

Bill No. SB 439 Committee: Senate Finance Senate
Title: Advanced Practice Registered Nurse Compact
Hearing Date: February 28, 2023 **Position:** Support
Witness: Shirley Devaris, RN, BSAD, MA, JD
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Good afternoon, Madame Chair, Vice Chair, and members of the committee. Thank you, Senator Hayes, for sponsoring this bill.

My name is Shirley Devaris, and I am offering testimony in support of this bill based on my 19 years of experience with regulating nursing practice, first as staff to the former House Environmental Matters Committee, and then as Director of Legislative Affairs for the Board of Nursing before retiring in 2019. I am asking for a favorable vote on this bill.

Maryland was the first state to adopt and implement the Nurse Licensure Compact (NLC) for Registered Nurses and Licensed Practical Nurses. That original compact became a role model for health occupation compacts all over the country. The NLC was adopted by 25 states and then stagnated because other states needed more conditions added such as background checks, rules for discipline, reporting public discipline orders, etc. In 2015 a new revised compact was introduced and quickly became the law of the nursing world in 39 states. Legislation is pending in 11 other states to join the NLC.

This APRN Compact has the same safeguards as in the revised NLC and basically functions in the same way as the NLC. The difference in this revised version of the APRN compact is a requirement that an APRN have 2,060 practice hours before obtaining a compact license. The previous version of the APRN compact that did not get adopted by the required number of states because many states still have barriers to full practice for

APRNs in their statutes. In fact 30 plus states have some kind of barrier to practice. Like the NLC, state nursing regulators felt that the compact did not consider all the regulatory conditions in their states such as the limits on APRN practice, especially a practice hour requirement for new graduates.

It is this practice hour requirement that has understandably been the source of opposition to the compact. In Maryland we fought hard for the independent practice of our APRNs. We know they are qualified to begin practice after they graduate and pass the national certification exam. Not all states do. They are moving in the direction of removing barriers to new practice but about 30 states still have barriers of some kind for new APRN graduates. This bill realistically deals with this issue. We cannot wait for other states to take the same progressive attitude toward Advanced Practice that Maryland has.

Ideally, we would like an APRN Compact without the practice hour requirement but more importantly we need, right now, the ease of portability that the compact provides to allow other compact state nurses to practice in Maryland and allow our APRNs to provide health care across state lines.

Thank you.