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2007 SINE DIE REPORT
MARYLAND GENERAL ASSEMBLY
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**NURSE PRACTITIONERS ASSOCIATION OF
MARYLAND**

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Happy Sine Die NPAM members! The 2007 Legislative Session of the Maryland General Assembly came to a close at Midnight on Monday, April 9, 2007. Minus a few bumps and bruises along the way, this was a great Session for nurse practitioners and everyone should be pleased with our accomplishments!

GENERAL ISSUES:

During the 2007 Session, members of the House of Delegates and the Senate introduced 2496 bills and resolutions. By the time the gavel hit on Sine Die, they had managed to pass 800 of them! The bills will now be sent to the Governor for his signature or veto. Assuming the Governor approves the measures, they will be signed into law through a series of public ceremonies scheduled for April 10th and 24th and May 8th and 17th. Please let me know if you would like to attend any bill signings and get your picture taken with Governor O'Malley, Senate President Miller and Speaker Busch.

Some of the heavily debated issues for the Session included Maryland's looming budget deficit, health care, the environment, death penalty, ground rents, slot machines and taxes. While the newly elected Democratic Governor Martin O'Malley had some successes, as well as some losses, during his first-year of a four-year term, he managed to work well with the House and the Senate and the atmosphere was much calmer than it has been in recent years.

The Legislature approved Governor O'Malley's \$30 billion budget largely intact without including tax or fee increases; and also passed the "clean car" bill to require stricter emissions standards for car sold in Maryland. The Governor's initiative to repeal the death penalty was defeated; however, a deal was brokered to pass the first ever living wage bill to require state government contractors to pay workers a "living wage" of \$11.30 in the Baltimore-Washington corridor and \$8.50 in rural areas. We will not see slot machines coming to Maryland this year, nor will we see comprehensive health care expansion, but you will be able to see more clearly when you enter a local bar or restaurant after February 2008 when the statewide indoor smoking ban goes into effect.

SPECIAL SESSION ISSUES:

There has been much discussion around calling the Legislature back for a Special Session prior to next January to addressing the projected \$1.5 billion budget deficit. Senate President Miller, who is a vocal proponent of passing a slots bill to increase revenue, seems to support the idea of a Special Session (especially if it were to involve a slots initiative); however, Speaker of the House Busch is opposed to slots and he has been noncommittal on the need to call a Special Session.

If a Special Session is convened, it is unlikely that it will be held until after September 1, 2007 (some renovations are being made to the Senate Chamber, and the Senate will be homeless until the renovations are completed). In addition to the budget deficit, the Special Session may also address slots initiatives; new taxes or fees; measures to expand health care access for the uninsured; and attempts to bail out the Prince George's County hospital that is dire financial straits. In any event, budget issues will be weighing heavy on the minds of the legislators and the Governor and they will be looking at ways to cut costs and increase revenues through a variety of measures.

GENERAL HEALTH CARE ISSUES:

Although we heard much discussion prior to Session about expanding Medicaid coverage to many of the State's more than 750,000 uninsured residents, the \$1.5 billion revenue shortfall seemed to halt most of the meaningful health care reform efforts. The Senate refused to pass Chairman Hammen's comprehensive expansion bill unless the House would agree to additional revenue sources (i.e. slots) and the House refused to pass a health care proposal that did not really do much more than study the issue (i.e. the Administration bill).

The Legislature, however, did manage to pass a few bills that start to address the overall health care issues. HB 157 and HB 339 allow insurance carriers to offer incentives to subscribers and employers for participating in wellness activities. HB 1057 will allow dependent children to remain on their parent's health insurance policy until the age of 25 and requires insurance providers to offer coverage to domestic partners if an employer requests it. Legislators also passed a bill to create a limited benefits plan that employers can offer to seasonal and part-time workers; and they directed the State to conduct a number of studies including a study on whether middle and upper income individuals should be required to purchase health insurance (HB572).

YOUR ISSUES:**HB445/SB378 – Adds a Certified Advanced Practice Nurse to the Board of Nursing**

We were successful in passing a bill to require an additional seat on the Board of Nursing for a Certified Advanced Practice Nurse. NPAM members worked very hard to pass this bill and everyone should be extremely proud of your efforts! We managed to overcome the opposition of the BON and, ultimately, turn the Board's opposition into support for the bill. Additionally, this joint legislative effort has provided an opportunity for all advance practice specialty nurses to begin working together on future issues.

I spoke with the Secretary of Appointments, Jeanne Hitchcock, on Monday to find out the procedure regarding the appointment of the additional Board member. Ultimately, we need to send Secretary Hitchcock the resume/CV of the potential candidates and the Governor will make the appointment from those candidates. We should talk about this at our next meeting.

SB107/HB138 – Task Force on Health Care Access and Reimbursement

These bills will create a task force to review the issues surrounding access to care and reimbursement to providers. In working with the other allied health professionals, we were successful in amending this bill to include all providers and not only physicians.

SB263/HB519 – Carrier Provider Panels – Nonphysician Specialists

These bills were successful and they will require insurance carriers to reimburse out-of-network nonphysician providers if a patient cannot get an appointment to see an in-network provider within a reasonable period of time. This legislation will help to ensure provider reimbursement and increase access to care for patients.

HB947 – Provider Reimbursement and Charges

This bill states that a carrier cannot require a provider that provides services through a group practice or facility that participates on the carrier's provider panel to be considered a participating provider or accept the reimbursement fee schedule under certain circumstances.

HB1230 – Physician Oversight of Cosmetic Medical Procedures and Treatments

We helped to kill this bill in the House HGO Committee. The language in this bill raised a number of questions and could have been interpreted to require direct supervision over advance practice nursing who were performing functions in an ambulatory surgery center. This was a last minute catch by some of the NPAM members, and we quickly scrambled to ensure that this bill was defeated.

A copy of your bill profile is also included in this Report. Your profile includes the final outcome of all of the legislation we have tracked on your behalf. Please do not hesitate to contact me if you have any questions, and I look forward to talking to you soon to plan our strategy for the interim. Thanks for a great Session!

Take care,
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