

The Maryland State Medical Society

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- TO: The Honorable Peter A. Hammen, Chairman Members, House Health & Government Operations Committee
- FROM: Joseph A. Schwartz, III Pamela Metz Kasemeyer J. Steven Wise

DATE: February 27, 2013

RE: **SUPPORT WITH AMENDMENTS** – House Bill 1096 – State Board of Physicians and Allied Health Advisory Committees – Sunset Extension and Program Evaluation

The Maryland State Medical Society (MedChi), which represents over 7,500 Maryland physicians and their patients, supports House Bill 1096 with amendments.

House Bill 1096 makes numerous changes to the statute governing the Board of Physicians, and is premised upon both the Sunset Review and the Perman Report which was completed during the interim. Rather than reviewing each of these changes, MedChi will only address those which it believes need amendment.

First, under Section 14-205 (a)(8) and (9)(I) of the bill, there is reference to the Board "identifying" physicians who are dependent upon alcohol or other addictive substances. The Board has always been a complaint-driven body and MedChi believes that approach has worked well. We are concerned with what might be entailed in any "identification" process that goes beyond the mechanisms currently in place and which are working quite well according to the Sunset Report. <u>Accordingly, we would ask that these provisions be stricken</u>.

Second, the legislation takes the Board from 21 to 22 members and then divides the Board into two panels for purposes of disciplinary action. MedChi believes this will help with the case backlog that was, until recently, a significant problem which caused tremendous delays for the public and physicians alike. However, the bill allows each of the two 11-member panels to take action when a quorum of 6 members is present. In short, this would allow a 4 member majority to implement disciplinary action, and it is possible that

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none of the 4 would be physicians. This runs counter to the entire premise of the Board system which is to have peers judge the actions of licensees (See Section 1-102 of the bill). Therefore, MedChi would request an amendment stating that "At least 2 members voting in favor of disciplinary action shall be physicians."

Third, and by way of technical amendments, MedChi believes the functioning of the two disciplinary panels need clarification. At Section 14-401.1(a)(5)(I) of the bill, before the word "assigned," the word "initially" should be inserted to clarify which panel is referred to. The same change should be made in (II). Then, the bill identifies actions which the initial disciplinary panel cannot take, and these should be amended to prohibit communication between the two panels as follows: "Communicate with Members of the second disciplinary panel regarding the substance of the complaint or its disposition."

With these amendments, MedChi supports this legislation.

For more information call:

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