PROPOSED REGULATION PUBLICATION FORMS

Title 10

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Subtitle BOARD OF PHYSICIANS

10.32.13 Physician Licensure by Conceded Eminence

Authority: Health Occupations Article, § 14-307-319, Annotated Code of Maryland

Is There Emergency Text That Is Identical To The Proposed Text:

___ Yes X No

Is There An Incorporation By Reference Document Associated With This Proposal?

___ Yes X No

Does This Proposal Have An Impact On Environmental Hazards Affecting The Health Of Children As Defined In Health-General Article, §13-1501(c)?

___ Yes (explain) X No

Does This Proposal Include An Increase Or Decrease In A Fee For A License?

___ Yes, complete (1)—(8) X No, skip (1)—(8) and proceed to Notice of Proposed Action.

(1) Explain/justify why an increase or decrease is necessary:

(2) How much money is needed to operate effectively or to eliminate an operating fund deficit?

(3) In what year was the most recent fee increase?

(4) Is the fee revenue retained by the Proposing Unit or passed through to a national organization that administers a uniform licensing exam?

(5) Describe any measures taken to mitigate the need for increased revenue:

(6) Describe any special circumstances that have had an adverse impact on the Proposing Unit's operating expenses.

(7) Describe any consideration given by the Proposing Unit as to the hardship a fee increase may have on the regulated profession.

(8) Describe any efforts to solicit the opinions of licensees regarding the Proposing Unit's effectiveness and performance.

Notice of Proposed Action

The Secretary of Health and Mental Hygiene proposes to amend .02,.03, .04, .06, and .08

Statement of Purpose

The purpose of this proposal is to add a new definition, revise the Qualifications for Special License by Conceded Eminence, and revise to clarify the Limited Practice, Term and Renewal of License, and Termination and New Appointment sections of the regulations.

Comparison to Federal Standards
(Check one option)

X There is no corresponding federal standard to this proposed action.

or

___ There is a corresponding federal standard to this proposed action, but the proposed action **is not** more restrictive or stringent.

The corresponding federal standard is: _____

EXPLAIN why the proposed action **is not** more restrictive or stringent than the corresponding federal standard:

or

___ In compliance with Executive Order 01.01.1996.03, this proposed action **is** more restrictive or stringent than corresponding federal standards as follows:

(1) Regulation citation and manner in which it is more restrictive than the applicable federal standard:

(2) Benefit to the public health, safety or welfare, or the environment:

(3) Analysis of additional burden or cost on the regulated person:

(4) Justification for the need for more restrictive standards:

Impact Statements
Part A
(check one option)

Estimate of Economic Impact

X The proposed action has no economic impact.

Or

___ The proposed action has an economic impact. (**IF** this is checked, complete the following form in its entirety)

I. Summary of Economic Impact. (INSERT SHORT SUMMARY)

II. Types of Economic Impact.	Revenue (R+/R-) Expenditure (E+/E-)	Magnitude
A. On issuing agency:		
B. On other State agencies:		
C. On local governments:		
	Benefit (+) Cost (-)	Magnitude
D. On regulated industries or trade groups:		
E. On other industries or trade groups:		
F. Direct and indirect effects on public:		

III. Assumptions. (Identified by Impact Letter and Number from Section II.)

Part B
Economic Impact on Small Businesses
(check one option)

X The proposed action has minimal or no economic impact on small businesses.

or

___ The proposed action has a meaningful economic impact on small businesses. An analysis of this economic impact follows.

Impact on Individuals with Disabilities
(check one option)

X The proposed action has no impact on individuals with disabilities.

or

___ The proposed action has an impact on individuals with disabilities as follows: (Agency to complete this assessment)

Opportunity for Public Comment

Comments may be sent to Mark Woodard, Health Policy Analyst II, Board of Physicians, 4201 Patterson Avenue, 4th floor, Baltimore, MD 21215, or call 410-764-2460, or email to

mark.woodard@maryland.gov, or fax to 410-358-2252. Comments will be accepted through (leave blank). A public hearing has not been scheduled.

Part C
(For legislative use only; not for publication)

A. Fiscal Year in which regulations will become effective: FY '18

B. Does the budget for fiscal year in which regulations become effective contain funds to implement the regulations?

__ Yes __ No X N/A

C. If "yes", state whether general, special (exact name), or federal funds will be used:

D. If "no", identify the source(s) of funds necessary for implementation of these regulations: Existing board resources.

E. If these regulations have no economic impact under Part A, indicate reason briefly: These regulations revise and clarify existing regulations that is not expected to generate additional work.

F. If these regulations have minimal or no economic impact on small businesses under Part B, indicate the reason. There is no fee increase nor any other impact on small business.

10.32.13.02
.02 Definitions.
A. In this chapter, the following terms have the meanings indicated.
B. Terms Defined.
(1)-(5) (text unchanged)
(6) "First Author" means the first named author of a publication such as a research article or the author who served as the principal investigator for a research project.
[(6)] *(7)* "Index Medicus" means an international list of periodicals concerning the practice of medicine.
[(7)] *(8)* "LCME" means Liaison Committee on Medical Education of the American College of Medical Education and the American Medical Association.
[(8)] *(9)* "LMCC" means Licentiate of the Medical Council of Canada, or its successor.
[(9)] *(10)* "Malpractice history" means a list of claims filed against a health care provider for damage due to medical injuries as described in Courts and Judicial Proceedings Article, Title 3, Subtitle 2A, Annotated Code of Maryland, or adverse action reports made to the National Practitioner Data Bank of the federal government, or both.
[(10)] *(11)* "Medical licensing examination results" means scores or results of examinations such as the:
(a) Educational Commission for Foreign Medical Graduates (ECFMG), or its successor;
(b) Federation Licensing Examination (FLEX) designed by the Federation of State Medical Boards;
(c) National Board of Medical Examiners (NBME);

(d) United States Medical Licensing Examination (USMLE) designed by the Federation of State Medical Boards; and

(e) Special Purpose Examination prepared by the Federation of State Medical Boards (SPEX).

[(11)] *(12)* "Speech impairment" means a disorder of the voice, in articulation of speech sounds, or nonfluency in the speaker's native language.

[(12)] *(13)* "Test of Spoken English" means the Educational Testing Service examination designed to evaluate the spoken English proficiency of those whose native language is not English.

[(13)] *(14)* "World Health Organization directory" means the World Directory of Medical Schools, an international list of recognized medical schools compiled by the World Health Organization agency of the United Nations.

10.32.13.03

.03 Qualifications for Special License by Conceded Eminence.

A.-B (2) (b) (2) (b) (text unchanged)

c) The degree of supervision, [if any], under which the physician will function [.];

(3) Presenting the Board with a detailed statement describing the applicant's conceded eminence and authority in the profession.

C. Evidence of Teaching, Research, and Achievement. An applicant shall demonstrate eminence and authority in the profession by meeting [at least three of] the following qualifications which are necessary, but not by themselves sufficient, for licensure under this chapter:

[(1) Within 10 years before the application, have published original results of clinical research in a medical journal listed in the Index Medicus or in an equivalent scholarly publication, and have submitted these articles to the Board in English or in a foreign language with verifiable, certified translations in English; or]

[(2)] *(1)* Have held an appointment at a medical school approved by the LCME or at any medical school listed in the World Health Organization directory at the level of associate or full professor, or its equivalent, for at least 5 years;

[(3) Within 10 years before the application, have developed a treatment modality, surgical technique, or other verified original contribution to the field of medicine, which is attested to by the dean of a school of medicine in the State or by the director of the National Institutes of Health;]

[(4)] *(2)* Have actively practiced medicine cumulatively for *10 years after completion of postgraduate training, including clinical research;* [15 years, which may include up to 5 years sabbatical during which the applicant was involved in research; and]

[(5)] *(3)* Be a member in good standing of a board of the American Board of Medical Specialties or other equivalent specialty board[.];

(4) Possess a current, active, unrestricted license to practice medicine in another state or country, or is otherwise recognized under the laws of the other country or jurisdiction as a medical doctor in that jurisdiction; and

(5) One of the following:

(a) Within 10 years before the application, have published original results of clinical research, as first author, in a medical journal listed in the Index Medicus or in an equivalent scholarly publication acceptable to the Board, and have submitted these articles to the Board in English or in a foreign language with verifiable, certified translations in English;

(b) Within 10 years before the application, have developed a treatment modality, surgical technique, or other verified original contribution to the field of medicine, which is attested to by the dean of a school of medicine in the State or by the director of the National Institutes of Health.

D. Supervision. The Board [may] *shall* require an applicant to submit the name of a licensed physician who will supervise the medical services provided by the applicant for the first 6 months *of practice* and a detailed description of the medical services, duties, and responsibilities that the applicant will perform.

10.32.13.04

.04 Limited Practice.

An applicant for licensure is restricted so that the applicant shall:

A. *Practice medicine only in the limited field approved by the Board that is consistent with the applicant's area of conceded eminence experience.*

[A.] *B.* For the first 6 months *of practice, practice medicine only* within the institution[s] and program[s] specified within the application, *under the supervision of a licensed physician*;

[B.] *C.* Following the first 6 months *of practice*, practice medicine only at an institution similar to that named in the original application and after approval by the Board; and

[C.] *D.* Practice medicine under any conditions which the Board may set.

10.32.13.06

.06 Term and Renewal of License by Conceded Eminence and Authority in the Profession.

A. Term and Tenure.

(1) The initial license is active for a period [of 6 months] *1 year*, and, after that, *may be renewed a maximum of two times* for a term established by the Board. *During the first 6 months of practice at the sponsoring institution, the licensee shall be supervised by a licensed physician.*

(2) (text unchanged)

B. *Initial* Renewal.

As part of the initial renewal process:

(1) The supervising physician shall submit an attestation that the licensee was supervised for a period of at least 6 consecutive months, and the attestation shall be approved by the Board; and

(2) The licensee shall complete a renewal application form, after Board approval of the attestation.

[(2) A license issued under this regulation may be renewed every 2 years on a date set by the Board and as specified in COMAR 10.32.01.]

C. Subsequent Renewal.

(1) A license issued under this regulation may be renewed in a second renewal on a date set by the Board and as specified in COMAR 10.32.01.

(2) A licensee for subsequent renewal shall:

(a) Complete a renewal application form;

(b) Complete at least 50 hours of Continuing Medical Education units and meet the requirements in COMAR 10.32.01.10 ; and

(c) Pay a renewal fee set by the Board in COMAR 10.32.01.12.

(3) A licensee shall inform the Board of the institution where the licensee plans on practicing for the renewal term.

0.32.13.08

.08 Termination and New Appointment.

A. Upon termination of the licensee's approved appointment, the conceded eminence license terminates and becomes null and void.

[A]*B. A licensee has a duty to inform the Board of the termination of an appointment within 30 days of the termination.*

C.[Duty to Inform of Termination.] Failure *of the licensee* to inform the Board of the termination of an appointment within 30 days constitutes unprofessional conduct under Health Occupations Article, §14-404(a)(3), Annotated Code of Maryland.

[B. New Appointment. An individual licensed under this chapter may not begin a new appointment without the approval of the Board.]

D. New Appointment. An individual licensed under this chapter shall apply for a new appointment with another institution. The Board may approve the new appointment at its discretion. The individual may only begin the appointment upon Board approval.

DENNIS R. SCHRADER
Secretary of Health and Mental Hygiene