



“Advocating for NPs since 1992”

Bill: SB 154 – Advanced Practice Registered Nurse Compact

Position: OPPOSE

On behalf of the over 800 members of the Nurse Practitioner Association of Maryland, Inc. (NPAM), and the over 8,000 Nurse Practitioners licensed to practice in Maryland, I am writing to **OPPOSE SB 154 – Advanced Practice Registered Nurse Compact.**

This bill would establish entry into the Advanced Practice Registered Nurse (APRN) Compact as adopted by the NCSBN (National Council of State Boards of Nursing) in August, 2020. While this association is not opposed to the concept of a APRN Compact, the provisions set forth by the NCSBN are not acceptable. Until those provisions meet the expectations of Nurse Practitioners (NPs) and all APRNs, NPAM will not support this bill.

Two (2) states have entered into the APRN Compact since 2020 – North Dakota and Delaware; seven (7) states are needed to implement the Compact. It is not foreseen that 7 states will enter into this Compact in the near future, and it is our opinion that the provisions of the Compact need to be worked out before Maryland considers entry into the Compact.

NPAM strongly opposes the inclusion of 2,080 practice hours as a prerequisite for a multistate APRN Compact license. The inclusion of practice hours is inconsistent with the evidence and is in direct conflict with the Consensus Model for APRN Regulation: licensure, accreditation, certification and education, and sets a dangerous precedent. The evidence is clear. APRNs are prepared for safe entry to practice at the point of graduation from an accredited graduate program and after the successful passage of a national certification board examination. NPs in Maryland are well prepared to enter the work force upon graduation.

NPAM affirms the position that the APRN Compact must include an APRN Advisory Committee to ensure there is needed expertise to address the complexity and variety of practice issues.

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Additionally, the current Compact provisions provides that the APRN Compact Administrators are composed of the head of each participating state licensing board or that person's designee. It is unacceptable that those governing APRN's are not APRNs. It is essential that the compact administrators have a full understanding of each APRN role, and represent all four APRN roles, including representation from accreditation, certification, education and practice.

Licensure fees will most certainly shift, and it is unknown how this will impact the Maryland Board of Nursing (MBON) fiscally and how much the Compact Administration Fee will be. Administratively, the MBON is already over-burdened with work, as is indicated in the long license renewal wait times, and it is unknown what the impact an APRN Compact will have.

The American Association of Nurse Practitioners (AANP) and over 40 other nursing organizations oppose the provisions of the NCSBN APRN Compact.

NPAM has played an instrumental role in advocating for and removing barriers to practice for Nurse Practitioners in Maryland since 1992. In 2015 NPAM was successful in securing Full Practice Authority for NPs in Maryland. We have worked diligently to advocate for statutes that benefit NPs and their patients and do not see any benefits of the current provisions of the APRN Compact as proposed by the NCSBN to Maryland NPs. Thus, we oppose SB 154 – Advanced Practice Registered Nurse Compact.

For these reasons I respectfully request an unfavorable vote on SB 154. Feel free to contact Beverly Lang, Executive Director, NPAM if you need additional information.

Kindest Regards,

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