



NAVIGATING WELLNESS PRIMARY CARE

DATE: APRIL 13, 2025

SENATOR DONNA BAILEY REPRESENTATIVE LORI GRAMLICH MEMBERS OF THE HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES COMMITTEE ROOM 220 CROSS STATE OFFICE BUILDING, AUGUSTA, MAINE 04330

DEAR CHAIRMAN BAILEY, CHAIRMAN GRAMLICH, AND MEMBERS OF THE COMMITTEE:

I AM WRITING TO OFFER MY STRONG SUPPORT FOR LD961, AN ACT TO ADDRESS MAINE'S HEALTHCARE WORKFORCE SHORTAGE AND IMPROVE ACCESS TO CARE. AS AN EXPERIENCED NURSE PRACTITIONER (NP), AN EDUCATOR WITH OVER 10 YEARS OF EXPERIENCE, A FORMER NP PROGRAM CHAIR, A FACULTY MEMBER OF MULTIPLE COLLEGES, AND A BUSINESS OWNER HIRING NPS FROM OTHER STATES, I HAVE OBSERVED FIRSTHAND THE READINESS OF NURSE PRACTITIONERS TO PRACTICE INDEPENDENTLY.

THE EDUCATION PROVIDED BY NURSE PRACTITIONER PROGRAMS IS RIGOROUS, COMPETENCY-BASED, AND GROUNDED IN EXTENSIVE CLINICAL PRACTICE. PRIOR TO ENTERING ADVANCED PRACTICE, MOST NURSE PRACTITIONERS POSSESS A ROBUST FOUNDATION IN NURSING EDUCATION AND SUBSTANTIAL CLINICAL EXPERIENCE AS REGISTERED NURSES. THIS EXPERIENCE TYPICALLY INCLUDES COMPREHENSIVE PATIENT ASSESSMENTS, THOROUGH HISTORY-TAKING, AND DIRECT PATIENT CARE. FURTHERMORE, NURSE PRACTITIONERS ARE REQUIRED TO OBTAIN NATIONAL BOARD CERTIFICATION PRIOR TO LICENSURE.

AS OUTLINED IN THE ESSENTIALS OF DOCTORAL EDUCATION FOR ADVANCED NURSING PRACTICE, NP PROGRAMS EMPHASIZE CORE COMPETENCIES THAT INCLUDE ADVANCED CLINICAL JUDGMENT, SYSTEMS THINKING, EVIDENCE-BASED PRACTICE, INTERPROFESSIONAL COLLABORATION, AND LEADERSHIP IN HEALTHCARE POLICY. THESE RIGOROUS STANDARDS ENSURE GRADUATES ARE WELL-EQUIPPED TO IMPROVE HEALTHCARE OUTCOMES AND ADDRESS THE COMPLEX HEALTHCARE NEEDS OF THE CITIZENS OF MAINE.

RESEARCH OVER THE PAST FIVE DECADES CONSISTENTLY DEMONSTRATES THAT NURSE PRACTITIONERS PROVIDE SAFE AND HIGH-QUALITY CARE COMPARABLE TO THAT OF PHYSICIANS, WITHOUT THE NECESSITY FOR SUPERVISORY PERIODS. MAINE'S SUPERVISION REQUIREMENT NOT ONLY LACKS EVIDENCE FOR IMPROVING PATIENT OUTCOMES OR SAFETY BUT ACTIVELY CREATES BARRIERS FOR SKILLED PRACTITIONERS FROM OTHER STATES, NEGATIVELY IMPACTING OUR HEALTHCARE WORKFORCE. IN CONTRAST, OUR NEIGHBOR, NEW HAMPSHIRE, DOES NOT IMPOSE SUCH RESTRICTIONS, THEREBY PROVIDING A MORE FAVORABLE PRACTICE ENVIRONMENT AND ATTRACTING PROVIDERS THAT MAINE URGENTLY NEEDS.



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FROM MY DIRECT EXPERIENCE HIRING HIGHLY QUALIFIED NPS FROM OUT-OF-STATE, MAINE'S SUPERVISION REQUIREMENTS HAVE DETERRED APPLICANTS OR SIGNIFICANTLY DELAYED THEIR LICENSURE DUE TO ADMINISTRATIVE RATHER THAN COMPETENCY-BASED ISSUES. FOR EXAMPLE, A HIGHLY EXPERIENCED NP Faced A 90-DAY DELAY SOLELY BECAUSE OF AN ADMINISTRATIVE ISSUE UNRELATED TO CLINICAL COMPETENCE; THE LETTER WAS ADDRESSED TO THE FORMER PERSON THAT REVIEWED THE SUPERVISION LETTERS AND NOT THE CURRENT PERSON. SUCH BARRIERS IMPEDE OUR ABILITY TO EFFICIENTLY MEET THE CRITICAL HEALTHCARE NEEDS OF MAINE'S CITIZENS, PARTICULARLY IN RURAL AND UNDERSERVED COMMUNITIES.

IN SUMMARY, LD961 WILL STANDARDIZE AND STREAMLINE THE NURSE PRACTITIONER LICENSING PROCESS, REMOVING UNNECESSARY BARRIERS AND SIGNIFICANTLY ENHANCING ACCESS TO CARE. IT WILL HELP MAINE ATTRACT AND RETAIN HIGHLY QUALIFIED, INDEPENDENTLY CAPABLE NURSE PRACTITIONERS AND IMPROVE HEALTHCARE OUTCOMES ACROSS OUR STATE.

I URGE YOU TO UNANIMOUSLY SUPPORT LD961 WITHOUT RESERVATION.

SINCERELY,

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