

**STATE OF MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
OFFICE OF THE SECRETARY**

**HEALTH PROFESSIONALS BOARDS AND COMMISSION**

**FY 2017 BUDGET OVERVIEW**

**PRESENTED TO**

**HOUSE APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN RESOURCES**

**DELEGATE KIRILL REZNIK - CHAIR**

**February 17, 2016**

**Van Mitchell  
Secretary**

**STATE OF MARYLAND**  
**DEPARTMENT OF HEALTH AND MENTAL HYGIENE**  
**OFFICE OF THE SECRETARY**

**HEALTH PROFESSIONALS BOARDS AND COMMISSIONS**

**FY 2017 BUDGET OVERVIEW**

MB01.04

Lorraine Smith (764-4786) -Fiscal Liaison  
Tracey DeShields (764-4734) - Legislative Liaison  
Eva Schwartz (764-4784) – Personnel Liaison

**PROGRAM OVERVIEW**

**(This report does not include information on the Board of Physicians and the Board of Nursing.)**

The Health Professionals Boards and Commissions program consists of seventeen (17) regulatory boards and two (2) regulatory commissions. The Boards are responsible for licensing health care professionals or organizations; setting standards of care; monitoring continuing education requirements; investigating/handling complaints; and ensuring compliance of orders involving health care professionals. The Commission on Kidney Disease sets physical and medical standards for kidney dialysis and transplant facilities.

The Boards and the Commissions licensed, certified and/or registered over 94,116 individuals and health organizations. The Boards and Commission are planning to operate with an aggregate FY 2017 appropriation of 18.8 million. A summary of the professions regulated by each Board/Commission is provided. In addition, an overview of the Boards funding, staffing, licensing, and disciplinary activities is provided in the attached charts.

**SPECIAL FUNDED**

As a result of Senate Bill 655 (1992), the majority of the Boards are Special funded. Revenue is generated solely by the collection of fees and is used exclusively to cover the costs to operate. State funds may not be used to fund a Special-funded Board. However, House Bill 1246 (1992) specified that if the Commission on Kidney Disease is unable to collect enough fees by surveying and certifying facilities, the Department of Health and Mental Hygiene (the Department) will provide the funding to cover the Commission's expenditures. In addition, House Bill 1246 requires the Department to waive all indirect costs that the Commission incurred.

**GENERAL FUNDED**

The Board of Examiners of Nursing Home Administrators is generally funded. The State of Maryland participates in the Title XIX Medical Assistance Program and the existence of a Nursing Home Administrators Board is a requirement.

The Board for the Certification of Residential Child Care Program Professionals is also Generally Funded. Chapter 438 of the Acts of the 2004 General Assembly Session established the Board. The Board certifies Residential Child Care Program Administrators.

**PROGRAM ADMINISTRATION**

The Boards and the Commissions within the program retain independent responsibility for the administration of their professional practice and associated mandates. This independent authority gives each Board/Commission the

responsibility for its own actions. However, the Boards and the Commission must adhere to State budgetary, procurement and personnel rules and regulations.

A liaison system is used to facilitate the management of common administrative activities. Specific Board/Commission administrators serve as liaisons for key administrative areas (i.e., Fiscal Management, Regulations Development, Training, Board Member Orientation, Personnel, Legislation, Public Relations, IT and Building Related matters).

A fiscal officer and a regulations/legislation specialist provide program support. A shared computer network manager and shared data specialists support the Boards information technology (IT) needs. In addition, a few Boards have their own IT person. Funding is also provided for shared legal positions that facilitate the handling of disciplinary cases and the cost for shared investigator positions.

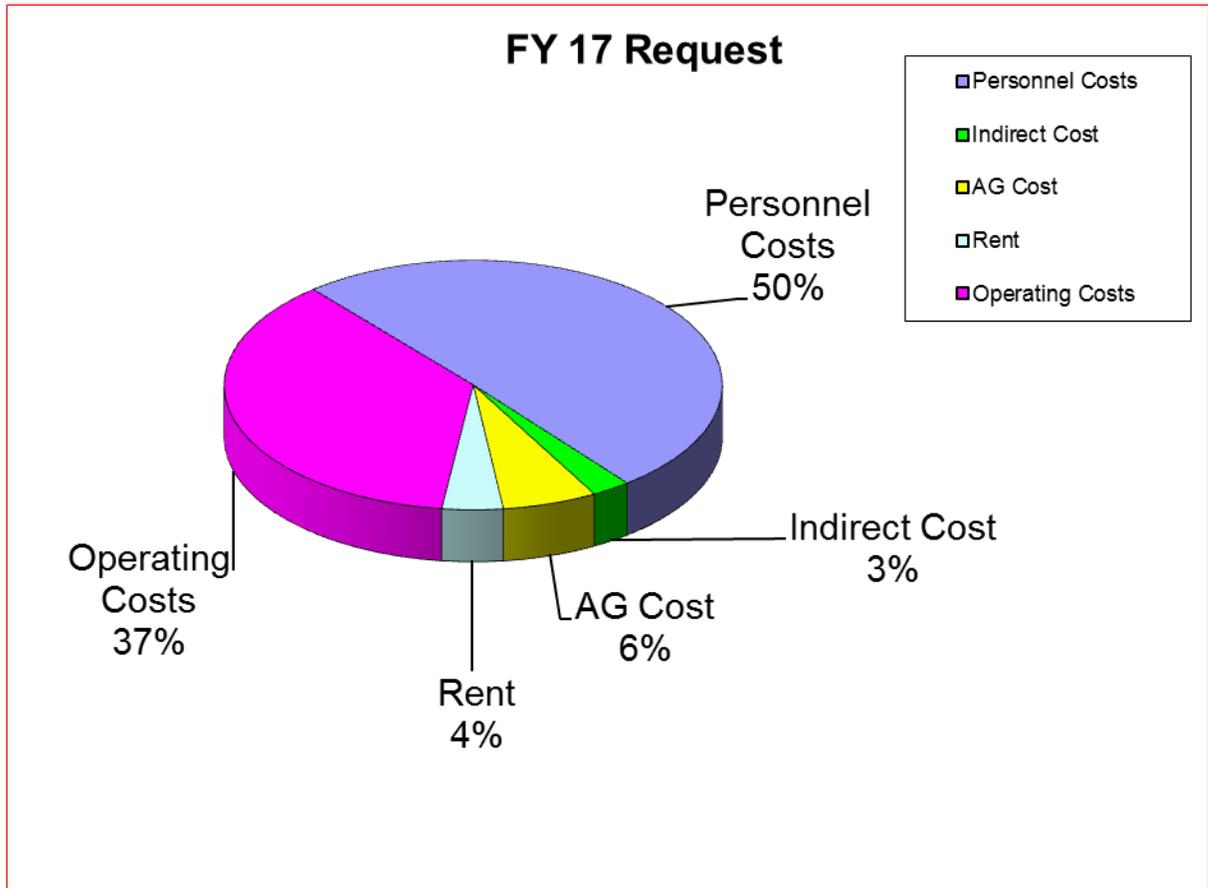
HEALTH PROFESSIONALS BOARDS AND COMMISSION  
TOTAL ACTIVE -LICENSED /CERTIFIED/REGISTERED  
FY 2017

<b>PCA</b>	<b>Board/Commission</b>	<b>Total</b>
<b>402</b>	<b>Acupuncture</b>	<b>1,099</b>
	Acupuncturists	1,057
	Auricular detoxification specialists	42
<b>403</b>	<b>Dietetic Practice</b>	<b>1,752</b>
<b>404</b>	<b>Professional Counselors</b>	<b>6,293</b>
	Certified Professional Counselors	28
	Marriage and Family Therapists	227
	Licensed Clinical Counselors	3,320
	Licensed Professional Art Therapists	135
	Alcohol & Drug	1,628
	Registered Alcohol and Drug Trainees	955
<b>406</b>	<b>Chiropractic</b>	<b>5,538</b>
	Chiropractor	824
	Chiropractic Assistant	685
	Licensed Massage Therapists	2,693
	Registered Massage Practitioners	1,336
<b>407</b>	<b>Dental</b>	<b>16,527</b>
	Dentist	5,262
	Dental Teachers	20
	Dental Hygienist	3,702
	Dental Radiation Technologist	7,543
<b>408</b>	<b>Environmental Health Specialists</b>	<b>906</b>
	Licensed Environmental Health Specialists	530
	Environmental Health Specialists in Training	91
	Active Certificates of Eligibility	271
	Environmental Health Specialist in Training (Seasonal)	14
<b>409</b>	<b>Morticians</b>	<b>1,868</b>
	Morticians/Funeral Dir. /S. Spouse	978
	Courtesy Card	68
	Corporations /Establishments	345
	Apprentice	37
	Crematories	35
	Crematory Operators	170
	Mortuary Transport Companies	35
	Registered Transporters	200

<b>410</b>	<b>Medical Cannabis Commission</b>		0
	Growers	0	
	Processors	0	
	Distributors	0	
<b>411</b>	<b>Nursing Home Administrators</b>		565
<b>412</b>	<b>Occupational Therapy</b>		4,007
	Occupational Therapist	3,161	
	O.T. Assistant	846	
<b>413</b>	<b>Optometry</b>		951
<b>414</b>	<b>Pharmacy</b>		23,160
	Pharmacist	10,910	
	Pharmacy Establishment	1,985	
	Distributor	1,051	
	Pharmacy Technicians	9,214	
<b>415</b>	<b>Physical Therapy</b>		7,917
	Physical Therapist	6,062	
	Physical Therapist Assistant	1,855	
<b>417</b>	<b>Podiatry</b>		511
	Full License	430	
	Limited license	81	
<b>418</b>	<b>Psychology</b>		3,728
	Psychologists	3,078	
	Psychology Associates	650	
<b>419</b>	<b>Social Work</b>		13,741
	Bachelor	615	
	Graduate	3,923	
	Certified	344	
	Certified - Clinical	8,859	
<b>420</b>	<b>Audiology/HAD/SLP</b>		4,591
	Speech-Language Pathologists	3,743	
	Speech-Language Pathologists Asst.	53	
	Audiologist	466	
	Hearing Aid Dispensers	111	
	Limited Licensees	218	
<b>421</b>	<b>Kidney Disease Commission (facilities)</b>		130
<b>422</b>	<b>Residential Child Care Professionals</b>		832
	Residential Child Care Program Admin	113	
	Acting Residential Child Care Program Admin	6	
	Residential Child 7 Youth Care Practitioners	713	
			94,116

Boards & Commission  
 FY17 budget

FY	Total	Personnel Costs	Indirect Cost	AG Cost	Rent	Operating Costs
17	18,818,536	9,506,130	475,461	1,153,968	746,575	6,936,402



Personnel costs include merit system employees salaries and fringe, contractual employee salaries and fringe, temporary employees from temp agency/

Indirect cost includes health department indirect cost (DIC) and the statewide cost allocation (SCAP).

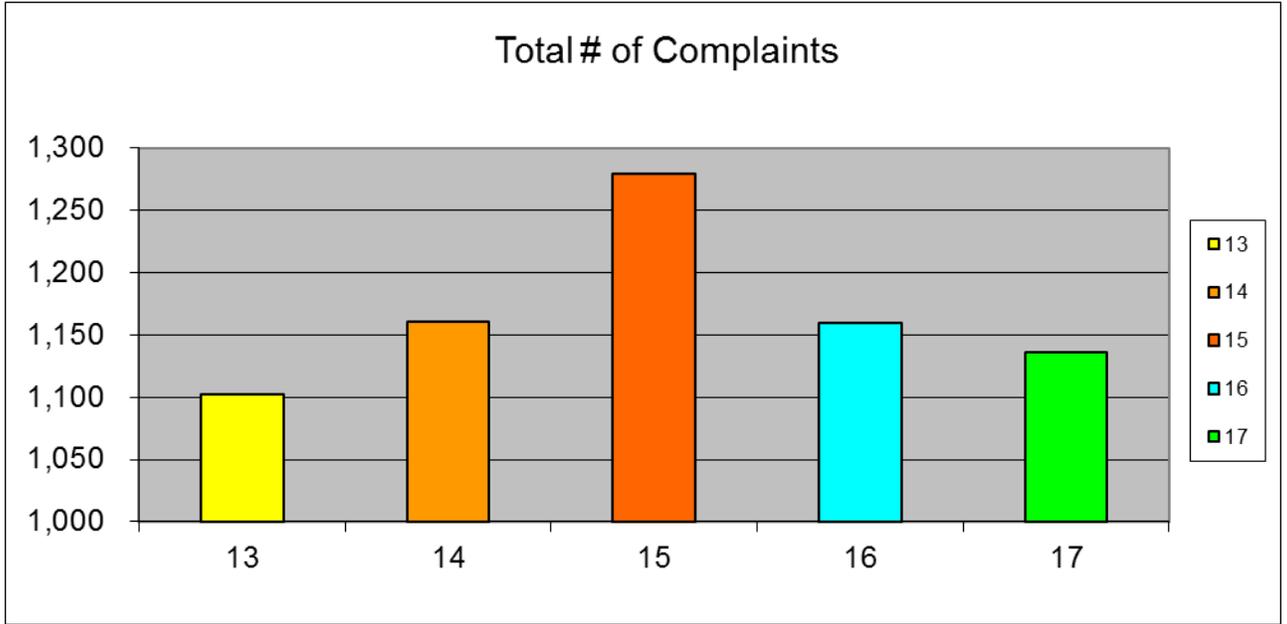
Attorney General's costs include cost for attorneys, prosecutors, board counselors and support staff from the Attorney General's office.

Rent cost includes the Boards' office space at both Spring Grove and Patterson Ave.

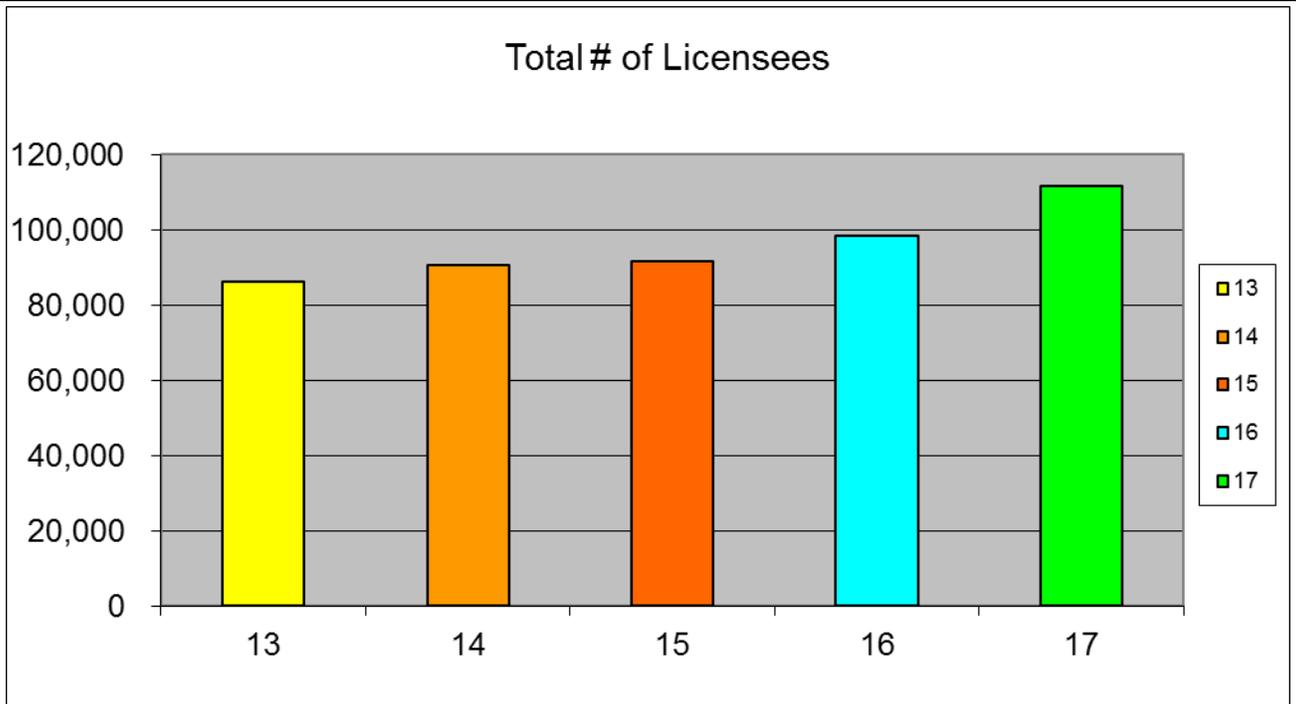
Operating cost includes all other cost incurred by the boards. (e.g. - per diems for board members, phone charges, postage, travel, printing, software, special projects, office supplies, equipment, etc.)

Boards & Commission  
 FY17 budget

	FY13 Actual	FY14 Actual	FY15 Actual	FY16 Estimate	FY17 Estimate
Total # of Complaints	1,102	1,161	1,279	1,160	1,136



	FY13 Actual	FY14 Actual	FY15 Actual	FY16 Estimate	FY17 Estimate
Total # of Licensees	86,210	90,720	91,542	98,316	111,519



Department of Health and Mental Hygiene  
Health Professional Boards and Commission  
M00B0104

**Response to Recommendations & Issues**

**Recommendation #1:** Reduce funding for grants within the Medical Cannabis Commission.  
\$ 500,000

**Response:** The Commission agrees with the DLS recommendation.

**Issue #1:** Sunset Evaluation for the State Board of Environmental Health Specialist

The State Board of Environmental Health Specialist (BEHS) underwent a full sunset evaluation in the 2015 interim. The Department of Legislative Services (DLS) recommends that the statute should be amended to repeal BEHS and the requirement for a State license. Instead, statute should require individuals practicing the duties of an environmental health specialist in the State to obtain and maintain a Registered Environmental Health Specialist/Registered Sanitarian (RESH/RS) credential, issued by the National Environmental Health Association (NEHA)

**Response:**

Senate Bill 200 and House Bill 497, which provide for NEHA to be the sole credentialing agency for individuals working as environmental health specialists in Maryland, would severely limit the ability of hiring agencies to recruit and hire individuals for this classification. Currently, the Board has a mechanism in place to issue a certificate of eligibility providing the ability for the agency to interview the candidate for the position. After the individual is employed the Board issues an in-training certificate and at the end of the in-training period the employee is eligible to sit for the examination. The total cost, from application to license, is \$300.00. Under NEHA certification the total cost, from application to license, is \$550.00. In addition, the time required to obtain continuing education units (CEU s) would increase for each individual. The Board's current requirement is 20 hours; NEHA requires 24 hours. This will require individuals to spend additional time and money in training, some of which is done during work time.

This bill would have a substantial operational impact on the Prevention and Health Promotion Administration (PHPA) and local health departments (LHDs). Currently, the Board provides licenses and credentials for approximately 815 licensees and in-training employees in PHPA, LHDs and other agencies. The Board also maintains and monitors continuing education requirements for environmental health specialists, and takes disciplinary action, as necessary, to ensure that registrants operate within, the scope of their practice. NEHA's role would be limited to issuing the REHSIRS and REHSIRS-IT credentials. PHPA and LHDs would handle disciplinary issues following applicable State or local jurisdiction personnel laws, ordinances, regulations, policies and procedures, and should be able to manage this workload within existing

resources. In summary, if SB 200 is enacted, PHPA and LHDs, as appointing authorities, would be responsible for ensuring compliance with the REHSIRS and REHSIRS-IT credentials, investigating disciplinary issues, and maintaining and monitoring continuing education for environmental health specialists they employ.

If SB 200 is enacted, LHDs will have to keep a separate record to track and monitor CEUs. SB 200 will have a major operational impact on LHDs. Currently, the Board tracks and manages CEUs of its registrants. LHD managers and administrative staff have access to the Board's database so they can see where employees are in reaching their required CEUs. Also, the database helps managers determine which employees to send to training in order to maximize limited resources. NEHA does not allow anyone other than the licensee to access their records.

SB 200/ HB 497 will require LHD staff to monitor CEU s and manage training with already scarce resources and staffing. LHD Environmental Health (EH) programs are operating at reduced capacity because of previous reductions that have affected their ability to meet various inspection and enforcement standards.

The NEHA reciprocity coordinator has informed licensees that both the educational requirements and the PES exam prior to 12/31/1997 are established requirements that are not negotiable. They hold these requirements to all they license and would not be willing to adjust for one State. If public sector environmental health specialists would not be granted reciprocity, there could be a substantial negative impact on small business because of the potential loss of staff needed to conduct routine inspection and licensure activities. Also, State licensure is required for food manufacturers to sell in interstate commerce.