiology Assistance Committee (§ 14–5B–05 of the Health Occupations Article: [2016] <b>2021</b> ); and
12 13	(vii) Respiratory Care Professional Standards Committee (§ 14–5A–05 of the Health Occupations Article: [2016] <b>2021</b> ).
14	Chapter 539 of the Acts of 2007
15 16 17	[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.]
18 19 20 21 22 23	[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.]
$\begin{array}{c} 24 \\ 25 \end{array}$	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
26 27 28	[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:
29	(1) Relevant disciplinary indicators, including:
$\begin{array}{c} 30\\ 31 \end{array}$	(i) The number of physicians investigated under each of the disciplinary grounds enumerated under § 14–404 of the Health Occupations Article;
32 33	(ii) The number of physicians who were reprimanded or placed on probation or who had their licenses suspended or revoked;

$\frac{1}{2}$	grounds;	(iii)	The number of cases prosecuted and dismissed and on what
3		(iv)	The criteria used to accept and reject cases for prosecution; and
4		(v)	The number of unresolved allegations pending before the Board;
5 6 7	(2) against physicians the Health Occupa	unde	average length of the time spent investigating allegations brought r each of the disciplinary grounds enumerated under § 14–404 of Article;
8 9	(3) for the failure to co		number of cases not completed within 18 months and the reasons the cases in 18 months;
10 11 12		nnicia	number and nature of allegations filed with the Board concerning ns, aviation trauma technicians, emergency medical technicians, cians, and physician assistants; and
13 14	(5) Board.]	The a	adequacy of current Board staffing in meeting the workload of the
15 16 17 18	SECTION 2. 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 October 1, 2017, the Board shall include:		
19 20 21	(1) issuing licenses wi for the allied healt	thin 1	scription of the efforts the Board has taken to meet the goal of 0 days after the receipt of the last qualifying document, especially essionals;
$22 \\ 23 \\ 24$		y Con	indings and recommendations of the Board and the Physician nmittee regarding ways to expedite the process for physician duties under a delegation agreement; and
25 26 27 28		und, if	her it is feasible to describe any underlying sexual misconduct in it is not feasible, a description of other steps that the Board can for the public to determine whether a case involved sexual
29 30 31 32	Board of Physician	ns is i	BE IT FURTHER ENACTED, That, in the annual report the State required to submit under § 14–205.1 of the Health Occupations ection 1 of this Act, on or before October 1, 2018, the Board shall
$\frac{33}{34}$	(1) was recommended		esults of the internal fiscal analysis and reassessment of fees that he Department of Legislative Services in the December 2016

1 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;

4 (2) comments on the Board's fund balance in light of the additional 5 retained revenue that resulted from Chapter 178 of the Acts of the General Assembly of 6 2016; and

7 (3) steps the Board has taken to address ongoing issues with filling staff 8 vacancies and the impact that filling vacancies will have on Board expenditures and the 9 Board's fund balance.

10 SECTION 4. AND BE IT FURTHER ENACTED, That, in the annual report the State 11 Board of Physicians is required to submit under § 14–205.1 of the Health Occupations 12 Article, as enacted by Section 1 of this Act, on or before December 1, 2019, the Board shall 13 report:

14

(1) whether criminal history records checks are causing delays in licensure;

15 (2) whether existing Board staff are able to manage the criminal history 16 records checks workload; and

17 (3) any other concerns the Board has regarding the criminal history 18 records checks requirement.

19 SECTION 5. AND BE IT FURTHER ENACTED, That, if the State Board of 20 Physicians determines it is practicable to move certain cases that are under the jurisdiction 21 of the full Board to the jurisdiction of the disciplinary panels, the Board shall submit to the 22 Senate Education, Health, and Environmental Affairs Committee and the House Health 23 and Government Operations Committee, in accordance with § 2–1246 of the State 24 Government Article, a proposal that includes the following:

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

28 SECTION 6. AND BE IT FURTHER ENACTED, That, notwithstanding § 8–405(e) 29 of the State Government Article, the full evaluation required to be conducted by the 30 Department of Legislative Services on or before December 1, 2021, shall be limited to 31 evaluating:

32 (1) the implementation of recommendations made by the Department in 33 the December 2016 publication "Sunset Review: Evaluation of the State Board of 34 Physicians and the Related Allied Health Advisory Committees";

(2) the efficacy of the two-panel disciplinary system;

1

2 (3) if a proposal is not submitted under Section 5 of this Act by April 1, 3 2021, whether certain cases should be moved from the jurisdiction of the full State Board 4 of Physicians to the jurisdiction of the disciplining panels; and

5 (4) the impact of the criminal history records checks on the State Board of 6 Physicians and its licensees.

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