

Department of Legislative Services
Maryland General Assembly
2018 Session

FISCAL AND POLICY NOTE
Third Reader - Revised

House Bill 863

(Delegate Cullison, *et al.*)

Health and Government Operations

Education, Health, and Environmental Affairs

State Board of Nursing - Advanced Practice Registered Nurses - Certification
and Practice

This bill authorizes a nurse anesthetist to administer anesthesia in collaboration with an anesthesiologist, a physician, or a dentist, but without the need for a specified collaboration agreement. The scope of practice of a nurse anesthetist is codified and expanded to reflect current practice. The bill specifies the manner in which a nurse anesthetist must collaborate with an anesthesiologist, a licensed physician, or a dentist related to the administration of anesthesia and outlines basic standards of practice for a nurse anesthetist. Nothing in the bill may be construed to expand the current scope of practice for nurse anesthetists. The bill also clarifies renewal and certification requirements for advanced practice registered nurses (APRNs) who qualify for certification by the State Board of Nursing (BON) through the Nurse Licensure Compact (NLC).

Fiscal Summary

State Effect: None. The bill generally codifies current practice.

Local Effect: None.

Small Business Effect: Minimal.

Analysis

Bill Summary:

Nurse Anesthetist

“Nurse anesthetist” means an individual who is licensed by BON to practice registered nursing and is certified by BON to practice as a nurse anesthetist. “Perioperative

assessment and management” means the assessment and management of a patient preoperatively, intraoperatively, and postoperatively.

A nurse anesthetist may perform the follow functions: (1) perioperative assessment and management of patients requiring anesthesia services; (2) administration of anesthetic agents; (3) management of fluids in intravenous therapy; and (4) respiratory care. These authorizations may not be construed to authorize a nurse anesthetist to diagnose a medical condition, provide care that is not consistent with the scope of practice of nurse anesthetists, or provide care for which the nurse anesthetist does not have proper education and experience. A nurse anesthetist has the right and obligation to refuse to perform a delegated act if, in the nurse anesthetist’s judgment, the act is unsafe, an invalidly prescribed medical act, or beyond the clinical skills of the nurse anesthetist.

The requirement to administer anesthesia in collaboration with an anesthesiologist, a physician, or a dentist may not be construed to require a written collaboration agreement between a nurse anesthetist and an anesthesiologist, a physician, or a dentist.

Advanced Practice Registered Nurse

An APRN who qualifies for certification by BON by having a multistate licensure privilege under the NLC must ensure that BON has specified current documentation of certification. The term of certification for an APRN practicing under the NLC is two years and expires on the twenty-eighth day of the birth month of the APRN. Before an APRN’s certification expires, the APRN may renew the certification for an additional two-year term if the APRN is otherwise entitled to be licensed. BON may not renew the certification of an APRN if BON does not have documentation of the licensee’s current certification as an APRN by a national certifying body recognized by BON for the area of specialty for which the APRN is certified by BON.

Current Law/Background: An APRN is an individual who is licensed by BON to practice registered nursing or has a multistate licensure privilege, and is certified by BON to practice as (1) a nurse practitioner; (2) a nurse anesthetist; (3) a nurse midwife; or (4) a clinical nurse specialist. Under Maryland regulations, an APRN’s certificate expires at the same time as an APRN’s registered nursing license. According to BON, all APRNs currently renew on a biennial schedule and routinely file their renewed national certifications with BON.

The scope of practice of a nurse anesthetist is not specified under Maryland law. However, Maryland regulations provide that a nurse anesthetist may perform (1) perioperative assessment and management of patients requiring anesthesia services; (2) administration of anesthetic agents; (3) management of fluid in intravenous therapy; and (4) respiratory care. A nurse anesthetist may not practice until the nurse anesthetist submits a

collaboration agreement to BON that includes specified information about the collaborating physician or dentist for each worksite or facility. A separate agreement for each collaborator or facility must be submitted.

BON advises that the bill generally codifies the current scope of practice for nurse anesthetists. Repeal of the requirement to have a collaborative agreement is intended to remove barriers to practice. BON notes that 30 states no longer require a collaborative agreement for a nurse anesthetist to practice.

The NLC generally allows nurses to practice across state lines, enables cooperation among state boards of nursing, and attempts to improve enforcement of licensure laws across state boundaries. Chapter 669 of 2017 made multiple changes to the NLC, conforming State law to the revised compact recently adopted by the National Council of State Boards of Nursing.

Additional Information

Prior Introductions: None.

Cross File: SB 698 (Senator Conway) - Education, Health, and Environmental Affairs.

Information Source(s): Maryland Department of Health; Department of Legislative Services

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