

SUPPORT HB 475/SB 439


To whom it concerns, I am a certified and licensed APRN practicing in the State of Maryland, and I support HB 475/SB 439. As dually certified APRN, acute care nurse practitioner and Clinical Nurse Specialist, I understand the challenges experienced by healthcare providers within the State of Maryland and the nursing profession. As an assistant professor at a large school of nursing within the state, I have provided education to new students at the entry and advanced practice level. We strive to graduate nursing providers that are competent, critical thinkers, and able to address patient needs in all practice settings.

Within the nursing profession, the numbers are seemingly always insufficient to meet the needs of the “unwell and diseased” within the State of Maryland and the country. Moreover, I understand the needs of persons living in various stages of ill-health, limited resources, and lack of access to a healthcare provider. Following a pandemic, we learned timely access to healthcare improves patient outcomes and the need to remove barriers to provide access to care or a provider is a proven strategy. The role of the APRN has helped to fill this gap. Unfortunately, in this instance, the barrier to a healthcare provider is coming from nursing organizations that have not identified *how* opposing the nursing compact will benefit persons that are unwell, diseased and with limited access to care in the State of Maryland.

As a member of NPAM and AANP, in this instance ,they do not represent me nor are they acting in my best interest by opposing this legislation. The nursing profession does have political, and practice struggles and in such instances these groups serve a purpose. However, this is an instance where the needs of the patient must take precedent to the political interest and interference.

As resident of Maryland and an advanced practice provider passing of the compact agreement will benefit patients by eliminating barriers to care. Passing the compact would benefit persons requiring healthcare by improving access to providers in rural and under serviced area.

Respectfully submitted,



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