

The Maryland Board of Physicians is frequently asked to take a position on whether there is a necessity for the licensure of a new profession. This normally occurs in the context of a legislative proposal. The Board will evaluate a completed application to determine the suitability of a new group for licensure and the appropriateness of licensure under the Board. These criteria have been used in other states as a framework for evaluating the necessity of licensing a new profession.

CRITERIA 1: Risk of Harm to the Consumer - Whether the unregulated practice of the allied health profession or occupation will substantially harm or endanger the public health, safety, or welfare, and whether the potential for harm is recognizable and not remote. The harm results from: (a) practices inherent in the occupation, (b) characteristics of the clients served, (c) the setting or supervisory arrangements for the delivery of health services, or (d) any combination of these factors.

CRITERIA 2: Specialized Skill and Training Required - Whether the practice of the profession or occupation requires specialized skill or training, and whether that skill or training is readily measurable or quantifiable so that examination or training requirements would reasonably assure initial and continuing professional or occupational ability.

CRITERIA 3: Extent of Autonomous Practice - Whether the functions and responsibilities of the practitioner require independent judgment and members of the occupational group practice autonomously.

CRITERIA 4: Scope of Practice - Whether the scope of practice is distinguishable from other licensed, certified, and registered occupations, in spite of possible overlapping duties, methods of examination, instrumentation, or therapeutic modalities.

CRITERIA 5: Economic Costs - Whether the economic costs (restriction of job creation through regulation and the cost of funding regulatory boards) to the public of regulating the occupational group are justified.

CRITERIA 6: Alternatives to Regulation- Whether the public can be protected by means other than by regulation, such as by inspections, disclosure requirements, or the strengthening of consumer protection laws. Whenever appropriate, consistent with patient safety and public health, the lesser level of regulation is preferred.

The Board requests that any group completing an application for licensure submit the following information to the Board for its consideration:

1. What is the current need for this profession in Maryland, and is that need being met?
2. How many states and jurisdictions have already licensed this profession?
3. What is the number of individuals in Maryland who need to be regulated?
4. How will this profession eliminate some of the workplace shortages in Maryland?
5. What is the nature and extent of harm caused by the unregulated practice of this profession?
6. Have there been any voluntary efforts of the profession to protect the public? If so, why has this been inadequate?
7. Why would other, less restrictive regulation not protect the public with this profession? What are the other levels of regulation that have been considered, and why are they ineffective?
8. Does this profession have a direct nexus to physicians?
9. Does this profession require supervision? Are the supervisory directives and authority from a physician or a physician assistant?
10. What is the scope of this profession?

11. What settings does this profession typically practice in (ex: hospitals)? For each practice setting, please identify whether they are licensed or regulated by a State or federal entity.
12. Have the economic or health disparities that licensure may generate been considered?
13. What is the cost of regulation, including the indirect cost to consumers, and the proposed method to fund the cost of regulation?
14. Is the profession/entity willing to pay to fill in the gaps of staff and operational costs that will be incurred with this legislation?
15. To what extent will regulation or expansion of regulation increase the cost of goods or services provided by practitioners?
16. How many academic institutions grant a degree for this profession that will meet the criteria for licensure?
17. What are the costs, availability, and appropriateness of the training requirements?
18. What are the costs and availability of the examination requirements?
19. What percentage of current practitioners will be able to meet the proposed eligibility criteria? What barriers will licensure create for current practitioners who may not qualify? Will current practitioners be grandfathered? Please estimate the number of individuals who may not qualify.