Dear Madam Chair and Members of the Finance Committee

My name is Loren Daniels ... I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you oppose SB 359: APRN Compact. I support the concept of a compact. However, this compact is outdated and cannot be amended.

APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare.

These restrictions include:

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.

In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation failed to pass in every state. Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.

Respectfully.

Signature: Voun & Daniels CMP

Printed Name and Credentials: Karen J Daniels CMP

Address: 2801 2nd Street Balt rud 21219

Email: Karen. daniels
Phone: 443 858-5987

Dear Madam Chair and Members of the Finance Committee
My name is I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you oppose SB 359: APRN Compact. I support the concept of a compact. However, this compact is outdated and cannot be amended.
APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare. These restrictions include:
Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.
Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.
Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.
In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u> . Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.
Respectfully,
Signature: January Signature: Joule Com Address: SIA Deerhorn Ct. Millersulle M.D. 21108
Address: 517 Deerhorn CT, Millersylle MD 21108 Email: joice. grancomm.edy Phone: 410-245-8812

Dear Madam Chair and Members of the Finance Committee
My name is Renee La Ving. I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you oppose SB 359: APRN Compact. I support the concept of a compact. However, this compact is outdated and cannot be amended.
APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare. These restrictions include:
Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.
Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.
Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.
In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u> . Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.
Respectfully,
Signature: / / / / / / / / / / / / / / / / / / /
Printed Name and Credentials: Renze Kellin, RN MS LRNP
Address: 13 Clay Lodge Lane 301
Address: 13 Clay Lodg. Lane 301 Email: renee. Kelling @ umm. edu Phone: L110-328-8166 (urvk) L110-935-0465 (home)

Dear Madam Chair and Members of the Finance Committee

amended.

the workforce.

These restrictions include:

My name is Willicht Edgil. I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you oppose SB 359: APRN Compact. I support the concept of a compact. However, this compact is outdated and cannot be

APRNs have full practice authority in Maryland. This bill imposes restrictions on

practice that are not consistent with Maryland standards or national trends in healthcare.

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and

providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.
In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u> . Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.
Respectfully,
Signature) Mulliculut Edduc Printed Name and Credentials:

Email: NPED GAR OME, COM Phone: 240-398-94/16

Dear Madam Chair and Members of the Finance Committee

My name is Kelley A Bennett. I am an Advanced Practice Registered Nurse in Maryland with 20 years experience. I am writing to ask that you **OPPOSE SB 359: APRN Compact**. I support the concept of a compact, but not in it's current form. This compact is outdated and cannot be amended.

As an APRN, I have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare.

These restrictions include:

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the American Bar Association not being made up of lawyers.

In 22 years, the National Council of State Boards of Nursing (NCSBN) has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u>. Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.

Respectfully,

Kelley A Bennett, MSN, FNP-BC

110 Canfield Hill Drive Gaithersburg, MD 20878

KelleyBennettNP@yahoo.com

301-776-6656

Dear Madam Chair and Members of the Finance Committee

Respectfully,

My name is Stephanie Streb. I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you **oppose SB 359: APRN Compact**. I support the concept of a compact. However, this compact is outdated and cannot be amended.

APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare. These restrictions include:

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.

In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u>. Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.

Signature:

Printed Name and Credentials: Stephanie Streb DIVP, MMS, PMMNP-BC

Address: 1705 Linden Ave Baltimore IMP 21217

Email: Stephanie. Streb @Phone: 202 997 0054

Umanyland. Edu

_	- 1	α 1 · 1	3 6 1	0.1	• •	•
Lloor N	/ladam	('hoir and	Mambara	of the L	inonoa	'ammittaa
Deal IV	Tauaiii	Chan anu	MICHIDEIS	OI LIIC I	illance C	committee

My name is _Digna Cespedes-Cloud___. I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you **oppose SB 359: APRN Compact**. I support the concept of a compact. However, this compact is outdated and cannot be amended.

APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare. These restrictions include:

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.

In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation *failed to pass in every state*. Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.

Respectfully,	
Signature: Digna Cespedes-Cloud	
Printed Name and Credentials: _Digna C-Cloud, CRNP, PMHNP	
Address: 5320 Wabash Ave. Baltimore, 21215	
Email:_dignacloud@yahoo.com	

amended.

Dear Madam Chair and Members of the Finance Committee

My name is krishn M. Clem and am an Advanced Practice Registered

Nurse in Maryland. I am writing to ask that you oppose SB 359: APRN Compact. I

support the concept of a compact. However, this compact is outdated and cannot be

APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare. These restrictions include:
Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.
Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.
Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.
In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u> . Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.
Respectfully, Signature: Alustration of Clements DNP PMHTABLE MISH Printed Name and Credentials: Knistrat M. Clements DNP PMHTABLE MISH Address: BOO S. Friederick Mrs. Step Deoth, 202 Gaethershurg Email: KNIShni a RILHT SOLUTIONS MENTRE MORTHER MORTHER MORTHER DOS 4/129 Email: KNIShni a RILHT SOLUTIONS MENTRE MORTHER DOS 4/129

Dear Madam Chair and Members of the Finance Committee

My name is An'Nita C. Moore-Hebron. I am an Advanced Practice Registered Nurse in Maryland. I am writing to ask that you **oppose SB 359: APRN Compact**. I support the concept of a compact. However, this compact is outdated and cannot be amended.

APRNs have full practice authority in Maryland. This bill imposes restrictions on practice that are not consistent with Maryland standards or national trends in healthcare.

These restrictions include:

Practice hour requirement: This bill requires 2080 practice hours before an APRN is eligible for a compact license. This results in a delay in ability to practice and restricts the workforce.

Prescription of controlled substances: The APRN compact does not standardize prescriptive authority across state lines. APRN's would face barriers to prescribing and providing care when our patients are not physically in Maryland.

Lack of APRN oversight: There is no requirement that APRNs participate in regulation of the compact. This would be like the bar association not being made up of lawyers.

In 22 years, the NCSBN has failed to enact an APRN compact. Last year, multiple states introduced the APRN compact and the legislation <u>failed to pass in every state</u>. Please consider my concerns as a practicing APRN. I request an unfavorable report on SB 359.

Respectfully,

Signature:

Printed Name and Credentials: An'Nita Moore-Hebron DrNP, MPH, FNP-BC, PMHNP-

BC, CNE

Address: 9622 Mendoza Road Randallstown MD

Email: Chaunette27@gmail.com

Phone: 410-419-1525