

Children's National Testimony - SB 72 - Simmy King

Uploaded by: Austin Morris

Position: FAV



111 Michigan Ave NW
Washington, DC 20010-2916
ChildrensNational.org

**Testimony of Simmy King DNP, MS, MBA, NI-BC, NE-BC, CHSE, FAAN
Chief Nursing Informatics and Education Officer
Children's National Hospital**

**Senate Bill 72: Health Occupations Boards - English Proficiency Requirements and Licensure by
Endorsement for Nursing
Position: FAVORABLE
January 28, 2025
Senate Finance Committee**

Chair Beidle, Vice Chair Hayes and members of the committee, thank you for the opportunity to provide written testimony in support of Senate Bill 72. My name is Simmy King, and I am the Chief Nursing Informatics and Education Officer at Children's National Hospital. Children's National has been serving the nation's children since 1870. Nearly 60% of our patients are residents of Maryland, and we maintain a network of community-based pediatric practices, surgery centers and regional outpatient centers in Maryland.

I am pleased to express my strong support for Senate Bill 72, which addresses the English proficiency requirements and licensure by endorsement for health occupations, particularly nursing. I believe in this legislation as both an advocate for equitable access to professional licensure as well as an individual who has experienced similar educational and professional challenges. Years ago, I was asked to take an English Proficiency test for a doctoral program because my country of origin was India. Despite having two Master's degrees from US schools and having practiced in the US for over eight years, I was asked to take the Test of English as a Foreign Language (TOEFL), which I had already taken when I received my green card and when I went through the Commission on Graduates of Foreign Nursing Schools (CGFNS) visa screen – a process that requires evidence of English-language competency for both spoken and written English. I believe that this bill is a crucial step forward in enabling qualified professionals to serve our communities without unnecessary barriers – barriers that myself and so many others have faced and continue to face.

Senate Bill 72 aims to streamline the licensure process for health professionals who have already demonstrated their English proficiency and competence in other states. This bill promotes fairness and efficiency by preventing health occupation boards from requiring additional evidence of English proficiency from applicants holding valid, unrestricted licenses

from states with comparable requirements. It acknowledges other states' rigorous standards and eliminates redundant testing that can delay workforce entry.

Furthermore, the bill mandates that health occupation boards maintain a list of states whose English proficiency requirements align with Maryland's standards. This transparency will assist applicants in navigating the licensure process more swiftly and confidently, knowing which credentials are recognized. Including acceptable proofs of English proficiency, such as passing an English proficiency exam approved by the U.S. Department of Health and Human Services or holding a valid multistate license under the Nurse Licensure Compact, exemplifies the bill's commitment to recognizing diverse pathways to demonstrating language competency. Additionally, Senate Bill 72 underscores the importance of practical experience by exempting applicants who have practiced nursing for at least five years in another state from additional English proficiency testing. This provision ensures that experienced professionals can contribute to our healthcare system without unnecessary delays.

Senate Bill 72 is thoughtful and necessary legislation that will benefit healthcare professionals and the communities that they serve. This bill supports efficient and equitable licensure of health professionals in Maryland by reducing redundant requirements, promoting transparency, and recognizing diverse qualifications. In an effort to help us move toward a more inclusive and efficient healthcare system, I respectfully request a favorable report on Senate Bill 72. Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink that reads "Simmy King". The signature is written in a cursive, flowing style.

Simmy King DNP, MS, MBA, NI-BC, NE-BC, CHSE, FAAN
Chief Nursing Informatics and Education Officer
Assistant Professor of Pediatrics, The George Washington University School of Medicine and Health Sciences
Simmy.King@childrensnational.org | 202.476.4151 - Office

For more information, please contact:

Austin Morris, Government Affairs Manager
almorris@childrensnational.org

Case Examples.pdf

Uploaded by: Clarence Lam

Position: FAV

International Trained Nurses Case Examples

Case 1

This person moved to MD from VA. He was unable to complete the process of endorsing his license. He was asked to re-provide CGFNS paperwork. When CGFNS informed him that he would need to reprocess all his documents from his home country, he chose to move back to VA.

Case 2

A nurse who was licensed in VA and had been practicing as an RN in VA since 2012 relocated to MD after purchasing a house. When she applied for MBON endorsement, she was asked to take an English exam, such as TOEFL or IELTS. It took months to get this processed and her license endorsed. This nurse attended a nursing school that teaches in English and had never had an issue practicing nursing in an adjacent compact state.

Case 3

A nurse who was licensed in VA and had been practicing as an RN in VA since 2012 relocated to MD during the COVID-19 pandemic in 2022. She was then informed that she needed to obtain an RN license in her state of residence. When she applied for MBON, she was asked to submit the CGFNS certification from 10 years ago. She submitted a copy of the certificate, and her endorsement was completed without issue.

Case 4

This nurse, also licensed in VA and practicing as an RN for almost 5 years, relocated to MD during the COVID-19 pandemic in 2023. When she applied for MBON, she was asked to submit the CGFNS certification from years ago. She submitted a copy of the certificate, but her endorsement was declined. She was told she must submit the original certificate from CGFNS.

SB 72 Health Occupations Boards - English Proficie

Uploaded by: Jane Krienke

Position: FAV



Maryland
Hospital Association

**Senate Bill 72-
Health Occupations Boards - English Proficiency Requirements and Licensure by
Endorsement for Nursing**

Position: *Support*
January 28, 2025
Senate Finance Committee

MHA Position

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 72.

Registered nurses, licensed practical nurses, and nursing assistants make up 42% of Maryland's hospital workforce. The latest hospital data from Q3 2024 show licensed practical nurses, nursing assistants, and registered nurses have high vacancy rates—28%, 17%, and 15%, respectively. These vacancies mean fewer caregivers at the bedside, limiting capacity to care for patients. Removing barriers for internationally educated health care providers who already have experience working in other states will increase the number of experienced health care workers in Maryland and can help with retention by reducing the high vacancies.

SB 72 ensures licensed health care workers coming from other states can apply for a license to practice in Maryland without having to take an English proficiency test. This legislation will make Maryland more competitive by removing a significant barrier for internationally educated health care workers.

Maryland hospitals continue to hire internationally educated nurses. These nurses are experienced and bring diversity through language, culture, and experience to our health care workforce. In 2023, the General Assembly passed Senate Bill 187/House Bill 454, which removed the social security number requirement when applying for a health occupations license. This change allowed internationally educated nurses to obtain their initial U.S. registered nurse license in Maryland instead of another state. Not only did this help lower expenses incurred by these nurses, but it also helped decrease the amount of time they spend waiting to deliver care at the bedside.

SB 72 builds on positive changes from SB 187/HB 454 by removing barriers that prevent qualified health care workers from coming to practice in Maryland.

For these reasons, we request a favorable report on SB 72.

For more information, please contact:
Jane Krienke, Director, Government Affairs & Policy
Jkrienke@mhaonline.org

SB72 Testimony.pdf

Uploaded by: Madelin Martinez

Position: FAV

Senate Bill 72
Health Occupations Boards - English Proficiency Requirements and Licensure by
Endorsement for Nursing

Finance
January 28, 2025
Support

Catholic Charities of Baltimore supports SB72, which prohibits health occupation boards from requiring additional English proficiency evidence if an applicant already holds a valid license from another state with an English requirement. It also expands acceptable proof of English competency for nurses, including federal exams and multistate licenses. This streamlines the licensure process and helps ensure qualified nurses can enter the workforce more quickly.

For a century, Catholic Charities has provided care and services to improve the lives of Marylanders in need. We accompany Marylanders as they age with dignity, support their pursuit of employment and career advancement, heal from trauma and addiction, achieve economic independence, prepare for educational success, and welcome immigrant neighbors into Maryland communities. As Maryland's second largest human service provider, we are deeply committed to helping those who need it most.

In line with this commitment, we support SB72 for two key reasons:

First, it will help reduce the shortage of multilingual nurses in Maryland, which is especially critical in our diverse communities where non-English speaking patients are often underserved. By allowing nurses with valid licenses from other states to more easily practice here, this bill helps increase the number of qualified professionals who can meet the needs of these populations.

Second, this bill supports and increases employment opportunities for Marylanders. Access to steady employment enables individuals to support themselves and their families. At Catholic Charities, we offer job training programs that connect skilled workers to employers who need their help. Our programs, such as the Christopher's Place Employment Academy, My Brother's Keeper, and Compassionate Caregiver, focus on empowering individuals with the skills and support they need to build sustainable careers. These programs are dedicated to helping un- or underemployed Marylanders, including those entering the nursing field, and fostering career growth across a wide range of industries.

For these reasons, Catholic Charities of Baltimore respectfully urges the committee to issue a favorable report on Senate Bill 72.

Submitted By: Madelin Martinez, Assistant Director of Advocacy

SB 72 - MDH - FIN - LOS .docx.pdf

Uploaded by: Meghan Lynch

Position: FAV



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

January 28, 2025

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

RE: Senate Bill (SB) 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing - Letter of Support

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter in support of Senate Bill (SB) 72. This bill will prohibit a health occupations board in Maryland from requesting English proficiency evidence as a condition of licensure, certification, or registration from applicants duly licensed, certified, or registered in another state that requires evidence of proficiency as a condition of licensure, certification, or registration. SB 72 also requires health occupations boards to list on their websites other states with an English proficiency requirement that meets their requirements.

The Department views a request for additional English proficiency evidence from an applicant who has already established proficiency in a reciprocal state as unduly burdensome with the potential to chill out-of-state applicants' pursuit of licensure. Additionally, qualified applicants may view the requirement as punitive in nature creating further barriers to pursuing licensure. Instead, allowing out-of-state practitioners to obtain licensure in Maryland has the potential to expand access to linguistically consistent care for patients with limited English proficiency.¹

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs, at sarah.case-herron@maryland.gov.

Sincerely,

Laura Herrera Scott, MD, MPH
Secretary

¹ Ann M Nyugen and Magda Schaler-Haynes, *Can Interstate Licensure Compacts Enhance the Health Care Workforce?*, The Milbank Quarterly, April 11, 2023
<https://www.milbank.org/2023/04/can-interstate-licensure-compacts-enhance-the-health-care-workforce/#:~:text=Standardized%20data%20indicating%20specialty%20by,to%20meet%20demand%20over%20time.>

2025 MASBHC SB 72 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance

Bill Number: Senate Bill 72 – Health Occupation Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing

Hearing Date: January 28, 2025

Position: Support

The Maryland Assembly on School-Based Health Care (MASBHC) supports *Senate Bill 71 – Health Occupation Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing*. The bill supports Maryland’s efforts to address the nursing shortage including:

- Streamlining the licensure process for qualified nurses with unencumbered out-of-state licenses. For nurses who are already licensed in a Compact state, the bill would remove unnecessary paperwork and administrative burdens for licensure in Maryland; and
- Providing more flexible options for nurses to demonstrate English proficiency.

MASBHC is concerned about the impact of the nursing shortage of school-based health centers (SBHCs) and school health programs. The nursing shortage impacts the ability of SBHCs and school health programs to meet the needs of their students. A growing number of students have chronic diseases, as demonstrated by a finding of the Center for Disease Control and Prevention that 25% of children between the ages 2 and 8 have a chronic condition such as asthma or obesity.ⁱ We support legislation that will help Maryland recruit and retain more people into nursing.

We ask for a favorable report on this legislation. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

ⁱ https://www.cdc.gov/healthyschools/chronic_conditions/pdfs/2017_02_15-how-schools-can-students-with-chc_final_508.pdf

2025 MASHN SB 72 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV

Maryland Association of School Health Nurses



Bill: Senate Bill 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing

Committee: Senate Finance

Hearing Date: January 28, 2025

Position: Support

The Maryland Association of School Health Nurses (MASHN) support *SB 72 – Health Occupation Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing*. The bill will streamline the licensure of nursing applicants by: 1) Providing more options for applicants to demonstrate English proficiency; and 2) Removing barriers for nurses with unencumbered licenses from compact states in obtaining Maryland licensure.

MASHN supports this legislation because it will attract qualified nurses to practice in Maryland. We continue to face a challenging nursing shortage in Maryland. The shortage has severe consequences for students in our school system. We do not have a nurse in every school. Instead, school nurses are stretched across several schools, making it challenging to meet the chronic and urgent health needs of students.

Maryland needs to take every reasonable step available to increase the number of qualified nurses. We ask for a favorable vote. If we can provide any information, please contact Robyn Elliott at relliott@policypartners.net.

2025 MCHS SB 72 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Maryland Community Health System

Bill: Senate Bill 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing

Committee: Senate Finance

Hearing Date: January 28, 2025

Position: Support

The Maryland Community Health System (MCHS) supports *Senate Bill 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing*.

Maryland Community Health System is a network of federally qualified health centers (FQHCs) that provide primary care, behavioral, and dental services to underserved communities. Our mission has been hampered by the ongoing shortage of nurses, which is not expected to abate.ⁱ This legislation offers a strategy to allow Maryland to better utilize the nursing workforce in other states. The legislation streamlines the licensure process for nurses by:

- **Endorsement for Nurses from Compact States:** While the compact allows nurses from compact states to practice over state lines in Maryland, nurses must still get a Maryland license if they move to Maryland. Under the bill, the licensure process for nurses from compact would be streamlined. The out-of-state nurse would not have to submit cumbersome paperwork on their educational background.
- **More options to demonstrate English Proficiency:** Maryland law currently provides very limited options for nurses to prove their English proficiency. The bill expand options for demonstrating English proficiency.

We request a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

ⁱ <https://mhaonline.org/wp-content/uploads/2024/05/Maryland-Nurse-Workforce-Projections-GlobalData.pdf>

SB 72 - MBON - FIN - LOS.pdf

Uploaded by: State of Maryland (MD)

Position: FAV



Board of Nursing

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

January 28th, 2025

The Honorable Pamela Beidle
Chair, Finance Committee
Room 3
Senate Office Building
Annapolis, MD 21401

RE: SB0072 – Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing

Dear Chair Beidle and Committee Members:

The Maryland Board of Nursing (the Board) respectfully submits this letter of support for SB0072 Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing.

As part of the State's effort to improve healthcare access and the workforce shortage, the Board has been diligently working to increase the number of qualified nurses in the State while maintaining our high standards of practice that keep Maryland patients safe and healthy. The Board has supported a number of initiatives that would expedite the licensure process for foreign educated nurses looking to work in the State, such as collaborating with the Welcome Back Center of Suburban Maryland and the Commission on Graduates of Foreign Nursing Schools (CGFNS) to add additional English language proficiency (ELP) exam options. As a result of these partnerships, three additional ELP exams were adopted by the Board in 2024, those exams being the Michigan English Test (MET), Pearson Test of English (PTE), and Occupational English Test (OET). SB0072 continues this expansion by establishing additional ELP exam options that applicants may use to meet minimum qualifications for licensure. In addition, the bill provides that holding a valid, unencumbered multistate license under the Nurse Licensure Compact shall constitute sufficient proof of proficiency in the communication of the English language.

Additionally, this session, the Board, in collaboration with MDH, has introduced a Departmental, which adds an alternative path to licensure for endorsement applicants, specifically by permitting certain applicants to show evidence of additional educational credentials, beyond the individual's basic nursing education credential, in order to meet the minimum educational requirements for licensure by endorsement. SB0072 further expands the available pathways to licensure by endorsement by permitting individuals that hold a valid, unencumbered multistate license under the Nurse Licensure Compact to obtain licensure by endorsement in Maryland without the need to reproduce evidence of the applicant's nursing education.

Both bills allow more nurses to begin work in the State without delay, improving healthcare accessibility in underserved areas, particularly those bordering other states like Western Maryland and the Eastern Shore. By streamlining the process, the bill encourages a more diverse healthcare workforce and increases service availability in communities with critical needs.

Thank you again for your time. Again, we would like to encourage the committee to give a favorable report for SB0072. For more information, please contact Ms. Mitzi Fishman, Director of Legislative Affairs, at 410-585-2049 or mitzi.fishman@maryland.gov, or Ms. Rhonda Scott, Executive Director, at 410-585-1953 or rhonda.scott2@maryland.gov.

Sincerely,

A handwritten signature in blue ink that reads "Christine Lechliter". The signature is written in a cursive, flowing style.

Christine Lechliter
Board President

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

SB72 MNA FAV 1.24.25.pdf

Uploaded by: William Kress

Position: FAV



Committee: Senate Finance Committee
Bill Number: SB 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing
Hearing Date: January 28, 2025
Position: Favorable

The Maryland Nurses Association support *Senate Bill 72 - Health Occupations Boards – English Proficiency Requirements and Licensure*. SB 72 aims to streamline the English proficiency requirements for health occupations boards in Maryland.¹

SB 72 makes the following modification to the Nurse Practice Act:

- 1) Prohibits health occupational boards from demanding additional evidence of English proficiency if an applicant already holds a valid, unrestricted license from another state with similar requirements; passed an English proficiency exam approved by the U.S. Department of Health and Human Services; **or** the applicant holds a valid, unencumbered multistate license under the nurse licensure compact;
- 2) Requires that each health occupations board maintain a list of states with acceptable English proficiency standards on their websites; and;
- 3) Modifies licensure by endorsement (licensure without examination) in the following manner. If an applicant holds a valid multistate license under the Nurse Licensure Compact, an applicant will not be required to provide evidence that 1) at the time of graduation from a nursing education program in another state or country, the

¹ Maryland currently requires the following scores from the English Proficiency Exams:

- TOEFL iBT: Listening — 21; Reading — 19; Speaking — 26; Writing — 19; Overall score of at least 84
- IELTS: Listening – 6; Speaking — 6; Reading – 6; Overall score of at least 6.5
- MET: Listening — 53; Reading — 53; Speaking — 53; Writing — 53;
- PTE: Listening — 50; Reading — 50; Speaking — 50; Writing — Overall score of at least 55
- OET: Listening — 300; Reading — 300; Speaking — 300; Writing — 300

applicant met the educational qualifications required by Maryland law, and 2) at the time of licensure or registration in the other state or country, the applicant passed an examination similar to the one given in Maryland

As stated previously, SB 72 would allow for English proficiency examinations accepted by other states or the federal government to provide evidence of English proficiency in Maryland. Upon review of the requirements required by other states and the federal government, MNA believes that the waiver of an additional exam is appropriate and in the best interest of Marylanders by expediated the licensure process without lowering the appropriate standards set by Maryland Board of Nursing (“MBON”).

Furthermore, the modification of the requirements for licensure by endorsement also provides for more efficient licensure without jeopardizing the appropriate standards set by the MBON. If the applicant has proven the educational requirements and passed the appropriate examination thereby obtaining a state license and a multistate license from a foreign jurisdiction, the applicant should not be required to provide the proof again to Maryland.

SB 72 will streamline the licensure process in Maryland. These changes will help ensure that qualified nurses can continue to provide essential care to our communities without unnecessary delays. SB 72 is a vital piece of legislation that will help address the growing demand for healthcare professionals in Maryland. By removing redundant requirements and promoting a more efficient licensure process, we can better serve our communities and improve access to quality healthcare.

If you have any questions, please contact the MNA lobbyist, William Kress, Esquire at bill@kresshammen.com.

SB 72 - BOP - FIN - LOSWA.pdf

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

Position: FWA



Board of Physicians

Wes Moore, Governor · Aruna Miller, Lt. Governor · Harbhajan Ajrawat, M.D., Chair

2025 SESSION POSITION PAPER

BILL NO.: SB 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing
COMMITTEE: Finance
POSITION: Letter of Support with Amendments

POSITION & RATIONALE:

The Maryland Board of Physicians (the Board) is respectfully submitting this letter of support with amendments for Senate Bill (SB) 72 - Health Occupations Boards - English Proficiency Requirements and Licensure by Endorsement for Nursing. SB 72 would establish that health occupation boards maintain a comprehensive list of other states' English proficiency guidelines that meet the Board's English proficiency requirement on the Board's website.

While the Board supports establishing clear English proficiency guidelines, we believe determining which states have equivalent requirements and maintaining a comprehensive list of other states' English proficiency guidelines on the Board's website would present significant challenges. Furthermore, applicants licensed through reciprocity, endorsement, or the interstate compact are not currently required to demonstrate English language proficiency to the Board.

The Board has experienced difficulty determining the equivalency of other States' requirements with licensure by endorsement. To determine equivalency, when an applicant applies for licensure from any state, the Board must determine the month and year the license was issued and what requirements were in place at that time in the other jurisdiction. For example, determining whether Idaho required English-language proficiency for physicians in 1980 would require the Board to track down the Idaho statute and regulations in effect in 1980 and then compare them to the Board's statutes.

It is important to note that each applicant's initial licensure date differs. The Board would then need to conduct research to determine the applicable requirements at the *time of the applicant's initial licensure*. This presents the challenge of researching other state legislation that was in effect for a certain month and year. Accessing historical or repealed statutes from other states is not only extremely time-consuming and difficult, but unattainable in many instances because the information is not always accessible to the public or available online.

This raises questions regarding the expected timeframe for maintaining the list on the Board's website. Each state has its own legislative session. Given the individualized timing of legislative sessions in other states, and the frequent amendments to other state statutes and regulations, would

an annual update be necessary?

The Board also licenses 14 allied health practitioner types, in addition to physicians. Considering the requirement to maintain a list of English proficiency requirements for each state and each profession, the total number of entries on the Board's website could exceed 700. This estimate does not account for the previously mentioned need to specify each year during which each state's English proficiency requirements were in effect.

Because of the time, research, and detail needed, the Board would need to hire a part-time Health Policy Analyst Associate to research each state's law on the timeframe constraints implemented by this bill and update the Board's website. Therefore, the Board is recommending the amendment on the following page.

The Board is committed to working collaboratively with Senator Lam and other stakeholders to ensure the effective implementation of English proficiency requirements for all healthcare practitioners in Maryland.

Thank you for your consideration. For more information, please contact Oriell Harris, Health Policy Analyst Associate, OriellT.Harris@maryland.gov.

Sincerely,

A handwritten signature in cursive script that reads "Singh Ajrawat".

Harbhajan Ajrawat, M.D.
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.

SB 72 - Suggested Amendments

AMENDMENT TO SENATE BILL 72 (First Reading File Bill)

On page 2 in lines 3-9 strike “IF A HEALTH OCCUPATIONS BOARD REQUIRES EVIDENCE OF ENGLISH PROFICIENCY AS A CONDITION FOR LICENSURE, CERTIFICATION, OR REGISTRATION, THE HEALTH OCCUPATIONS BOARD MAY NOT REQUIRE AN APPLICANT WHO HOLDS A VALID, UNRESTRICTED LICENSE, CERTIFICATION, OR 6 REGISTRATION FROM ANOTHER STATE THAT REQUIRES EVIDENCE OF ENGLISH PROFICIENCY FOR LICENSURE, CERTIFICATION, OR REGISTRATION TO PROVIDE ADDITIONAL EVIDENCE OF ENGLISH PROFICIENCY”.

On page 2 in line 10 strike “EACH” and substitute “A”.

On page 2 in lines 10 - 14 strike “REQUIRES EVIDENCE OF ENGLISH PROFICIENCY AS A CONDITION FOR LICENSURE, CERTIFICATION, OR REGISTRATION SHALL MAINTAIN ON ITS WEBSITE A LIST OF OTHER STATES THAT HAVE AN ENGLISH PROFICIENCY REQUIREMENT THAT MEETS THE HEALTH OCCUPATION BOARD’S ENGLISH PROFICIENCY REQUIREMENT” and substitute “OFFERS LICENSURE BY ENDORSEMENT, LICENSURE BY RECIPROCITY, OR PARTICIPATES IN A MULTISTATE COMPACT MAY NOT REQUIRE AN APPLICANT FOR LICENSURE THROUGH THESE PATHWAYS TO SUBMIT EVIDENCE OF ENGLISH LANGUAGE PROFICIENCY AS PART OF THE LICENSURE PROCESS”.

SB 72 - BoPharm LOSWA.pdf

Uploaded by: Maryland State of

Position: FWA



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

**2025 SESSION
MARYLAND BOARD OF PHARMACY
POSITION PAPER**

BILL NO: SB72 – Health Occupations Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing

COMMITTEE: Health and Government Operations Committee
POSITION: Support with Amendment

TITLE: Health Occupations Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing

BILL ANALYSIS: SB 72 will prohibit health occupations boards from requiring additional evidence of English proficiency as a condition for licensure, certification, or registration if an applicant holds a valid, unrestricted license, certification, or registration from another state with the same requirements.

Additionally, the Board of Nursing, along with the health occupations boards, to maintain a list of States that meet English proficiency requirements.

POSITION AND RATIONALE:

The Board of Pharmacy (the “Board”) would be required to daily monitor English proficiency requirements across the country and in turn update the website accordingly. The process of complying with the legislation is not feasible for the Board as it would require additional staff and training. The Board believes that the costs associated with maintaining this information and the training required for staff, would escalate and is not currently in the Board’s budget to adequately maintain.

It is for these reason that the Board support Senate Bill 72 with the following amendment:

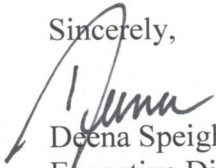
AMENDMENT TO SENATE BILL 72

Page 2 – Line 12, strike “**A LIST OF OTHER STATES THAT HAVE AN ENGLISH PROFICIENCY REQUIREMENT THAT MEETS THE HEALTH OCCUPATION BOARD’S ENGLISH PROFICIENCY REQUIREMENT**” and substitute “**A LIST OF OTHER STATES THAT DO NOT HAVE AN ENGLISH PROFICIENCY REQUIREMENT THAT MEETS THE HEALTH OCCUPATIONS BOARD’S ENGLISH PROFICIENCY REQUIREMENT.**”

The Board fully supports efforts to streamline the licensing process and it is for these reasons that the Board respectfully request a favorable report on SB 72 with the proposed amendment.

For more information, please contact Julie Gaskins, Legislative Liaison, at 410-764-4709 or julie.gaskins2@maryland.gov, or Deena Speights-Napata, MA, Executive Director, Maryland Board of Pharmacy (410) 764-4753.

Sincerely,



Deena Speights-Napata, M.A.
Executive Director

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

SB 72 - Acupuncture and Chiropractic Boards - Join

Uploaded by: State of Maryland

Position: FWA



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

Board of Acupuncture
Board of Chiropractic Examiners
Metro Executive Plaza
4201 Patterson Avenue, Third Floor
Baltimore, Maryland 21215

2025 SESSION POSITION PAPER

BILL NO: SB 72
COMMITTEE: Finance
POSITION: Support with Amendment

TITLE: Health Occupations Boards – English Proficiency Requirements and Licensure by Endorsement for Nursing

BILL ANALYSIS:

The bill prohibits a health occupations board from requiring additional evidence of English proficiency as a condition for licensure, certification, or registration when an applicant has satisfactorily met the same standard to become credentialed in another State, continued to be in good standing in that State, and can provide documentation of such.

The bill further requires that the Board of Nursing, and generally the health occupation boards, make available on their websites a list of States that meet English proficiency requirements as well as the types of acceptable documentation to fulfill this requirement.

POSITION AND RATIONALE:

For the reasons set forth fully in this position paper, the State Acupuncture Board and State Board of Chiropractic Examiners (the “Boards”) support Senate Bill 72 with the following amendment:

Amendment 1

Page 2, strike lines 10-14.

The Boards, like the Board of Nursing, have experience serving foreign nationals, guiding them through the credentialing process, and providing multiple options for meeting the English proficiency requirement when necessary. For example, the State Acupuncture Board accepts: (1) a passing test score on the TOEFL within two years preceding licensure; (2) 60-credits from a

higher education institution where English is the primary language (with action being taken at present to reduce this to 30-credits); and (3) passing test scores from the National Certification Commission on Acupuncture and Oriental Medicine (NCCAOM) when the Diplomate exams are administered in English. The Board of Chiropractic Examiners does not have an English proficiency requirement for Chiropractors; however, COMAR 10.43.07.02.A(4) requires chiropractic assistants to “[b]e proficient in the English language sufficiently to allow for clear interaction with patients.”

The Boards supporting this bill, with a requested amendment, are two examples of requirements with differing approaches. The commonality is that this credentialing requirement is the least difficult to meet for the overwhelming majority of our licensees and therefore it is not a barrier to obtaining Maryland practice credentials. Additionally, the Boards are offering the above-referenced amendment because requiring the health occupations boards to display English proficiency licensing requirements of other State regulatory agencies on our websites creates risk. First, there is an implied expectation of accuracy. This expectation is unrealistic because the Boards cannot control, nor can they sufficiently monitor the licensing requirements of up to 50 states. Because statutes and regulations can change, the Boards believe the potential for inaccuracy is high. Furthermore, it makes the Boards possibly responsible for interpreting the statutes and regulations of those entities. The Boards should not be responsible for providing legal advice interpreting other states’ laws and determining whether they comply with Maryland rules related to English proficiency.

It is for these reasons that the Boards respectfully request a favorable vote on SB 72 with amendment.

For more information, please contact Tiffany L. Smith Williams, Executive Director for the Board of Acupuncture at (410)764-5925 or tiffany.smith-williams@maryland.gov; Sharon J. Oliver, Executive Director of the Board of Chiropractic Examiners at 410-764-5985 or sharon.oliver@maryland.gov; or Lillian Reese, the Legislative Liaison for the boards at 443-794-4757 or at lillian.reese@maryland.gov.

The opinion of the Boards expressed in this document do not necessarily reflect that of the Department of Health or the Administration.

2025 SB72 Opp Health Occupations Boards English Pr

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Opposition Statement SB72

Health Occupations Boards – English Proficiency Requirements and Licensure

By Endorsement for Nursing

Deborah Brocato, Legislative Consultant

Maryland Right to Life

On behalf of our over 200,000 followers, Maryland Right to Life strongly opposes SB72.

Maryland Right to Life opposes the State interfering in the independent operations of the State Boards for healthcare professionals. In this case, the State seeks to remove English proficiency requirements for health care practitioners. Marylanders should be able to trust that their health care needs are in the hands of the professionals with the best possible educational standards that would include the ability to listen and understand the patient and the ability to communicate effectively with the patient. The United States of America is primarily an English speaking country, and patients should expect the ability to communicate in English with health care professionals. Translators are provided for the patients who do not speak English. English competency is necessary to effectively communicate to the patient about their health status and any conditions that exist along with treatments, procedures, and medications. Language barriers could lead to adverse outcomes for the patient. This is yet another way the Maryland General Assembly is lowering standards of care. Ineffective communication impairs informed consent and threatens the lives of all patients in the health care system.

We oppose any bill that lowers the standards of practice for any health care provider or occupation. Scarcity of health care professionals is not a reasonable excuse to lower standards of practice and/or remove English competency. This bill extends the interference of the State in the operations of medical boards to license their members and monitor their delivery of health care services. Standards vary from state to state, and the comparison of competency tests is subjective. Maryland needs to maintain its own competency standards and allow each medical board to set their competency standards. The lives of patients are at stake if there is miscommunication or an omission of information between the health care professional and the patient. Health Occupations Boards need to have the independence to evaluate their healthcare professionals based on science and best medical practices for the client and not based on profits or an ideological agenda.

Maryland Health Occupations Boards need to retain their own English competency evaluations for the health and safety of Maryland lives. When it comes to health care, English competency for the health care professional is a matter of life and death. **Maryland Right to Life asks for an unfavorable report on SB72.**



SB72
2025