FISCAL AND POLICY NOTE
Revised

HB 319
House Bill 319 (Delegate Kullen, et al.)
Health and Government Operations
Education, Health, and Environmental Affairs

State Board of Nursing - Nurse Practitioners - Certification Requirements and Authority to Practice

This bill alters the scope of practice for nurse practitioners by allowing them to practice independently from physicians.

Fiscal Summary

State Effect: Minimal decrease in special fund expenditures beginning in FY 2011 due to the elimination of meetings of the Joint Committee on Nurse Practitioners. The State Board of Nursing and State Board of Physicians can develop the required plan with existing budgeted resources. Revenues are not affected.

Local Effect: None.

Small Business Effect: Potential meaningful for nurse practitioners and physicians’ offices that employ or seek to employ nurse practitioners.

Analysis

Bill Summary: The bill defines “practice as a nurse practitioner” as independently performing the duties of a registered nurse; conducting comprehensive physical assessments; establishing a medical diagnosis for common chronic, stable, or short-term health problems; ordering, performing, and interpreting laboratory tests; prescribing drugs; performing diagnostic, therapeutic, or corrective measures; making referrals; and providing emergency care. The bill clarifies the certification process; authorizes the State Board of Nursing to require continuing education or competency requirements; provides title protection; and alters the temporary practice letter requirements for nurse practitioners.
In addition to current requirements, an applicant for certification as a nurse practitioner must submit:

- an application on a form specified by the board;
- documentation of an active license, in good standing as a registered nurse in the State;
- documentation the applicant graduated from an accredited master’s or doctoral degree program for nurse practitioners; and
- valid certification as a nurse practitioner from a national, certifying body approved by the board.

Applicants must also meet any other requirements set by the board.

A nurse practitioner must have an approved attestation that he or she has a collaboration agreement in place with a licensed physician and will refer to and consult with physicians and health care providers as needed. The attestation must also state the nurse practitioner will practice in accordance with the standards of practice of the American Academy of Nurse Practitioners or any other national certifying body recognized by the State Board of Nursing. The board must maintain an approved attestation and make it available to the State Board of Physicians upon request. Also, the bill repeals the requirement that the State Board of Physicians adopt regulations jointly with the State Board of Nursing concerning the prescriptive authority of nurse practitioners and requires the State Board of Nursing, in consultation with the State Board of Physicians, to develop a plan to implement the Maryland Nurse Practice Act, including provisions for the repeal of obsolete regulations and a requirement that attestations made by nurse practitioners concerning collaboration agreements with a licensed physician identify the physician.

**Current Law/Background:** A nurse practitioner is a nurse with a graduate degree in advanced practice nursing. Nurse practitioners provide a broad range of health care services in a variety of settings with or without physician supervision. Their scope of practice varies from state to state. For example, while they are not authorized to write prescriptions in some states, nurse practitioners in Maryland are authorized to do so.

In Maryland, a nurse practitioner is a registered nurse who is certified by the State Board of Nursing as having completed an approved nurse practitioner program and passed an exam. The State Board of Nursing, jointly with the State Board of Physicians, sets forth regulations for nurse practitioners’ scope of practice. A nurse practitioner can perform the following functions independently under a written agreement with a physician: make a comprehensive physical assessment of patients; establish a medical diagnosis for common short-term or chronic stable health problems; order, perform, and interpret laboratory tests; prescribe drugs; perform therapeutic or corrective measures; refer patients to appropriate licensed physicians or other health care providers; and provide emergency care. A written agreement is required between a licensed physician and nurse practitioner concerning the nurse practitioner’s performance of the functions listed above.
The Joint Committee on Nurse Practitioners, composed of an equal number of members appointed by the two boards, develops the written framework to be used in written agreements and makes recommendations regarding approval of written agreements.

The board can issue a temporary license to an applicant who is licensed in another state and meets other specified requirements, including submitting to a criminal history records check. The board can also issue a temporary practice letter to a certified nurse practitioner or certified nurse-midwife who has been issued a temporary license; has submitted an initial written agreement to the board for formal approval; and meets other specified requirements. Temporary licenses and temporary practice letters expire 90 days after the date of issue and cannot be renewed. The board must revoke a temporary license or certificate if the criminal history record information forwarded to the board reveals that the applicant, certificate holder, or licensee has been convicted or pled guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside.

**Small Business Effect:** Approximately 3,200 nurse practitioners are certified in the State. However, it is unclear as to how many nurse practitioners work in small businesses. Under the bill’s provisions, a nurse practitioner who works in a physician’s office will be able to perform more duties independently, freeing up physician time. Therefore, physicians’ offices may seek to hire additional nurse practitioners to perform duties a doctor would typically perform. However, physicians’ offices may lose nurse practitioners who wish to practice independently, as authorized by the bill. The extent to which physicians’ offices are affected depends on the number of nurse practitioners who continue to work, or seek employment, within an office setting.

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**Additional Information**

**Prior Introductions:** None.

**Cross File:** SB 484 (Senator Dyson, *et al.* - Education, Health, and Environmental Affairs and Finance.

**Information Source(s):** Department of Health and Mental Hygiene, Department of Legislative Services

**Fiscal Note History:**

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