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## SB 576 – Health Occupations – Nurse Practitioners – Certifications of Competency and Incapacity

February 13, 2020

EHEA Committee members:

The Maryland Academy of Nurse Practitioners, working with our MedChi colleagues, have prepared 2 amendments

This amendment clarifies that a petition for guardianship must include a signed and verified certificate of competency from at least one licensed physician.

13-705 (2) - on page 2, lines 23-24 should be removed, and lines 25-28 should read:

- (I) Two licensed physicians OR
- (II) 1. One licensed physician and
  - 2. [A] One NURSE PRACTITIONER or
  - [B] One licensed psychologist or
  - [C] One licensed certified social worker–clinical

We are all well aware that Nurse Practitioners have the ability to certify that a patient is incapable of making an informed decision regarding treatment and that a patient has a terminal or end stage condition. These 2 decision-making processes are already outlined in COMAR as Nurse Practitioners are authorized to sign Medical Orders for Life-Sustaining Treatment (MOLST) and the Health Care Practitioner Physical Assessment Form (HCPPA).

And it has previously been recognized by this Committee in 2015 that Nurse Practitioners are as well educated as physicians. Indeed, where a physician will spend 11 years in schools and residencies before practicing on their own, to qualify to work independently and Nurse Practitioners could have as many as 10 years of college and work experience.

This amendment acknowledges that discussions on end of life issues continue to be controversial throughout the nation and we have chosen not to update the following:

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*Since 2005, MAAPC has been the leading association in legislative and regulatory changes that benefit Maryland Advanced Practice Clinicians. We welcome as members all APNs and PAs and are a completely volunteer association.*

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5-606 (b) (2) - on page 3, lines 24-26 will continue to read:

Two physicians, one of whom is a neurologist, neurosurgeon, or other physician who has special expertise in the evaluation of cognitive functioning, AND A SECOND PHYSICIAN certify that the patient is in a persistent vegetative state.

This legislation will modernize the existing statute to make it consistent with the role Nurse Practitioners already have under the MOLST statute, and as clarified by Attorney General Brian Frosh's Summary of Maryland Health Care Decisions Act as amended through 2019 (see following document).

Please contact me (410-703-0556, TheMAAPC@gmail.com) or Lorraine Diana, our Legislative Chair (301-980-8004), for any information you may need about Nurse Practitioners or SB 576. MAAPC is represented in Annapolis by John Favazza (jfavazza@maniscanning.com, 410-263-7882).

Thank you for your consideration of my testimony; please support SB 576 and thank you for your commitment to improving patient access to mental health care,

Dr. Elaine Crain, DNP, RN, FNP-BC  
President, MAAPC

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