

MAINE STATE LEGISLATURE

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L.D. 961

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Date: 1/9/26

(Filing No. H-785)

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HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES

4

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STATE OF MAINE

6

HOUSE OF REPRESENTATIVES

7

132ND LEGISLATURE

8

SECOND REGULAR SESSION

9

COMMITTEE AMENDMENT "A" to H.P. 620, L.D. 961, "An Act to Address
Maine's Health Care Workforce Shortage and Improve Access to Care"

11

Amend the bill by striking out the emergency preamble and substituting the following:

12

'Emergency preamble. Whereas, acts and resolves of the Legislature do not
become effective until 90 days after adjournment unless enacted as emergencies; and

14

Whereas, certified nurse practitioners are highly qualified to meet the physical and
mental health care needs of patients and are uniquely positioned to assist patients; and

16

Whereas, Maine recognizes 4 categories of nurses that may qualify to provide
advanced practice registered nursing, but only certified nurse practitioners are subject to a
2-year supervision requirement; and

19

Whereas, that supervision requirement restricts the ability of highly qualified certified
nurse practitioners to practice at the highest level of their license as advanced practice
registered nurses; and

22

Whereas, this legislation authorizes the State Board of Nursing to modernize the
current licensing requirements by establishing practice standards including the length of
time a certified nurse practitioner must practice as an advanced practice registered nurse
and any requirements for employment by a clinic or hospital that has a supervising nurse
practitioner within the clinic or hospital serving in a mentorship role to a certified nurse
practitioner; and

28

Whereas, these practice standards must be adopted as soon as possible to recognize
the ability of certified nurse practitioners to serve the immediate health care needs of
patients; and

31

Whereas, in the judgment of the Legislature, these facts create an emergency within
the meaning of the Constitution of Maine and require the following legislation as
immediately necessary for the preservation of the public peace, health and safety; now,
therefore,'

1 Amend the bill by striking out everything after the enacting clause and before the
2 emergency clause and inserting the following:

3 **'Sec. 1. 32 MRSA §2102, sub-§2-A,** as amended by PL 2007, c. 316, §1, is further
4 amended by amending the 2nd blocked paragraph to read:

5 A Until the board has adopted rules to establish practice standards pursuant to section
6 2205-B, subsection 4-A, a certified nurse practitioner who qualifies as an advanced practice
7 registered nurse must practice, for at least 24 months, under the supervision of a licensed
8 physician or a supervising nurse practitioner or must be employed by a clinic or hospital
9 that has a medical director who is a licensed physician. The certified nurse practitioner
10 shall submit written evidence to the board upon completion of the required clinical
11 experience.

12 **Sec. 2. 32 MRSA §2102, sub-§10, ¶A,** as enacted by PL 2007, c. 316, §2, is
13 repealed and the following enacted in its place:

14 A. Met the requirements of section 2205-B, subsection 4-A specified by the board in
15 rule;

16 **Sec. 3. 32 MRSA §2102, sub-§10, ¶B,** as enacted by PL 2007, c. 316, §2, is
17 amended to read:

18 B. Practiced as an advanced practice registered nurse for a minimum of 5 years in the
19 same speciality specialty;

20 **Sec. 4. 32 MRSA §2205-B, sub-§4-A** is enacted to read:

21 **4-A. Approval of certified nurse practitioner.** A certified nurse practitioner who
22 qualifies as an advanced practice registered nurse must meet practice standards specified
23 in rule by the board related to:

24 A. The length of time a certified nurse practitioner must practice as an advanced
25 practice registered nurse;

26 B. Based on experience and licensing status, the minimum amount of time a certified
27 nurse practitioner must practice with a supervising nurse practitioner serving in a
28 mentorship role to the certified nurse practitioner;

29 C. The practice setting of a certified nurse practitioner, including consideration of any
30 requirements for employment by a clinic or hospital that has a supervising nurse
31 practitioner within the clinic or hospital serving in a mentorship role to a certified nurse
32 practitioner; and

33 D. Any other factors determined necessary by the board.

34 A certified nurse practitioner shall demonstrate compliance with the practice standards
35 required under this subsection in the form and manner required by the board. The board
36 may adopt rules as necessary to implement the requirements of this subsection. Rules
37 adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter
38 375, subchapter 2-A.

39 **Sec. 5. State Board of Nursing rulemaking; submission of proposed**
40 **practice standards.** No later than March 15, 2026, the State Board of Nursing shall
41 submit proposed practice standards for certified nurse practitioners, as required by the

ROS
1 COMMITTEE AMENDMENT "A" to H.P. 620, L.D. 961

2 Maine Revised Statutes, Title 32, section 2205-B, subsection 4-A, to the Joint Standing
3 Committee on Health Coverage, Insurance and Financial Services for review. The joint
4 standing committee may report out a bill to the Second Regular Session of the 132nd
5 Legislature relating to the practice standards for certified nurse practitioners.
6 Notwithstanding Title 5, chapter 375, subchapter 2, the State Board of Nursing may not
7 adopt any rules before May 1, 2026 relating to the practice standards for certified nurse
practitioners as required by Title 32, section 2205-B, subsection 4-A.'

8 Amend the bill by relettering or renumbering any nonconsecutive Part letter or section
9 number to read consecutively.

10 **SUMMARY**

11 This amendment retains the emergency status of the bill but replaces the substantive
12 provisions in the bill. The amendment provides that, once rules are adopted by the State
13 Board of Nursing to establish practice standards, a certified nurse practitioner who qualifies
14 as an advanced practice registered nurse is no longer required to practice for at least 24
15 months under the supervision of a licensed physician or supervising nurse practitioner or
16 be employed by a clinic or hospital that has a medical director who is a licensed physician.

17 The amendment directs the board to establish practice standards by rule for a certified
18 nurse practitioner related to the length of time a certified nurse practitioner must practice
19 as an advanced practice registered nurse; the minimum amount of time a certified nurse
20 practitioner must practice with a supervising nurse practitioner as a mentor; the practice
21 setting for a certified nurse practitioner, including any requirements for employment by a
22 clinic or hospital that has a supervising nurse practitioner within the clinic or hospital
23 serving in a mentorship role to a certified nurse practitioner; and any other factors
24 determined necessary by the board. Rules adopted by the board are designated as routine
25 technical rules.

26 The amendment directs the board to submit the proposed practice standards for
27 certified nurse practitioners to the Joint Standing Committee on Health Coverage,
28 Insurance and Financial Services for review no later than March 15, 2026 and authorizes
29 the committee to report out a bill to the Second Regular Session of the 132nd Legislature
30 relating to the practice standards for certified nurse practitioners. The amendment prohibits
31 the board from adopting rules relating to the practice standards for certified nurse
32 practitioners before May 1, 2026.

33 **FISCAL NOTE REQUIRED**

34 (See attached)



132nd MAINE LEGISLATURE

LD 961

LR 926(02)

An Act to Address Maine's Health Care Workforce Shortage and Improve Access to Care

Fiscal Note for Bill as Amended by Committee Amendment "A" (H-785)
Committee: Health Coverage, Insurance and Financial Services
Fiscal Note Required: Yes

Fiscal Note

Current biennium revenue decrease - Other Special Revenue Funds

Fiscal Detail and Notes

A revenue decrease is expected, but the fiscal impact cannot be fully estimated until the Board of Nursing adopts implementing rules.

Any additional costs for rulemaking and the development of practice standards are expected to be minor and can be absorbed within existing budgeted resources