

# MedChi

*The Maryland State Medical Society*

1211 Cathedral Street  
Baltimore, MD 21201-5516  
410.539.0872  
Fax: 410.547.0915

1.800.492.1056

www.medchi.org

TO: The Honorable Shane E. Pendergrass, Chair  
Members, House Health and Government Operations Committee  
The Honorable Bonnie Cullison

FROM: J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone

DATE: February 1, 2022

RE: **OPPOSE** – House Bill 276 – *Health Occupations – Clinical Nurse Specialists – Prescribing Authority*

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The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **opposes** House Bill 276.

House Bill 276 defines the term “clinical nurse specialist” (CNS) and sets forth the scope of practice for a CNS. MedChi has significant questions about the role of the CNS as currently defined versus what their role would become if House Bill 276 were to pass, as set out below.

The term CNS is included in the statutory definition of “Advanced Practice Nurse” (HO §8-101) and requires that a CNS be licensed as a registered nurse and “certified to practice as a CNS”. Beyond that, the statute provides no definition on the role of a CNS or their scope of practice. However, existing regulations of the Board of Nursing provide that a CNS’ scope includes: 1) “continuous improvement of patient outcomes and nursing care”, 2) acting “in accordance with the core competencies of the National Association of Clinical Nurse Specialists...”, 3) “creating therapeutic environments through mentoring and system changes”, and 4) “practicing with individual clients, families, groups and populations of clients.” These regulations provide very little guidance in terms of what tasks and duties a CNS may undertake.

House Bill 276 would expand the scope of a CNS beyond that of even a Nurse Practitioner (NP), another type of Advanced Practice Nurse (scope found at HO §8-101(m)), by allowing the CNS to “order, perform, and interpret...diagnostic tests”. While *laboratory* tests are included in the statute outlining the scope of practice for an NP, *diagnostic* tests are not. MedChi does not believe that the scope of a CNS should be broadened beyond even that of a NP.

In addition, House Bill 276 would allow a CNS to “prescribe drugs and durable medical equipment...” While NPs are permitted to prescribe, MedChi is not certain that the CNS receives the same training, experience, and mentorship in prescribing medications that an NP does, so as to warrant this authority. We have been in communication with representatives of the CNSs in this regard and are reviewing information they have provided.

For now, MedChi has too many unanswered questions about the role of the CNS and the changes proposed in the legislation. Accordingly, MedChi would ask the Committee to oppose House Bill 276.

**For more information call:**

J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone  
410-244-7000