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House Health Committee
6 Bladen Street
House Office Building
Annapolis, Maryland 21401

Dear Members of the House Health Committee,,

My name is Daniel Pistone, and I am a Maryland resident, a parent of three children who attend Maryland public schools, and a Certified Anesthesiologist Assistant (CAA) with over fifteen years of experience practicing in Washington, DC. I am writing to urge your support for Senate Bill 951/House Bill 1558—State Board of Physicians—Anesthesiologist Assistants—Licensing. This legislation is deeply personal to me, as it would finally allow me, and many colleagues like me, to practice our profession in the state we call home and serve Maryland patients directly.

Every time I speak with my Maryland neighbors, I am asked if I work at our local hospital. It is disappointing to explain that, despite my qualifications, I am unable to practice in Maryland due to current licensing restrictions. Instead, I commute daily to Washington, DC, which takes me away from my family and my community. As a parent, I want my three children to see that Maryland values highly trained healthcare professionals and supports those who wish to give back to their communities.

Throughout my career, I have worked closely with physician anesthesiologists and other advanced practice providers in a physician-led Anesthesia Care Team (ACT) model. As CAAs, we work under the direct supervision of a physician anesthesiologist. Our operating room culture emphasizes rigorous safety protocols that ensure patients receive the highest standard of care.

My education as a CAA was rigorous, culminating in a graduate degree and national certification. Like all CAAs, I meet ongoing continuing education and recertification requirements to maintain my license and stay current with advances in the field. The costs and time associated with commuting daily to and from Washington, DC, would quickly offset any licensing fees if I were given the opportunity to work within my Maryland community.

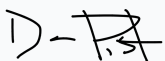
Maryland is currently facing significant anesthesia workforce shortages, which can delay or limit access to surgical and procedural care for patients across the state. In response to these shortages, many facilities have had to rely on temporary, traveling anesthesia providers, known as locums, to fill gaps in operating room staffing. However, staffing operating rooms with locums is not a sustainable or cost-effective solution, as it drives up system costs and does not provide the continuity or stability that patients and hospitals deserve. By licensing CAAs, Maryland can expand its anesthesia care capacity with highly trained, permanent clinicians, all while maintaining the physician-led team structure that ensures quality and safety.

This bill would not create independent practice for CAAs, nor would it replace any of our anesthesia professional colleagues. It simply allows another highly trained, supervised clinician to join the team, without changing existing practice authority or hospital bylaws.

I am proud to live in Maryland and to raise my family here. I want to be able to serve my community, contribute to our hospitals, and ensure that Maryland patients have timely access to physician-led anesthesia care. Please support Senate Bill 951/House Bill 1558 and give CAAs the opportunity to practice in our home state—so that my children, and all Marylanders, can benefit from safe, high-quality anesthesia care close to home.

Thank you for your time and consideration.

Sincerely,
Daniel Pistone



Certified Anesthesiologist Assistant and Maryland Resident