

(c) In addition to establishing or designating a program as required under subsection (a) of this section, the] THE Board shall, through its website, newsletter, and other correspondence with licensed physicians:

(1) educate licensed physicians about provisions of the federal Drug Addiction Treatment Act of 2000 that authorize qualifying physicians to practice office-based, medication-assisted opioid addiction therapy under a waiver from SAMHSA; AND

(2) encourage family practitioners and primary care providers to consider participating in office-based, medication-assisted opioid addiction therapy]; and

(3) inform licensed physicians about the availability of training and experience to qualify for a waiver to practice office-based, medication-assisted opioid addiction therapy that:

(i) addresses the treatment and management of opiate-dependent patients in an office-based setting; and

(ii) satisfies the training requirements that the Board establishes in the regulations adopted under subsection (b)(2) of this section].

[(d)] (B) To the extent feasible, the Board shall, in cooperation with the Alcohol and Drug Abuse Administration, develop an outreach strategy to educate opioid addicts about the availability of office-based, medication-assisted opioid addiction therapy.

(C) THE BOARD MAY ADOPT REGULATIONS REGARDING EXPERIENCE OR TRAINING QUALIFICATIONS REQUIRED TO QUALIFY A PHYSICIAN TO PRACTICE OFFICE-BASED, MEDICATION-ASSISTED OPIOID ADDICTION THERAPY.

Chapter 252 of the Acts of 2003

[SECTION 8. AND BE IT FURTHER ENACTED, That the entity or entities with which the State Board of Physicians contracts under § 14-401(e) of the Health Occupations Article for further investigation and peer review of allegations based on § 14-404(a)(22) of the Health Occupations Article shall utilize two peer reviewers, and in the event of a lack of agreement between the two reviewers, the Board shall utilize a third reviewer to render a final peer review decision.]

SECTION 2. AND BE IT FURTHER ENACTED, That the State Board of Physicians shall make regulatory changes necessary to reflect the procedures of the Board, including exceptions from licensure, and to implement the recommendations