

March 16, 2026

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

Dear Members of the House Health Committee,

My name is Jasleen Kaur, and I am a resident of Montgomery County in Maryland. I am also a Certified Anesthesiologist Assistant (CAA) who has been licensed and practicing for over 11 years in the District of Columbia. I am writing to respectfully ask you to support House Bill 1558 to allow the state of Maryland to license CAAs.

I have over a decade of experience at Children's National Hospital, where I have had the privilege of serving pediatric patients across a wide range of surgical and procedural settings. During this time, I have also refined and developed a highly specialized skill set focused specifically on pediatric anesthesia care, starting from the neonate up until the young adult. However, I am unable to apply this experience and pediatric skillset towards patients in my own home community. My current institution (Children's National) has surgery centers in the state of MD, but I am unable to practice there due to lack of licensing for CAAs.

My husband is also a CAA who lives in MD, and we have an infant at home. Because Maryland does not currently license CAAs, we must commute to work in DC. Our early start times in the operating room combined with longer travel times make it impossible for us to enroll our baby in a daycare near our home in Maryland. As a result, we have had to hire a nanny, which has come at a higher financial cost for our family. We want the same option many Maryland families have - to enroll our child in a local daycare, build relationships in our community, and serve patients here at home.

Beyond the personal impact, this legislation is critical for Maryland patient care.

Hospitals and surgical centers throughout Maryland are experiencing anesthesia workforce shortages that can delay or restrict patient access to needed procedures. In addition to delays, these institutions are experiencing financial burdens due to needing to hire Locums and Travelers providers, which are more costly than a full-time anesthesiologist. Because CAAs work under the supervision and direction of physician anesthesiologists, licensing CAAs in Maryland would allow for the addition of a competent and safe provider into already-existing care-team models, thus alleviating staffing shortage stress as well as maintaining the highest standard of care for our patients. It would keep Maryland clinicians

and access to care within the state, rather than outsourced to other nearby jurisdictions. CAAs do not replace other professional colleagues- they simply add another qualified Anesthesia Care Team (ACT) member, which allows for expanded capacity within the state. CAAs work in the same way as other professional colleagues and are interchangeable within the ACT model. CAAs are already licensed to practice in 23 states, including neighboring Virginia and DC.

In conclusion, I respectfully ask for your support of the CAA licensure bill: House Bill 1558—State Board of Physicians—Anesthesiologist Assistants—Licensing, for which the CAA group would be willing to pay the full licensing fee. This legislation is not only about allowing qualified professionals like myself to serve in our home state, it is about strengthening patient safety, expanding access, and improving workforce stability. Support of the licensure bill allows Maryland patients to benefit from the safe, team-based anesthesia care model that CAAs have successfully provided across the country. Thank you for your time and consideration.

Sincerely,

Jasleen Kaur, CAA
Takoma Park, MD