

# **SB 407\_Health Care Staffing Shortage Emergency\_Sup**

Uploaded by: Allison Taylor

Position: FAV



Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc  
2101 East Jefferson Street  
Rockville, Maryland 20852

February 9, 2022

The Honorable Delores G. Kelley  
Senate Finance Committee  
3 East, Miller Senate Office Building  
11 Bladen Street  
Annapolis, Maryland 21401

**RE: SB 407 – Support**

Dear Chair Kelley and Members of the Committee:

Kaiser Permanente is pleased to support SB 407: “Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022).”

Kaiser Permanente is the largest private integrated health care delivery system in the United States, delivering health care to over 12 million members in eight states and the District of Columbia.<sup>1</sup> Kaiser Permanente of the Mid-Atlantic States, which operates in Maryland, provides and coordinates complete health care services for approximately 800,000 members. In Maryland, we deliver care to over 460,000 members.

The COVID-19 pandemic illuminated some of the challenges that Maryland faces in scaling up a health care workforce capable of meeting the demands of a catastrophic health emergency. A surge in demand by patients needing treatment for COVID-19 has repeatedly threatened to exceed health system capacity. Meanwhile, some patients who were hesitant to receive care in-person have had difficulty accessing care through telehealth, because of lack of access to broadband or other barriers. Provider licensing delays have exacerbated challenges for telehealth since healthcare providers are required to obtain a license in the state that the patient is located. The lack of mobility caused by state licensing also prevented healthcare providers from moving to hard hit areas early, further limiting the care that could be provided in these areas.

Senate Bill 407 addresses these concerns by creating a process whereby the Secretary of Health may adjust licensure requirements upon declaration of a health care staffing shortage emergency. As drafted, all of Kaiser Permanente’s health care workforce in the mid-Atlantic region, including 1,700 physicians, would be able to take advantage of these flexibilities if need be. For these reasons, we urge a favorable report for SB 407.

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<sup>1</sup> Kaiser Permanente comprises Kaiser Foundation Health Plan, Inc., the nation’s largest not-for-profit health plan, and its health plan subsidiaries outside California and Hawaii; the not-for-profit Kaiser Foundation Hospitals, which operates 39 hospitals and over 650 other clinical facilities; and the Permanente Medical Groups, self-governed physician group practices that exclusively contract with Kaiser Foundation Health Plan and its health plan subsidiaries to meet the health needs of Kaiser Permanente’s members.

Kaiser Permanente  
Comments on SB 407  
February 9, 2022

Thank you for the opportunity to comment. Please feel free to contact me at [Allison.W.Taylor@kp.org](mailto:Allison.W.Taylor@kp.org) or (202) 924-7496 with questions.

Sincerely,

A handwritten signature in cursive script that reads "Allison Taylor".

Allison Taylor  
Director of Government Relations  
Kaiser Foundation Health Plan of Mid-Atlantic States, Inc.

# **maryland-hospital-association-covid-snapshot-feb-2**

Uploaded by: Bob Atlas

Position: FAV

# MARYLAND HOSPITAL ASSOCIATION COVID-19 SNAPSHOT

FEBRUARY 2022

Maryland hospitals and health systems continue to push forward and save lives despite tremendous, ongoing strain caused by COVID-19. It is vitally important that hospitals and health systems receive the support and resources necessary to ensure the people of Maryland have access to vital medical care.

Maryland hospitals face historic challenges and unprecedented staffing pressure

## More New Cases

Recent **30** days **287,000**

Prior **300** days **267,000**

The past month has seen **more new cases** than the previous 10 months combined

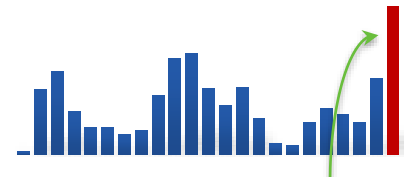
## More Emergency Visits

**↑ 37%**

*more emergency visits in Dec 2021 than Dec 2020*

**ED usage**, including boarded patients, hit 2-year highs in December and January

## More Total Patients



January averaged **2,603** COVID inpatients per day, **48% higher** than any other month during the pandemic

## Labor Costs Spiking

**↑ \$453 million**

Contract **labor costs** above pre-pandemic levels

## Unending Burden

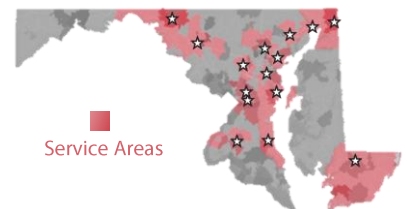
*"Think of a **train wreck every day for weeks on end**. That's what we are dealing with."*

*Dr. Gabe Kelen, head of Department of Emergency Medicine and director of Johns Hopkins Office of Critical Event Preparedness and Response*

## Crisis Care

**15**

MD hospitals declared **crisis standards of care**



# **SB0407 - 2.9.22 -- Health Occupations - Health Car**

Uploaded by: Donald Fry

Position: FAV



# POSITION STATEMENT

## TESTIMONY PRESENTED TO THE SENATE FINANCE COMMITTEE

### SENATE BILL 407 – HEALTH OCCUPATIONS - HEALTH CARE STAFFING SHORTAGE EMERGENCY - DECLARATION AND LICENSING AND PRACTICE REQUIREMENTS (HEALTH CARE HEROES ACT OF 2022)

Sponsor – The President (By Request – Administration, et al)

February 9, 2022

**DONALD C. FRY**  
**PRESIDENT & CEO**  
**GREATER BALTIMORE COMMITTEE**

#### **Position: Support**

Senate Bill 407 would authorize the Secretary of Health to declare a health care staffing shortage emergency in the State which would trigger a process of expedited licensing in designated health care areas. Those eligible to receive expedited licensing would include current applicants, those licensed in other states, those with inactive licenses, retired health care providers, and nursing graduates. An emergency declaration of a health care staffing shortage would be limited to 180 days.

The Greater Baltimore Committee (GBC) recognizes the challenges faced by health care providers over the last two years of the COVID-19 pandemic. The scope of the pandemic has increased the need for licensed health care staffing as the current available number of licensed providers is falling. Senate Bill 407 provides, in a staffing shortage emergency, a way to increase the number of licensed providers without sacrificing quality or safety.

This bill is consistent with one of the key tenets in *Gaining A Competitive Edge: Keys to Economic Growth and Job Creation in Maryland*, a report published by the GBC that identifies eight core pillars for a competitive business environment and job growth. The pillar provides:

**Government leadership that unites with business as a partner.** Maryland leaders must set a welcoming tone that communicates positive support for business, respect for the private sector as a partner, not an adversary, and reflects a strategic plan for business growth and job creation.

**For these reasons, the Greater Baltimore Committee urges a favorable report on Senate Bill 407.**

*The Greater Baltimore Committee (GBC) is a non-partisan, independent, regional business advocacy organization comprised of hundreds of businesses -- large, medium and small -- educational institutions, nonprofit organizations and foundations located in Anne Arundel, Baltimore, Carroll, Harford, and Howard counties as well as Baltimore City. The GBC is a 67-year-old, private-sector membership organization with a rich legacy of working with government to find solutions to problems that negatively affect our competitiveness and viability.*

**GREATER BALTIMORE COMMITTEE**

111 South Calvert Street • Suite 1700 • Baltimore, Maryland • 21202-6180

(410) 727-2820 • [www.gbc.org](http://www.gbc.org)

# **SB407\_JohnsHopkins\_FAV**

Uploaded by: Elizabeth Hafey

Position: FAV



**SB407**

**Favorable**

TO: The Honorable Delores Kelley, Chair  
Senate Finance Committee

FROM: Elizabeth Hafey  
Assistant Director, State Affairs,  
Johns Hopkins University and Medicine

DATE: February 9, 2022

Johns Hopkins supports **Senate Bill 407 – Health Occupations – Health Care Staffing Shortage Emergency Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)**. This bill will authorize the Secretary of Health to declare a health care staffing shortage emergency, in certain circumstances. That declaration would trigger certain flexibilities and waivers that Johns Hopkins has taken advantage of during the public health emergency. Johns Hopkins is supportive of efforts that expand access of care to its patients and make permanent the flexibilities that hospitals enjoyed during the declaration of the catastrophic health emergency. Moreover, the flexibilities have created greater opportunities to expand the ability to serve our patients.

Johns Hopkins Medicine provides both specialty and primary care services at four hospitals, Johns Hopkins Community Physician (JHCP) practices, and ambulatory surgery centers (ASC) across Maryland. The pandemic has significantly strained and overwhelmed our health care system and our health care providers. Since the start of the pandemic, Johns Hopkins has vaccinated over 29,300 members within the community through mobile vaccinations, and tested over 5,000 residents of community centers tested in the community. Our staff and health care workers have responded to the COVID-19 pandemic every day, while ensuring we continue to provide excellent care to our patients. But there continues to be uncertainty around this pandemic. We encourage the legislature to recognize the unique challenges that our hospitals have faced and will continue to face as we address COVID-19.

Johns Hopkins continues to experience workforce challenges. This legislation, while not a panacea, provides some permanent solutions to help mitigate these shortages. The staffing shortage we have experienced the most acutely has been in nursing. There is a specific recognition in this bill that will allow for nursing graduates to work as registered nurses. The waivers during the emergency also provided us with greater flexibility in recruiting registered nurses. Granting the Secretary of the Department of Health the ability to declare a staffing shortage emergency, in certain circumstances, creates another avenue to provide Johns Hopkins with more flexibility needed to mitigate disruptions to health care services across all of our facilities and to address acute staffing challenges.

For the above reasons, Johns Hopkins recommends a favorable report on **Senate Bill 407 – Health Occupations – Health Care Staffing Shortage Emergency Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)**.

**4f - SB 407 - FIN - MDH - LoS.docx.pdf**

Uploaded by: Heather Shek

Position: FAV



## DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

February 9, 2022

The Honorable Paul Pinsky, Chair  
Education, Health, and Environmental Affairs  
2 West Miller Senate Office Building  
Annapolis, Maryland 21401

The Honorable Delores Kelley, Chair  
Senate Finance  
3 East Miller Senate Office Building  
Annapolis, Maryland 21401

**RE: SB 407 – Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022) – Letter of Support**

Dear Chair Pinsky, Chair Kelley, and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of support on Senate Bill (SB) 407 – Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022). SB 407 will authorize the Secretary of Health to declare a health care staffing shortage emergency in the State under certain circumstances and require Health Occupations Boards to establish or expedite processes for the issuance of initial licenses, temporary licenses, or temporary practice letters on an expedited basis during said emergency.

Throughout the COVID-19 pandemic, Maryland frontline medical workers have selflessly and tirelessly provided critical care to those in need. Maryland has one of the most successful pandemic responses in the country. Due in large part to this group of workers, our state positivity rate and case rates continue to decline while our vaccination rates continue to grow.

Over the past two years, this Administration took steps to ensure essential employees, specifically health care staff, received the support and resources necessary to carry out their critical mission of providing care for the most vulnerable Marylanders. SB 407 provides necessary support and outlines a clear path to quickly respond in the future, should another health emergency arise.

MDH fully supports SB 407 with the amendments proposed by the Administration and respectfully requests the committee return a favorable report. If you would like to discuss this further, please contact Heather Shek, Director, Office of Governmental Affairs at (443) 695-4218 or [heather.shek@maryland.gov](mailto:heather.shek@maryland.gov).

Sincerely,

Dennis R. Schrader  
Secretary

# **HFAM Testimony SB 407.pdf**

Uploaded by: Joseph DeMattos

Position: FAV



**TESTIMONY BEFORE THE  
SENATE FINANCE COMMITTEE**

February 9, 2022

Senate Bill 407: Health Occupations - Health Care Staffing Shortage Emergency -  
Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)  
*In-Person Testimony*

**POSITION: FAVORABLE**

On behalf of the members of the Health Facilities Association of Maryland (HFAM), we appreciate the opportunity to express our support for Senate Bill 407. HFAM represents over 170 skilled nursing centers and assisted living communities in Maryland, as well as nearly 80 associate businesses that offer products and services to healthcare providers. Our members provide services and employ individuals in nearly every jurisdiction in the state.

Senate Bill 407 authorizes the Secretary of Health to declare a health care staffing shortage emergency in the State, requires each health occupations board to establish a process for the issuance of initial licenses, temporary licenses, and temporary practice letters on an expedited basis during a health care staffing shortage emergency.

This legislation would create a permanent framework for health care staffing challenges and reduce barriers to health occupations licensure in settings across the continuum of care. It would require the Secretary of Health to adopt regulations that establish criteria for determining health care staffing emergency based on factors such as staffed bed occupancy rates, staff vacancy rates, and emergency department wait times.

We support the amendments proposed by Governor Hogan's staff because those amendments serve to further specify the job classifications and the care settings in which the Secretary may act to support the availability of the workforce. (Please note that these amendments are attached for reference.)

During a health care staffing emergency, health occupations boards would be directed to implement expedited licensing procedures. This would allow applicants for licensure, health professionals with a license in another state, inactive licensees, retired practitioners, and nursing graduates to more quickly enter the health care workforce during the staffing emergency provided that they meet competency requirements.

Across care settings in Maryland and throughout the country, we are fighting this most recent surge of the virus with fewer people working in health care, and particularly fewer people working in skilled nursing and rehabilitation centers. Tens of thousands of health care workers in Maryland have left the field since the start of the pandemic. Licensed health care professionals are scarce and all settings are competing for employees from the same limited labor pool.

Workforce challenges such as recruitment and retention have long existed in health care, even before the COVID-19 pandemic. These challenges have only grown worse over the last two years and they will likely remain even as we begin to navigate a post-pandemic world.

Many of these measures that this legislation proposes have been put in place during the COVID-19 pandemic. While they have not completely solved the staffing crisis, they have helped maintain staffing ratios and care capacity. These measures that have been put in place are not permanent. This legislation is important to ensure that we continue to have solutions to staffing challenges and remove barriers to entry after the pandemic.

Given the workforce crisis we currently face, and taking into consideration the potential for future health care staffing emergencies, it is imperative that put in place a permanent framework that will ensure continued access to care delivered by qualified professionals.

**For these reasons, we request a favorable report from the Committee on Senate Bill 407.**

*Submitted by:*

Joseph DeMattos, Jr.  
President and CEO  
(410) 290-5132

AMENDMENT NO. 1

On page 2 after line 25, insert:

**“(14) A RESIDENTIAL SERVICE AGENCY AS DEFINED IN §19-4A-01 OF THIS ARTICLE.**  
**(15) A MEDICAL ADULT DAY CENTER AS DEFINED IN §14-301 OF THIS ARTICLE.**  
**(16) HOSPICE AS DEFINED IN §19-901 OF THIS ARTICLE.”**

AMENDMENT NO. 2

On page 4, in line 11, strike lines 11-18 and substitute:

**“(4) GRADUATE MEANS AN MEANS AN RN GRADUATE, AN LPN GRADUATE, OR A CNA/CMT GRADUATE.**

**(I) “CNA/CMT GRADUATE” MEANS A PERSON WHO HAS SUCCESSFULLY COMPLETED AN APPROVED NURSING ASSISTANT TRAINING PROGRAM (AS DEFINED IN §8-6A-01(D) OF THIS ARTICLE) OR AN APPROVED MEDICATION TECHNICIAN TRAINING PROGRAM (AS DEFINED IN § 8-6A-01(C) OF THIS ARTICLE).**

**(II) “LPN GRADUATE” MEANS A PERSON WHO COMPLETED SATISFACTORILY AND MET ALL REQUIREMENTS FOR A DIPLOMA OR DEGREE FROM:**

**(a) A LICENSED PRACTICAL NURSING EDUCATION PROGRAM APPROVED BY THE STATE BOARD OF NURSING; OR**

**(b) AN OUT-OF-STATE LICENSED PRACTICAL NURSING EDUCATION PROGRAM DETERMINED TO BE EQUIVALENT BY THE STATE BOARD OF NURSING.**

**(III) “RN GRADUATE” MEANS A PERSON WHO COMPLETED SATISFACTORILY AND MET ALL REQUIREMENTS FOR A DIPLOMA OR DEGREE FROM:**

**(a) A REGISTERED NURSING EDUCATION PROGRAM APPROVED BY THE STATE BOARD OF NURSING; OR**

**(b) AN OUT-OF-STATE REGISTERED NURSING EDUCATION PROGRAM DETERMINED TO BE EQUIVALENT BY THE STATE BOARD OF NURSING.”**

AMENDMENT NO. 3

On page 4, in line 25, after “AUTHORIZING”; insert **“AN INDIVIDUAL WHO HOLDS A VALID, UNEXPIRED HEALTH OCCUPATIONS LICENSE ISSUED IN ANOTHER STATE, AN INACTIVE LICENSEE, A RETIRED HEALTH CARE PRACTITIONER, OR A NURSE GRADUATE”**.

AMENDMENT NO. 4

On page 4, in line 30, strike “AND” and substitute “OR”.

AMENDMENT NO. 5

On page 5, in line 9, strike “NURSING”.

AMENDMENT NO. 6

On page 7, strike lines 21-23, and substitute:

**“AN RN GRADUATE MAY PRACTICE REGISTERED NURSING (AS DEFINED IN § 8-101(O) OF THIS ARTICLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, AN LPN GRADUATE MAY PRACTICE LICENSED PRACTICAL NURSING (AS DEFINED IN § 8-101(N) OF THIS ARTICLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, AND A CNA/CMT GRADUATE MAY PRACTICE AS A NURSING ASSISTANT OR MEDICATION TECHNICIAN (AS APPLICABLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, IF:”**

AMENDMENT NO. 7

On page 7, in line 30, strike “NURSING”.

AMENDMENT NO. 8

On page 7, in line 31, strike “PRACTICE REGISTERED NURSING” and substitute:

**“ENGAGE IN SUCH ACTIVITIES”**

AMENDMENT NO. 9

On page 8, strike lines 1-2, and substitute:

**“2. ACTIVELY SUPERVISE THE GRADUATE WHILE THEY ARE ENGAGED IN SUCH ACTIVITIES.”**

AMENDMENT NO. 10

On page 8, on line 3, strike “NURSING” and substitute “RN” and on line 4, strike “THE NURSING” and substitute “THE RN”.



**SB407-CBH-FAV.pdf**

Uploaded by: Lori Doyle

Position: FAV



Testimony on SB 407  
**Health Occupations – Health Care Staffing Shortage Emergency – Declaration  
And Licensing and Practice Requirements  
(Health Care Heroes Act of 2022)**

Senate Finance Committee  
Senate Education, Health, and Environmental Affairs  
February 9, 2022

**POSITION: SUPPORT**

The Community Behavioral Health Association of Maryland (CBH) is the leading voice for community-based providers serving the mental health and addiction needs of vulnerable Marylanders. Our 95 members serve the majority of those accessing care through the public behavioral health system. CBH members provide outpatient and residential treatment for mental health and addiction-related disorders, day programs, case management, Assertive Community Treatment (ACT), employment supports, and crisis intervention.

Behavioral health providers are facing an unprecedented workforce crisis since the onset of COVID. The licensed positions impacted include those for psychiatrists, psychiatric nurse practitioners, social workers, and professional counselors, and impacted programs include outpatient clinics, crisis beds, and assertive community treatment. Our members report a 48% increase in the rate of staff turnover and a 42% increase in the rate of staff vacancies since the pandemic began in early 2020. We are also seeing significant increases – 70% - in the amount of time it takes to fill vacancies. As a result, 23% of providers have reduced treatment capacity – and this at a time when suicide attempts and opioid overdoses are spiraling upwards.

SB 407 – which includes behavioral health programs – will provide some needed relief by allowing flexibility in licensure requirements during declared staff shortage emergencies. Providers have been doubly hit by the delays in licensure caused by the hack to the Maryland Department of Health, so expediting temporary licenses for those whose applications are pending would be very helpful.

We thank the Administration for introducing this legislation and ask the Committees to please give it a favorable report.

Thank you for your consideration.

# **maryland-hospital-association-covid-snapshot-feb-2**

Uploaded by: Nicole Stallings

Position: FAV

# MARYLAND HOSPITAL ASSOCIATION COVID-19 SNAPSHOT

FEBRUARY 2022

Maryland hospitals and health systems continue to push forward and save lives despite tremendous, ongoing strain caused by COVID-19. It is vitally important that hospitals and health systems receive the support and resources necessary to ensure the people of Maryland have access to vital medical care.

Maryland hospitals face historic challenges and unprecedented staffing pressure

## More New Cases

Recent **30** days **287,000**

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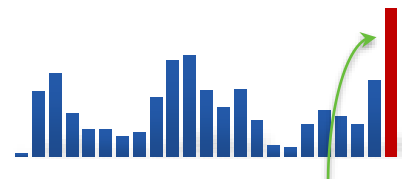
## More Emergency Visits

**↑ 37%**

*more emergency visits in Dec 2021 than Dec 2020*

**ED usage**, including boarded patients, hit 2-year highs in December and January

## More Total Patients



January averaged **2,603** COVID inpatients per day, **48% higher** than any other month during the pandemic

## Labor Costs Spiking

**↑ \$453 million**

Contract **labor costs** above pre-pandemic levels

## Unending Burden

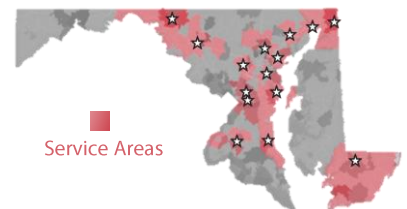
*"Think of a **train wreck every day for weeks on end**. That's what we are dealing with."*

*Dr. Gabe Kelen, head of Department of Emergency Medicine and director of Johns Hopkins Office of Critical Event Preparedness and Response*

## Crisis Care

**15**

MD hospitals declared **crisis standards of care**



# **SB 407 Health Care Heroes Act - Support.pdf**

Uploaded by: Nicole Stallings

Position: FAV



Maryland  
Hospital Association

**Senate Bill 407 - Health Occupations - Health Care Staffing Shortage Emergency -  
Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)**

**Position: *Support***

February 9, 2022

Senate Finance Committee

**MHA Position**

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 407, the Health Care Heroes Act of 2022.

Our hospital heroes have been there for Marylanders, serving more than 700 days on the front lines of the COVID-19 pandemic. We're coming out of what was perhaps the most harrowing month of this public health crisis since its earliest days.

In January, there were more new cases of COVID-19 than in the previous 10 months combined. A spike in hospitalizations—2,603 COVID inpatients per day on average—pushed hospitals and their already overburdened workforces beyond limits. As a result, 15 hospitals, one-third of the state's acute care hospitals, were compelled to operate under crisis standards of care.

Workforce shortages are at crisis levels with a staggering 50% jump in hospital nurse vacancies in just five months. That means fewer caregivers at the bedside, limiting capacity to care for patients, both those with COVID-19 and those having other serious conditions such as cancer.

At the moment, the so-called Omicron wave is subsiding. Most hospitals that adopted crisis standards of care have moved to contingency standards of care. But this surge—the fifth since the pandemic began two years ago—will not be the last. Hospitals are bracing for the next one.

The collision of another surge with our persistent staffing shortages could once again place hospitals in critical condition. That will threaten the health of all Marylanders. It need not be so.

SB 407 will provide a way for the Maryland health secretary to declare a health care staffing emergency in certain circumstances. Such a declaration would trigger the licensure flexibilities that are crucial to hospitals' ability to care for Marylanders. During earlier surges, similar provisions freed thousands of practitioners—from nursing students to those who live in other states or had expired or soon-to-expire licenses—to step up in our hospitals, nursing homes and clinics. It was a lifeline.

These Maryland heroes have put caring for their neighbors first throughout this pandemic. Now they need relief afforded by the Health Care Heroes Act of 2022. We urge a favorable report.

For more information, please contact:

Nicole Stallings, Chief External Affairs Officer and SVP, Government Affairs & Policy  
Nstallings@mhaonline.org

# **SB 407 - Health Occupations - HC Staffing Shortage**

Uploaded by: Pegeen A. Townsend

Position: FAV

**SB 407 – Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)**

**Position: *Support***

February 9, 2022

Senate Finance Committee

**Bill Summary**

SB 407, an emergency bill, would authorize the Secretary of Health to declare a health care staffing shortage emergency when it impacts the ability of health care facilities to appropriately respond to the clinical needs of patients and the staffing shortage endangers the public health in the State. Each health occupations board must establish processes for the issuance of an initial health occupation license, a temporary health occupations license, and a temporary practice letter on an expedited basis during a health care staffing shortage emergency. On the declaration of a health care staffing shortage emergency, the Secretary may direct the health occupations boards to implement the expedited licensing processes.

**MedStar Health's Position**

SB 407 would provide a mechanism to allow the Maryland Secretary of Health to, in certain circumstances, declare a health care staffing emergency. Such a declaration would trigger the licensure flexibilities which are critical to hospitals' ability to care for Marylanders now and into the future. In January 2022, there were more new cases of COVID-19 than the previous 10 months combined. A spike in hospitalizations—2,603 COVID inpatients per day on average—strained hospitals and their already overburdened workforce. As a result, roughly a quarter of the state's hospitals (15) operated under crisis standards of care, indicating massive limits of resources and manpower. This situation developed very quickly and demonstrated the need for the government to respond in real-time.

Our hospital heroes have been there for Marylanders, serving for more than 700 days on the frontlines of the COVID-19 pandemic. We're coming out of what was perhaps the most harrowing month of this public health crisis since its earliest days. Workforce shortages are at crisis levels with a staggering 50 percent increase in hospital nurse vacancies in just five months. That means fewer caregivers at the bedside, limiting capacity to care for patients, including those with COVID-19 and other serious conditions. While most hospitals have been able to move from crisis to contingency standards as case rates dramatically declined, all hospitals are looking to the future and bracing for the next surge. That collision of a surge with our persistent staffing shortages could once again place hospitals in critical condition.

These heroes put caring for their communities first throughout this pandemic, and now they need relief afforded by the Health Care Heroes Act of 2022.

For the reasons listed above, we respectfully ask that you give SB 407 a ***favorable*** report.



# **LeadingAge Maryland - 2022 - SB407 - Governor's He**

Uploaded by: Aaron Greenfield

Position: FWA



576 Johnsville Road  
Sykesville, MD 21784

**TO:** Finance Committee  
**FROM:** LeadingAge Maryland  
**SUBJECT:** Senate Bill 407, Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)  
**DATE:** February 9, 2022  
**POSITION:** **Favorable with Amendment**

LeadingAge Maryland supports with amendment on Senate Bill 407, Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)

LeadingAge Maryland is a community of more than 135 not-for-profit aging services organizations serving residents and clients through continuing care retirement communities, affordable senior housing, assisted living, nursing homes and home and community-based services. Our mission is to expand the world of possibilities for aging in Maryland. We partner with consumers, caregivers, researchers, public agencies, faith communities and others who care about aging in Maryland.

This legislation authorizes the Secretary of Health to declare a health care staffing shortage emergency in the State and requires each health occupations board to establish processes for the issuance of initial licenses, temporary licenses, and temporary practice letters on an expedited basis during a health care staffing shortage emergency.

Skilled nursing and rehabilitation centers, assisted living campuses, and support professional are battling COVID-19 with fewer staff particularly in long-term care. As a result, our facilities have beds available to provide quality care that cannot be staffed. Workforce recruitment and retention has long been a challenge in healthcare and over the last two years, it has become much more challenging due to the pandemic. And, due to the highly contagious nature of Omicron, healthcare workers are testing positive for COVID and unable to work for several days. On any given day, 8 to 16 percent of workers in Maryland nursing homes are not able to work after testing positive for the virus.

This bill will codify some of the previous actions to address workforce shortages at health care facilities, including expediting licenses for retired health care practitioners, practitioners licensed in other states, and nursing graduates.

This flexibility will support providers in having adequate staff to support quality care should our state once again face periods of time where large numbers of staff are out sick. The flexibilities that have been in place under the State of Emergency have been invaluable. However, once the State of Emergency has ended, and the federal Public Health Emergency and corresponding federal waivers conclude, these helpful provisions will no longer be in place. CMS requires those working as nursing assistants in nursing homes to pass a certification examination within four months. Until that four months have passed, those individuals can work as nursing assistants provided that they are deemed competent by the facility to provide nursing and nursing related services. Currently there is a federal waiver in place that allows those nursing assistants to work PAST the 4 month period without becoming certified. It may be that, in a future health care staffing emergency, Maryland could request a similar waiver to allow nursing assistants to work on a temporary basis without being certified for longer than four months. It is important that nursing assistants are eligible to attain a certificate from the Board of Nursing on an expedited bases during a health care staffing shortage emergency. We would also request that CNAs who are certified in states other than Maryland be permitted to work in Maryland, as CNAs, during a health care staffing emergency.

Amendment: LeadingAge supports the Governor's amendment allowing for nursing assistant students to perform duties as Certified Nursing Assistants or Geriatric Nursing Assistants, if in such an emergency, they have yet to obtain their certification examination. Under CMS regulations, this is allowable provided that the individual is within four months of beginning to work as a nursing assistant in a nursing home.

For these reasons, LeadingAge Maryland respectfully requests a favorable report with the amendment for Senate Bill 407.

For additional information, please contact Aaron J. Greenfield, 410.446.1992

**SB0407\_FWA\_MdCSWC\_Health Care Heroes Act of 2022.p**

Uploaded by: Christine Krone

Position: FWA



## The Maryland Clinical Social Work Coalition

The MdcSWC, sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,500 licensed clinical social workers in Maryland.

TO: The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee  
The Hogan-Rutherford Administration

FROM: Judith Gallant, LCSW-C, Chair, Maryland Clinical Social Work Coalition

DATE: February 9, 2022

RE: **SUPPORT WITH AMENDMENT** – Senate Bill 407 – *Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)*

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The Maryland Clinical Social Work Coalition (MdcSWC), sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,500 licensed clinical social workers in Maryland. On behalf of MdcSWC, we **support with amendment** Senate Bill 407.

Currently, Title 14 of the Public Safety article grants the Governor the ability to declare a public health emergency, but for only 30 days at a time. To ensure that the State will be adequately prepared to deal with health emergencies in the future, Senate Bill 407 would grant authority to the Secretary of Health the power to declare a health care staffing shortage emergency in the State if certain conditions are met, and only for up to 180 days. The bill intends to relax licensure standards to bolster the current health care workforce, specifically targeting (1) an applicant for an initial health occupation license; (2) an individual who holds a valid, unexpired health occupation license issued in another state; (3) an inactive licensee; (4) a retired health care practitioner; and (5) a nursing graduate.

MdcSWC understands the Administration will be offering amendments that will allow the health occupation boards more discretion in how to expedite licenses. We believe that is the appropriate way to implement this. The Administration's amendments allow for more flexibility rather than the prescriptive method contained in the bill as introduced.

For these reasons, MdcSWC supports Senate Bill 407 with amendments.

**For more information call:**

Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone  
410-244-7000

Greater Washington Society for Clinical Social Work: [www.gwscsw.org](http://www.gwscsw.org)

**Contacts:** Coalition Chair: Judy Gallant, LCSW-C; email: [jg708@columbia.edu](mailto:jg708@columbia.edu); mobile (301) 717-1004

Legislative Consultants: Pamela Metz Kasemeyer and Christine Krone, Schwartz, Metz & Wise PA, 20 West Street, Annapolis, MD 21401

Email: [pmetz@smwpa.com](mailto:pmetz@smwpa.com); mobile (410) 746-9003 ; [ckrone@smwpa.com](mailto:ckrone@smwpa.com); mobile (410) 940-9165

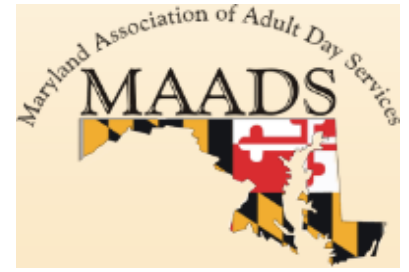
# **SB0407\_FWA\_LifeSpan, MAADS\_Health Care Heroes Act**

Uploaded by: Danna Kauffman

Position: FWA



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**TO:** The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee  
The Hogan-Rutherford Administration

**FROM:** Danna L. Kauffman  
Pamela Metz Kasemeyer

**DATE:** February 9, 2022

**RE:** **SUPPORT WITH AMENDMENT** – Senate Bill 407 – *Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)*

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On behalf of the LifeSpan Network, the largest and most diverse senior care provider association in Maryland, and the Maryland Association of Adult Day Services (MAADS), we **support with amendments** Senate Bill 407. Senate Bill 407 authorizes the Secretary of Health to declare a health care staffing shortage emergency in the State for no longer than 180 days. In so doing, Senate Bill 407 allows the Secretary to direct the health occupation boards to implement an expedited licensing process to allow categories of health care practitioners to work in designated health care facilities.

Given the complexity of issuing a catastrophic public health emergency and the limitations in statute (e.g., only permitted for thirty days and then must be reissued), LifeSpan and MAADS believe that affording the Secretary of Health this authority will allow the State to more quickly respond to staffing issues, like the one experienced during the omicron variant surge of the COVID-19 pandemic.

The amendments supported by LifeSpan and MAADS are those being put forth by the Administration. These amendments include expanding the entities defined as a “health care facility” to include a medical adult day center, a residential service agency, and a hospice program. Each of these settings have experienced severe staffing shortages over the last two years. In addition, LifeSpan and MAADS support aligning the bill with the latest Secretary’s order that expanded beyond a registered nurse those that could work following a successful completion of a training program as well as providing the Boards greater discretion on how to expedite licensure. We urge a favorable vote with the Administration’s amendments.

**For more information call:**

Danna L. Kauffman  
Pamela Metz Kasemeyer  
410-244-7000

# **SB 407 - Health Occupations - Health Care Staffing**

Uploaded by: Jake Whitaker

Position: FWA





**LARRY HOGAN**  
GOVERNOR

STATE HOUSE  
100 STATE CIRCLE  
ANNAPOLIS, MARYLAND 21401-1925  
(410) 974-3901  
(TOLL FREE) 1-800-811-8336

TTY USERS CALL VIA MD RELAY

**Senate Bill (SB) 407 - Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)**

**Position: Favorable with Amendments**  
**Jake Whitaker, Deputy Legislative Officer**  
**February 9, 2022**

Dear Chairs Kelley and Pinsky, Vice Chairs Feldman and Kagan, and Members of the Finance and Education, Health, Environmental Affairs Committees:

We respectfully submit this letter of support and request that the Committees report Senate Bill (SB) 407 - (Health Care Heroes Act of 2022) - favorable with amendments.

Whether it's our doctors, nurses, and EMTs, or the clinical staff at our testing and vaccination sites, we owe a profound debt of gratitude to our frontline medical workers. Thanks to our Health Care Heroes, Maryland has had one of the most comprehensive and successful pandemic responses in the nation. As a result of their work, Maryland's COVID-19 case rate has declined, and the state continues to report one of the lowest case rates in the country. Frontline medical workers have also been critical to the state's vaccination program and have administered more than 10.9 million total vaccines, including 2 million booster shots, making Maryland one of the most vaccinated states in the nation.

The Health Care Heroes Act will enable the implementation of a long-term framework to address future health care staffing shortages. This legislation authorizes the Secretary of Health to enact a temporary "Health Care Staffing Shortage Emergency" to take immediate and targeted action to significantly increase the number of health care practitioners available to serve Maryland patients. Specifically, the Secretary may direct the relevant Maryland health occupations boards to expedite and expand their licensing processes to temporarily authorize licensed out-of-state health care practitioners, inactive and retired practitioners, and certain students and graduates to practice at health care facilities in the state.

The emergency authority proposed under SB 407, will be limited in duration and can only be enacted in specific circumstances. Each "Health Care Staffing Shortage Emergency" may not exceed 180 days. Additionally, this bill will require the Maryland Department of Health to issue regulations establishing the factors that must be considered by the Secretary prior to declaring a staffing emergency. The criteria set forth in SB 407 ensures that a variety of stakeholders, including the Maryland health occupation boards, actively participate in the implementation of this legislation.

We want to express our gratitude to Maryland’s Health Care Heroes, the health occupations boards, and the industry stakeholders who participated in the development of this important legislation and amendments. For the aforementioned reasons, we respectfully request that the Committees report Senate Bill (SB) 407 favorable with amendments.

AMENDMENT NO. 1

On page 2 after line 25, insert:

**“(14) A RESIDENTIAL SERVICE AGENCY AS DEFINED IN §19-4A-01 OF THIS ARTICLE,  
(15) A MEDICAL ADULT DAY CENTER AS DEFINED IN §14-301 OF THIS ARTICLE,  
(16) HOSPICE AS DEFINED IN §19-901 OF THIS ARTICLE.”**

AMENDMENT NO. 2

On page 4, in line 11, strike lines 11-18 and substitute:

**“(4) GRADUATE MEANS AN MEANS AN RN GRADUATE, AN LPN GRADUATE, OR A  
CNA/CMT GRADUATE.**

**(I) “CNA/CMT GRADUATE” MEANS A PERSON WHO HAS SUCCESSFULLY  
COMPLETED AN APPROVED NURSING ASSISTANT TRAINING PROGRAM (AS DEFINED IN  
§8-6A-01(D) OF THIS ARTICLE) OR AN APPROVED MEDICATION TECHNICIAN TRAINING  
PROGRAM (AS DEFINED IN § 8-6A-01(C) OF THIS ARTICLE).**

**(II) “LPN GRADUATE” MEANS A PERSON WHO COMPLETED SATISFACTORILY  
AND MET ALL REQUIREMENTS FOR A DIPLOMA OR DEGREE FROM:**

**(a) A LICENSED PRACTICAL NURSING EDUCATION PROGRAM APPROVED BY THE  
STATE BOARD OF NURSING; OR**

**(b) AN OUT-OF-STATE LICENSED PRACTICAL NURSING EDUCATION PROGRAM  
DETERMINED TO BE EQUIVALENT BY THE STATE BOARD OF NURSING.**

**(III) “RN GRADUATE” MEANS A PERSON WHO COMPLETED SATISFACTORILY AND  
MET ALL REQUIREMENTS FOR A DIPLOMA OR DEGREE FROM:**

**(a) A REGISTERED NURSING EDUCATION PROGRAM APPROVED BY THE STATE  
BOARD OF NURSING; OR**

**(b) AN OUT-OF-STATE REGISTERED NURSING EDUCATION PROGRAM  
DETERMINED TO BE EQUIVALENT BY THE STATE BOARD OF NURSING.”**

AMENDMENT NO. 3

On page 4, in line 25, after “AUTHORIZING”; insert **“AN INDIVIDUAL WHO HOLDS A VALID,  
UNEXPIRED HEALTH OCCUPATIONS LICENSE ISSUED IN ANOTHER STATE, AN INACTIVE  
LICENSEE, A RETIRED HEALTH CARE PRACTITIONER, OR A NURSE GRADUATE”**.

AMENDMENT NO. 4

On page 4, in line 30, strike “AND” and substitute “OR”.

AMENDMENT NO. 5

On page 5, in line 9, strike “NURSING”.

AMENDMENT NO. 6

On page 7, strike lines 21-23, and substitute:

**“AN RN GRADUATE MAY PRACTICE REGISTERED NURSING (AS DEFINED IN § 8-101(O) OF THIS ARTICLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, AN LPN GRADUATE MAY PRACTICE LICENSED PRACTICAL NURSING (AS DEFINED IN § 8-101(N) OF THIS ARTICLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, AND A CNA/CMT GRADUATE MAY PRACTICE AS A NURSING ASSISTANT OR MEDICATION TECHNICIAN (AS APPLICABLE) AT A HEALTH CARE FACILITY UNDER PARAGRAPH (1) OF THIS SUBSECTION, IF:”**

AMENDMENT NO. 7

On page 7, in line 30, strike “NURSING”.

AMENDMENT NO. 8

On page 7, in line 31, strike “PRACTICE REGISTERED NURSING” and substitute:

**“ENGAGE IN SUCH ACTIVITIES”**

AMENDMENT NO. 9

On page 8, strike lines 1-2, and substitute:

**“2. ACTIVELY SUPERVISE THE GRADUATE WHILE THEY ARE ENGAGED IN SUCH ACTIVITIES.”**

AMENDMENT NO. 10

On page 8, on line 3, strike “NURSING” and substitute “RN” and on line 4, strike “THE NURSING” and substitute “THE RN”.

# **MRHA SB407 - Health Care Heroes Act -Support.pdf**

Uploaded by: Kathleen Hays

Position: FWA



## **Statement of Maryland Rural Health Association**

To the Senate Finance Committee

February 4, 2022

Senate Bill 407 Health Occupations- Health care staffing shortages emergency- declaration and licensing and practice requirements

### **POSITION: SUPPORT WITH AMMENDMENT**

Chair Kelly, Vice Chair Feldman, Senator Beidle, and members of the Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 407, the Healthcare Heroes Act.

MRHA supports this legislation that declares a health care staffing shortage emergency in the state and requires health occupation boards to establish processes for expediting licensure.

Health care staffing shortages are particularly pronounced in Maryland's rural communities. MRAH's top legislative priority this year is to support initiatives that respond to rural health care workforce needs, critical shortages and future pipelines.

Please consider adding local health departments to those identified as "health care facilities" as they are also experiencing staff vacancies and play a critical role in ending the state of emergency.

MHRA believes this legislation is important to support our rural communities and we urge your support with this amendment.

*Jennifer Berkman, MEd Board President 443-783-0480*

**4d - SB 407-FIN -Dental Board - LOSWA.pdf**

Uploaded by: Maryland Department of Health Office of Governmental Affairs

Position: FWA



# Board of Dental Examiners

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Arpana S. Verma Board Chair – Francis X. McLaughlin, Jr., Executive Director

55 Wade Avenue/Tulip Drive Catonsville, MD 21228 Phone: 410-402-8501; Email: [mdh.mddentalboard@maryland.gov](mailto:mdh.mddentalboard@maryland.gov)

February 9, 2022

The Honorable Dolores G. Kelley  
Chair, Senate Finance Committee  
3 East Miller Senate Office Building  
Annapolis, Maryland 21401-1991

**RE: SB 407-Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022) - Letter of Support with Amendments**

Dear Chair Kelley and Committee Members:

The Maryland State Board of Dental Examiners (the Board) is submitting this support with amendments to the position paper for SB 407 - Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022). The bill empowers the Secretary of Health to declare a health care staffing shortage emergency for up to 180 days if certain health care facilities in the State have insufficient staff which endangers public health. Each health occupations board is required to establish an expedited temporary licensing process for issuing initial licenses, out of state licensees, reactivating inactive licensees, and licensing those who have retired so that they may provide treatment in those facilities subject to the emergency order.

The Board supports the bill since it is in the best interest of all concerned to provide needed care in the event of a staffing emergency. However, the Board is concerned that those dentists and dental hygienists who hold inactive licenses for up to 8 years, or those who have been in retirement for up to 8 years, may have lost essential clinical skills, which would pose a risk to our citizens. Under current regulations the Board requires a candidate for licensure to retake their clinical examination if they have been absent from clinical practice for more than 4 years. Even under emergency conditions, for the protection of Maryland's citizens the Board suggests that the period not be expanded. The Board therefore proposes the following amendments which would result in making the overall plan safer, while still recognizing that an emergency exists.

AMENDMENT 1: Page 4, line 10, strike "8" and substitute "4".

AMENDMENT 2: Page 4, line 21, strike "8" and substitute "4".

I hope that this information is helpful. If you would like to discuss this further, please contact me at 240-498-8159, [asverma93@gmail.com](mailto:asverma93@gmail.com), or Dr. Edwin Morris, the Board's Legislative Committee Chair at 410-218-4203. In addition, the Board's Executive Director, Mr. Frank McLaughlin may be reached at 443-878-5253, [frank.mclaughlin@maryland.gov](mailto:frank.mclaughlin@maryland.gov).

Sincerely,

A handwritten signature in black ink, appearing to read 'Arpana S. Verma', with a long horizontal flourish extending to the right.

Arpana S. Verma, D.D.S.  
Board President

**The opinion of the Maryland State Board of Dental Examiners expressed in this support with amendments position paper does not necessarily reflect that of the Department of Health or the administration.**



**4e - SB 407 - FN - BOP - LoSWA.docx.pdf**

Uploaded by: Maryland Department of Health Office of Governmental Affairs

Position: FWA



## DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

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### 2022 SESSION POSITION PAPER

**BILL NO.:** SB 407 – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)  
**COMMITTEE:** Education, Health, and Environmental Affairs  
**POSITION:** Support with Amendments

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**TITLE:** Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)

**BILL ANALYSIS:** Authorizes the Secretary of Health to declare a health care staffing emergency in the State and requires each health occupations board to establish processes for the issuance of initial and temporary licenses and temporary practice letters during a health care staffing shortage emergency.

#### **POSITION & RATIONALE:**

The Maryland Board of Physicians (the “Board”) is submitting this letter of support with amendments for Senate Bill 407 – Health Care Staffing Shortage Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Act of 2022).

The past two years have amply demonstrated the importance of maintaining a robust health care workforce, especially in times of crisis. The Board has complied with all executive orders issued during the COVID-19 pandemic and associated staffing shortages, and has worked with the Secretary of Health’s office to keep information about these orders public and accessible to all licensees and applicants.

Beyond the executive orders, the Board has worked hard to maintain full operations throughout the pandemic, and to develop processes to allow licenses to be issued as quickly as possible. The Board currently issues the majority of its licenses within ten days of receipt of the fully completed application. In addition, the Board has been working to develop multiple alternative pathways to licensure, including participating in the Interstate Medical Licensure Compact (“IMLC”), developing a uniform application process and working with medical boards in Virginia and the District of Columbia to discuss reciprocity agreements between these jurisdictions.

The Board supports measures to codify the ways in which health care staffing shortages may be addressed during a state of emergency. However, the Board is concerned that the language on page 4, lines 28 through 33, would require the Board to establish processes for the issuance of temporary health occupation licenses and temporary practice letters. The Board does not currently issue temporary licenses or practice letters. In reviewing the cost and effectiveness of issuing temporary licenses, the Board determined that doing so would represent a significant cost increase without materially decreasing the amount of time it takes to obtain a license.

Given that SB 407 also contains provisions requiring health occupations boards to develop processes to issue expedited licenses for initial applicants, out-of-state licensees, inactive licensees and retired licensees, the Board does not believe that requiring temporary licenses or practice letters for all health occupations boards is necessary. Therefore, the Board recommends the following amendment:

**AMENDMENT 1**

*The Board recommends striking the word “AND” on page 4, line 30, and replacing it with the word “OR.”*

Thank you for your consideration. For more information, please contact Matthew Dudzic, Health Policy Analyst, Maryland Board of Physicians, 410-764-5042.

Sincerely,



Damean W. E. Freas, D.O.  
Chair, Maryland Board of Physicians

**The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.**

**4g - SB 407 - FIN - MBON - LOSWA.docx (1).pdf**

Uploaded by: Maryland Department of Health Office of Governmental Affairs

Position: FWA



# Board of Nursing

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

February 9, 2022

The Honorable Delores G. Kelley  
Chair, Finance Committee  
3 East Miller Senate Office Building  
Annapolis, MD 21401-1991

**RE: SB 407 – Health Occupations – Healthcare Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Healthcare Heroes Act of 2022) – Letter of Support with Amendments**

Dear Chair Kelley, Chair Pinsky and Committee Members:

The Maryland Board of Nursing (the Board) respectfully submits this letter of support with amendments to Senate Bill (SB) 407 – Health Occupations – Healthcare Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Healthcare Heroes Act of 2022). This bill authorizes the Secretary of Health to declare a healthcare staffing shortage emergency in the state. This bill additionally requires each health occupations board to establish processes for the issuance of initial licenses, temporary licenses, and temporary practice letters on an expedited basis during a healthcare staffing shortage emergency.

The Board is in support of SB 407 as it bolsters efforts to address Maryland’s healthcare staffing shortage during a declared staffing shortage. However, the bill as written would give nursing individuals with an undetermined criminal history background check the ability to apply for licensure and return to practice. The Board is very concerned about allowing individuals with unresolved disciplinary records to practice unrestricted as their applications are reviewed. This could be detrimental to the health and safety of vulnerable patients. A license in good standing indicates that an individual maintained all standards of practice, including renewal requirements, no records of unresolved discipline, and submitted paperwork to indicate a change of licensure status (inactive or non-renewed). The Board therefore proposes the following amendments that would result in a safer transition to practice for individuals who were placed on inactive status or who were retired.

Section 1-227. On page 4. Lines 8 – 10. Add:

**(3) “INACTIVE LICENSEE” MEANS A LICENSEE WHO HOLDS A HEALTH OCCUPATION LICENSE ISSUED BY A HEALTH OCCUPATIONS BOARD THAT HAS BEEN PLACED ON INACTIVE STATUS WITHIN THE PAST 8 YEARS AND WAS IN GOOD STANDING AT THAT TIME.**

Section 1-227. On page 4. Lines 19 – 22. Add:

**(5) “RETIRED HEALTH CARE PRACTITIONER” MEANS AN INDIVIDUAL WHO HELD A VALID HEALTH OCCUPATION LICENSE ISSUED BY A HEALTH OCCUPATIONS BOARD WITHIN THE PAST 8 YEARS THAT IS NOT ACTIVE AND HAS NOT BEEN PLACED ON INACTIVE STATUS, AND WAS IN GOOD STANDING AT THE TIME OF EXPIRATION.**

For the reasons discussed above, the Board of Nursing respectfully submits this letter of support with amendments for SB 407.

I hope this information is useful. For more information, please contact Iman Farid, Health Policy Analyst, at (410) 585 – 1536 ([iman.farid@maryland.gov](mailto:iman.farid@maryland.gov)) or Rhonda Scott, Deputy Director, at (410) 585 – 1953 ([rhonda.scott2@maryland.gov](mailto:rhonda.scott2@maryland.gov)).

Sincerely,



Gary N. Hicks  
Board President

**The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.**

**4b - SB 407 - FIN- MACHO - LOSWA.docx.pdf**

Uploaded by: Maryland Department of Health /Office of Governmental Affairs

Position: FWA



**2022 SESSION  
POSITION PAPER**

**BILL:** SB 407 – Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)

**COMMITTEE:** Senate Finance Committee

**POSITION:** Letter of Support With Amendments

**BILL ANALYSIS:** SB 407 would authorize Secretary of Health to declare a health care staffing shortage emergency in Maryland; allow health occupations boards that regulate categories of health care practitioners included in the identified staffing shortage, to implement expedited licensing process when there is such an emergency declaration; and require each affected board to establish processes for issuance of an initial health occupations license, temporary health occupation license, and a temporary practice letter on an expedited basis during said emergency.

**POSITION RATIONALE:** The Maryland Association of County Health Officers (MACHO) supports SB 407 but requests amendment to include local public health departments (LHDs) so they can benefit from the expedited processes related to board certified professionals for those in LHD programs affected by an emergency declaration as described.

***Proposed Amendment:***

*Section “A”, add “Local Health Department” as an eligible “Health Care Facility.”*

LHDs provide a wide variety of services that require nurses and other regulated health care practitioners. Before the pandemic, some programs were already experiencing staffing shortages. The COVID-19 response has only exacerbated and increased staffing shortages in those programs and others requiring licensed or certified professionals.

In addition to the sectors mentioned in the bill, staffing shortages in Maryland and US also impact LHDs and their ability to recruit and retain eligible staff. By adding LHDs to this bill, they will be able to obtain nurses and other health care practitioners in a timelier manner during such a declared emergency.

Throughout the pandemic, LHDs have provided their normal services (i.e., scheduled immunizations, dental services, STI testing) while also responding to COVID. LHDs increased staffing for contact tracing, testing, and vaccination efforts and to quickly stand-up large-scale testing sites and mass vaccination sites. But they continue to find it difficult to find trained and qualified health care professionals to support the work.

MACHO supports SB 407 but asks that it does not exclude LHDS as they suffer from the same staffing shortages as in other sectors. They provide key lead and support roles in providing COVID-19 response and services for which they need licensed and trained health care professionals to help carry out.



For these reasons, the Maryland Association of County Health Officers submits this letter of support, with amendment, for SB 407. For more information, please contact Ruth Maiorana, MACHO Executive Director at [rmaiora1@jhu.edu](mailto:rmaiora1@jhu.edu) or 410-937-1433. *This communication reflects the position of MACHO.*

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**615 North Wolfe Street, Room E 2530 // Baltimore, Maryland 21205 // 410-937-1433**

**2021 MOTA SB 407 Senate Side.pdf**

Uploaded by: Robyn Elliott

Position: FWA



# Maryland Occupational Therapy Association

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PO Box 36401, Towson, Maryland 21286 ♦ [motamembers.org](http://motamembers.org)

<b>Committee:</b>	<b>Senate Finance Committee</b>
<b>Bill:</b>	<b>Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Act)</b>
<b>Hearing Date:</b>	<b>February 9, 2022</b>
<b>Position:</b>	<b>Support with Amendments</b>

The Maryland Occupational Therapy Association (MOTA) supports the underlying intention of Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency – Declaration of Licensing Practice Requirements (Health Care Heroes Act). We would ask to work with the Governor’s Office, the Committee, and other stakeholders on further refining the bill:

- We believe that the Secretary should consult with health professional associations, health occupational boards, schools, and other health facilities before making any decisions on health care shortages.
- We believe this bill is too focused on hospital shortages. Occupational therapy practitioners work in a wide range of settings where shortages already exist: home health, long-term care, and school settings for example.
- We believe that the bill is too prescriptive in the steps that the Secretary could take. It is difficult to predict the parameters of future shortages. We believe that the solutions are best left up to the health professionals and health licensing boards who have the best understanding of state licensure requirements and opportunities for flexibility. We would recommend modifying the bill to allow health occupation boards, in consultation with health professional associations and facilities, to make recommendations of the Secretary on potential solutions.

We think this is an important issue and we are committed to supporting the Governor’s office and the Maryland General Assembly in crafting the right solution so Maryland is better prepared for workforce shortages. If we can provide any additional information, please contact Robyn Elliott at [relliott@policypartners.net](mailto:relliott@policypartners.net) or (443) 926-3443.

**2022 MCHS SB 407 Senate Bill.doc.pdf**

Uploaded by: Robyn Elliott

Position: FWA



## Maryland Community Health System

**Committee:** Senate Finance Committee

**Bill Number:** Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency –  
Declaration and Licensing Practice Requirements (Health Care Heroes Act)

**Hearing Date:** February 9, 2022

**Position:** Support with Amendment

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Maryland Community Health System (MCHS) supports with amendment *Senate Bill 407 – Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Acts)*.

Maryland Community Health System is a network of federally qualified health centers that focus on serving the underserved and underinsured. During the COVID-19 emergency, our health centers were hit as hard as other health care facilities with staffing shortages. Most of the Secretary's policies to grant more flexibilities were oriented towards hospitals and long-term care facilities. We understand that those facilities were facing unprecedented crises. Going forward, we would like to ensure workforce shortage policies acknowledge the needs of community health centers.

To that end, we would like to ask for two amendments, and we would be pleased to be part of a stakeholder discussion on any of the other amendments under consideration:

- Add FQHCs to the list of facilities which are included in workforce shortage policies:

On page 2 in line 25, insert "(14) FEDERALLY QUALIFIED HEALTH CENTERS" after "PHARMACY"

- Add the following language regarding credentialing and provider enrollment. We discovered during the pandemic, that it was difficult, if not impossible, to credential a practitioner a part of an insurance panel or enroll the practitioner in Medicaid if the practitioner had a temporary license.

"Section X. AND BE IT FURTHER ENACTED that the Maryland Department of Health and the Maryland Insurance Administration should consult with stakeholders and make recommendations regarding expediting insurance credentialing for public and private insurance, provider enrollment for Medicaid, and controlled dangerous substance registration for practitioners practicing with a temporary license, out-of-state license, or

expedited initial licensure during an Emergency Healthcare Workforce Shortage. The Department of Health and Maryland Insurance Administration should report the workgroup's recommendations to Senate Finance Committee and the House Health and Governmental Operations Committee by December 1, 2022."

Thank you for your consideration of our suggested amendments. If we can provide any additional information, please contact Robyn Elliott at [relliott@policypartners.net](mailto:relliott@policypartners.net) or (443) 926-3443.

**2022 MNA SB 407 Senate Side.docx.pdf**

Uploaded by: Robyn Elliott

Position: FWA



**Committee:** Senate Finance Committee

**Bill:** Senate Bill 407 – Health Occupations – Health Care Staffing Shortages  
Emergency – Declaration and Licensing Practice Requirements (Health  
Care Heroes Act)

**Hearing Date:** February 9, 2022

**Position:** Support with Amendments

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The Maryland Nurses Association (MNA) supports *Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Act)*. Our support is strongly contingent upon the adoptions of amendments that address our concerns with the bill.

MNA supported many, but not all, of the measures that have been enacted under the Governor’s declaration of a public health emergency. In essence, we recognize that in a total state of emergency, it can be better to have under-prepared practitioners rather than no practitioners at all. However, we have learned much from this pandemic, and we think those lessons learned should be applied to any future emergencies or acute staffing shortages.

Even during a staffing shortage, the State of Maryland carries a responsibility that health care practitioners are qualified, provide safe and competent care, and can work effectively as part of a care team.

We have some underlying concerns that a future Secretary of Health could use this bill intermittently to address nursing workforce shortages, rather than working on underlying solutions to the problem. Nevertheless, we do acknowledge that there could be future shortage situations that could rise to the level as needed to put in place some of the flexibilities contemplated by this bill.

Therefore, MNA will support the legislation only if the following amendments are adopted. We look forward to working with the Governor’s Office, the Committee and other



stakeholders. If we can provide any additional information, please contact Robyn Elliott at [relliott@policypartners.net](mailto:relliott@policypartners.net) or (443) 926-3443.

**Amendment 1: Recognizing school shortages:**

On page 2 on line 25, insert “(14) PRIMARY AND SECONDARY SCHOOLS”

*Explanation:* As the current pandemic has demonstrated, our public schools, which are already understaffed in the health area, are severely affected by shortages of nurses, certified medical technicians, school psychologists, occupational therapy professionals, and speech pathologists.

**Amendment 2: Stakeholder Involvement is Critical in Declaring a Staffing Shortage:**

On page 3 in line 6 after “EMERGENCY” insert “AFTER CONSULTATION WITH HEALTH PROFESSIONAL ASSOCIATIONS, HEALTH OCCUPATION BOARDS, AND HEALTH FACILITIES”.

*Explanation:* As written, the Secretary has no requirements to consult with a broad range of stakeholders. In fact, the bill is slanted towards consultation with the health facilities only, as all of the data used to determine if there is a shortage would come from the facilities. The Secretary will need to perspective of all stakeholders to make such decisions.

**Amendment 3: Limitations of Length of Staffing Shortage Emergency:**

On page 3 in line 29 after “180 DAYS”, insert “AND MAY NOT BE RENEWED WITHIN A TWO-YEAR PERIOD.”

*Explanation:* As written, there is nothing precluding the Secretary from continuously renewing a staffing shortage emergency instead of addressing the underlying issues of the shortage.

**Amendment 4: Ensuring Permanent Licenses are Only Given to Individuals who Meet State Requirements**

On page 5:

- In line 4 insert after “LICENSE”, “FOR INDIVIDUALS WHO MEET STATE LICENSURE REQUIREMENTS”

- In line 6 after “STATE”, insert “AND WHO MEETS STATE LICENSURE REQUIREMENTS”
- In line 7 after “LICENSEE”, insert “WHO MEETS STATE REQUIREMENTS FOR REINSTATEMENT OF AN ACTIVE LICENSE”
- In line 8 after “PRACTITIONER”, insert WHO MEETS STATE REQUIREMENTS FOR REINSTATEMENT OF AN ACTIVE LICENSE”
- In line 9, strike “A NURSING GRADUATE”

*Explanation:* This provision would award permanent licensure to individuals well-beyond any emergency staffing shortage. Therefore, it is imperative that individuals meet state licensure requirements. Of particular note, nursing graduates, as defined in the bill, would *never* meet State licensure requirements as they have not completed the NCLEX exam. If Maryland recognizes nursing graduates as licensees before they successfully pass the NCLEX exam, we are in danger of violating the provisions of the nursing compact and risk becoming disqualified to participate.

**Amendment 5: Requiring a completed criminal history records check for permanent licensure**

On page 18, insert “FOR A TEMPORARY HEALTH OCCUPATIONS LICENSE OR A TEMPORARY PRACTICE LETTER; AND A COMPLETED CRIMINAL HISTORY RECORDS CHECK AS REVIEWED AND APPROVED BY THE HEALTH OCCUPATIONS BOARD FOR PERMANENT HEALTH OCCUPATIONS LICENSE”

*Explanation:* We believe this amendment corrects a drafting error. While many boards have a process where they grant a temporary license if there is a delay in obtaining a criminal history records check, permanent licensure should be contingent on having the board review a completed criminal history records check.

**Amendment 6: Defining who qualifies for a temporary license**

We do not have a specific amendment at this time. We are unclear of who would qualify for a temporary license or practice letter as that does not seem to be defined in the bill.

**Amendment 7: Individuals who represent themselves as a nurse or any other health care professional should meet state requirements, or else the public would be at risk.**

Strike the entire provision on page 6 from lines 7 through 11.

*Explanation:* There are no circumstances in which people who do not meet the State's nursing licensure requirements should be allowed to practice using the title "nurse". This jeopardizes public safety. MNA has been very consistent in opposing this concept in other proposals.

**Amendment 8: Nursing graduates should not practice as registered nurses until they meet all qualifications for licensure.**

Strike line 21 on page 7 through line 5 on page 8 in its entirety.

*Explanation:* Nursing graduates can certainly play an expanded role in health facilities during shortages – or in other circumstances. However, it is unfair to the public to place someone who is not qualified to be a nurse in the role of a nurse; and it is equally unfair to the nursing graduate who will be placed in situations where they have a high probability of making an error which would effect their chances of permanent licensure.



**2022 LCPCM SB 407 Senate Side.pdf**

Uploaded by: Scott Tiffin

Position: FWA



**Committee:** Senate Finance Committee

**Bill Number:** Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency –  
Declaration and Licensing Practice Requirements (Health Care Heroes Act)

**Hearing Date:** February 9, 2022

**Position:** Support with Amendment

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The Licensed Clinical Professional Counselors of Maryland (LCPCM) support with amendments *Senate Bill 407 – Health Occupations – Health Care Staffing Shortages Emergency – Declaration and Licensing Practice Requirements (Health Care Heroes Act)*.

LCPCM appreciates the proactive steps taken by the Lieutenant Governor and the Maryland General Assembly to support licensure compacts. Long-term, we think these compacts offer the best solution to ensure states have the flexibility to meet the health care needs of their residents with appropriately qualified professionals. Maryland was the second state to join the compact for professional counselors; and in the upcoming year, we expect enough states to join so that the compact is activated.

We recognize that the adoption of compacts will take some time, and there may interim solutions to consider when a health care workforce shortage has reached a crises situation. We would request several amendments that would make this bill more oriented to the shortage of behavioral health practitioners. As introduced, the bill is mostly about nursing shortages in hospitals:

- Recognize schools are experiencing significant shortages of behavioral health professionals and school nurses:

On page 2 in line 25 after “PHARMACY”, insert “(14) PRIMARY AND SECONDARY SCHOOLS”

- Require that the Secretary consult with health professional organizations and health occupation boards before declaring an emergency health care workforce shortage:

On page 3 in line 6 after “EMERGENCY”, insert “AFTER CONSULTATION WITH HEALTH PROFESSIONAL ASSOCIATIONS, HEALTH OCCUPATION BOARDS, AND HEALTH CARE FACILITIES AND PROGRAMS, INCLUDING BEHAVIORAL HEALTH PROGRAMS.”

- Delete provision that would grant temporary licenses to people who still need to complete clinical education, experience, or supervision requirements to be licensed, as we think this provision presents a danger to the public.

On page 6, delete lines 7 through 11 in their entirety.

- On page 8, insert a sunset provision that sunsets this bill after 5 years. At that point in time, the Maryland General Assembly should consider whether the adoption of licensure compacts has substantially resolved the issue.

Thank you for your consideration of our testimony. We look forward to working with the Governor’s office, the Committee, and other stakeholders on this important issue. If we can provide any additional information, please let us know by contacting Robyn Elliott at [relliott@policypartenrs.net](mailto:relliott@policypartenrs.net) or (443) 926-4443.

**SB0407\_FWA\_MedChi, MDACEP, MDDC Society\_Health Car**

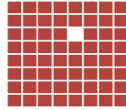
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Position: FWA





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Maryland Chapter  
AMERICAN COLLEGE OF  
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1.800.492.1056  
www.medchi.org

TO: The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee  
The Hogan-Rutherford Administration

FROM: J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone

DATE: February 9, 2022

RE: **SUPPORT WITH AMENDMENT** – Senate Bill 407 – *Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022)*

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On behalf of the Maryland State Medical Society (MedChi), the Maryland Chapter of the American College of Emergency Physicians (MDACEP), and the Maryland/District of Columbia Society for Respiratory Care (MD/DC Society), we submit this letter of **support with amendment** for Senate Bill 407.

Senate Bill 407 would give the Secretary of Health the power to declare a health care staffing shortage emergency in the State if certain conditions are met. The fundamental purpose of the bill is to relax licensure standards, but only under certain conditions and only for a limited period, up to 180 days.

To be clear, the above-named organizations stand strongly in favor of requiring that health professionals become licensed in Maryland to practice here. Senate Bill 407 preserves the importance of licensure but recognizes that in times of an emergency, licensure standards may need to be relaxed, if only for a fixed and limited duration. As the omicron variant of the COVID-19 virus laid bare, our health care workforce can be quickly deteriorated by exhaustion, sickness among health care workers, and economics – staffing agencies paying once in a lifetime wages to health care workers and luring them to other jurisdictions.

Having to rely on the Governor to declare a public health emergency under Title 14 of the Public Safety Article has proven somewhat clumsy over the last 2 years. The statute contains a broad, sweeping grant of power, but partly because of that it is limited to 30-day periods, making it difficult for health facilities and practitioners alike to make work-related decisions. Senate Bill 407 creates another tool with proper guardrails that is more efficient and predictable.

MedChi, MDACEP, and MD/DC Society supports the creation of this power but would suggest

that the mechanism for implementing it be simplified. Rather than the prescriptive method contained in the bill, as introduced, made applicable to all boards, the Administration's amendments allow the health occupation boards more discretion in how to expedite licenses. We believe that is the appropriate way to implement this, and we know that the Board of Physicians, for example, did this extremely efficiently.

In the end, full licensure is the only means by which professionals should be permitted to practice in our State. But as we have learned, this principle must be flexible in extreme situations. We think Senate Bill 407 strikes the proper balance in this regard. For these reasons, we support Senate Bill 407 with amendments.

**For more information call:**

J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone  
410-244-7000

**4a - SB 407 - FIN - PHARM - LOI.pdf**

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Position: INFO



# Board of Pharmacy

*Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary*

*Jennifer L. Hardesty, Board President – Deena Speights-Napata, Executive Director*

February 9, 2022

The Honorable Delores G. Kelley  
Chair, Senate Finance Committee  
3 East Miller Senate Office Building  
Annapolis, MD 21401

**RE: Senate Bill 407 – Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022) - Letter of Information**

Dear Chair Kelley and Committee Members:

The Maryland Board of Pharmacy (the Board) is submitting this letter of information for Senate Bill (SB) 407 – Health Occupations – Health Care Staffing Shortage Emergency – Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022).

SB 407 would require the Board to issue an initial license on an expedited basis following a declaration of health care staffing shortage emergency issued by the Secretary of Health. SB 407 would allow an individual to practice pharmacy in a health care facility located in Maryland without first obtaining a license or registration issued by the Board.

The Board would like to inform the Finance Committee (Committee) that the Board does not issue a “temporary health occupation license” or “temporary practice letter.” However, please note that the Board typically processes completed applications within four (4) business days. The Board requires that each licensee and registrant satisfy educational and training requirements prior to providing pharmaceutical services to ensure public health and safety. The requirements for expedited processing included in SB 407 would not significantly reduce the Board’s standard processing time.

The Board would like to inform the Committee that the Board does not have a distinct licensure category for “inactive” or “retired” status.

SB 407 does not clearly indicate whether a practitioner that has allowed their license or registration to expire or “lapse” would be excluded from the definition of a “retired” practitioner. The Board suggests that a practitioner that has a “lapsed” license or registration should apply for reinstatement.

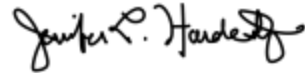
Finally, the Board suggests an amendment that exempts a health occupation board that efficiently processes an applicant’s completed application within an average of five (5) business days from all provisions of SB 407.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact me at [deena.speights-napata@maryland.gov](mailto:deena.speights-napata@maryland.gov) / (410) 764-4753.

Sincerely,

Handwritten signature of Deena Speights-Napata in black ink.

Deena Speights-Napata, MA  
Executive Director

Handwritten signature of Jennifer L. Hardesty in black ink.

Jennifer L. Hardesty,  
PharmD, FASCP  
President

**4c - SB 407 - FIN - AHSM Board - LOI .pdf**

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Position: INFO



# Board of Examiners for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists & Music Therapists

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

*Carolyn Stine, Chair – Oluremi Dean, Executive Director  
4201 Patterson Avenue, Baltimore MD 21215 Phone: 410-764-4725*

February 9, 2022

The Honorable Delores G. Kelley  
Chair, Senate Finance Committee  
3 East, Miller Senate Building  
Annapolis, MD 21401-1991

**RE: SB 407 – Health Occupations – Health Care Staffing Shortage Emergency –  
Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022) –  
Letter of Information**

Dear Chair Kelley and Committee Members:

The Board of Examiners for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists & Music Therapists (the Board) is submitting this letter of information for Senate Bill (SB) 407 – Health Occupations - Health Care Staffing Shortage Emergency - Declaration and Licensing and Practice Requirements (Health Care Heroes Act of 2022).

The Board is committed to providing quality care to our consumers by providing oversight to our licensees. As a result, applications for licensure undergo a thorough review process to verify their credentials to ensure public safety. Typically, completed applications are approved within 3 to 5 business days for full licensure. However, incomplete applications may face delays due to the turnaround time of completed background check reports provided by the Criminal Justice Information System and licensure verifications for those licensed in another state.

SB 407 would require the Board to issue temporary licenses during a health care staffing shortage emergency. However, with a turnaround time of no more than 5 business days, it is unclear if a temporary license would expedite the approval process. It is also unclear what would constitute as a Health Care Staffing Shortage Emergency for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists or Music Therapists since none are considered to be critical occupations.

The Board is in support of expediting the licensure process for critical occupations experiencing a staffing shortage emergency. Specifying the occupations experiencing the health care shortage would help prevent confusion among licensees. It will also ensure that qualified clinicians are providing services to consumers. Therefore, the Board respectfully asks that you consider this information while discussing SB 407.

If you would like to discuss this further, please contact the Board's Executive Director, Ms. Oluremi Dean, MS at [Oluremi.Dean@maryland.gov](mailto:Oluremi.Dean@maryland.gov) or 443-844-7172.

Sincerely,

A handwritten signature in cursive script that reads "Oluremi Dean". The signature is written in a dark ink and is positioned below the word "Sincerely,".

Oluremi Dean, MS  
Executive Director  
State Board of Examiners for Audiologists, Hearing Aid Dispensers,  
Speech-Language Pathologists, and Music Therapists

*The opinion of the Board expressed in this letter of information does not necessarily reflect that of the Department of Health or the Administration.*