



2945 Emmorton Rd #54
Abingdon, MD 21009
443-334-5110
marylandrn.org

March 11, 2026

The Honorable Heather Bagnall
Chair, House Health Committee
240 Taylor House Office Building
Annapolis, MD 21401

SUBJECT: HB1372-Public Health – Office of Health Care Quality Information and Maryland Department of Health Centralization Commission – Request for an UNFAVORABLE Report

Dear Chair Bagnall, Vice-Chair Cullison, and distinguished members of the House Health Committee,

HB 1372 would create a Health Centralization Commission within the Department of Health. This Commission would be charged with implementing remedies to audit findings, violations of law, regulation or policy, and establish a single comprehensive licensure system to be used by all health occupation Boards with consolidation of administrative functions. These activities would be funded through the use of health occupation board regulatory fees. Since 2021, Maryland has adopted nine compacts: Audiology/Speech Language Pathology; Cosmetology; Licensed Professional Counseling; Nursing; Occupational Therapy; Physical Therapy; Psychology; Social Work; and, School Psychology. Each of these compacts require the appropriate participation of the licensing Board responsible for issuing that specific occupational license. In fact, these compacts demand oversight by the party occupational board. Any change of oversight would be considered a violation of the agreements.

The Maryland Nurses Association encourages you to refer to the written testimony from the Maryland Board of Nursing (MBoN). We share the concerns raised in their testimony about potential negative and unintended consequences of consolidating oversight boards. Regulating nurses requires expertise in nursing, and a centralized board would dilute the content knowledge expertise currently held by the staff at MBoN.

The Maryland Program Evaluation Act, the Sunset Extension, Licensure Exceptions, and Board Operations and Membership (SB0960) of 2023 temporarily removed some administrative independence from the MBoN and empowered the Secretary of Health to enact operational reforms for a period of 2 Years. The legislation ordered the Maryland Department of Health to conduct an independent evaluation of the board. Since that time, with the support and additional resources provided, the MBoN has made great strides to improve outcomes and efficiencies within their department. These include improved staffing through conversion of contract hires to permanent employees, Board appointments, implementation of standard operating procedures, the addition of 10 non-nurse investigators who examine and resolve complaints, licensure fee updates, implementation of a new licensure system, installation of additional phone lines and a new phone system and website upgrades to name a few. To change course at this time would undo progress made to date. Further, the Maryland Board of Nurses has a close working relationship with other Boards and with the Department of Health. Their collaboration is ongoing and does not require additional consolidation. Adding additional layers of bureaucracy between nurses and the agency certifying their licenses will not serve nurses or patients well.

The Maryland Nurses Association has worked closely with the Board of Nursing and values our relationship. We share their concerns with moving the power of nurse licensure away from the Maryland Board of Nursing and towards an agency that lacks the same content area expertise. Therefore, we respectfully request and ***Unfavorable Report*** on **HB1372-Public Health – Office of Health Care Quality Information and Maryland Department of Health Centralization Commission.**

Respectfully,

A handwritten signature in black ink that reads "Jamie DeMarco". The signature is fluid and cursive, with a prominent flourish at the end.

Jamie DeMarco
Registered Lobbyist,
Maryland Nurses Association
jamie@demarcoadvocacy.com
<https://www.marylandrn.org/>

