



25+ Years of Independent Practice as Healthcare Providers for the People of Maine

4/13/2025

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 today as a primary care nurse practitioner, small business owner, and member of the Legislative Committee of the Maine Nurse Practitioner Association in support of LD961, An Act to Address Maine's Health Care Workforce Shortage and Improve Access to Care.

This bill would remove the outdated and unnecessary 24-month supervisory requirement that currently applies only to certified nurse practitioners and not to other APRNs, not to physicians, and not in the majority of U.S. states. This is not just a professional issue—it's a patient access issue.

Every day I hear from people who can't find a primary care provider, who've waited months for a mental health appointment, or who have left the ER without follow-up because they couldn't find an available provider. Nurse practitioners are ready and able to fill these gaps in Maine. The current law restricts our ability to timely serve our communities, is a deterrent to nurse practitioners who might otherwise choose to move to Maine and help expand access to care, and sends a message that our education and clinical experience is not enough—when it is.

Nurse practitioners complete thousands of hours of advanced clinical training. We are trained with graduate-level education, are nationally certified, and are licensed to diagnose and treat both acute and chronic conditions, while also emphasizing prevention, health promotion, and patient education. This comprehensive approach allows NPs to meet a broad range of patient needs with clinical expertise and a focus on long-term wellness which can lead to lower costs. Backed by over 50 years of research, NPs have consistently demonstrated the ability to deliver safe, effective, and patient-centered care. Yet, in Maine, we are the only group of APRNs who are required to practice under supervision for two years before gaining full practice authority. This is a discriminatory licensing practice that limits NP's scope of practice and access to care for the people of Maine.

It also presents real and unnecessary barriers to those of us who want to innovate and serve our communities through nurse-led models of care. As a direct primary care practice owner and mentor for other NP practice owners, I have seen the structural challenges of supervision requirements. They make it harder for NPs to open their own practices, especially in rural areas where we are most needed. They force new NPs to find and pay a supervising NP or physician, even if they're fully prepared to practice safely and independently. This is a discriminatory process that stifles entrepreneurship, leadership, healthcare innovation, and most importantly, access to care for the people of Maine.

If we want to address Maine's workforce shortage, increase access to care, and support smart, evidence-based healthcare reform, we need to remove this outdated and unnecessary supervisory requirement. LD961 is a simple fix with a big impact. It aligns our laws with current evidence, national standards, and the needs of our communities. I urge you to support LD961 to standardize the nurse practitioner licensing process, remove barriers to practice, and significantly increase access to healthcare for Maine citizens.

Thank you for your time, your attention, and your service to the people of Maine.

Sincerely,

Amy Brown, FNP-C

Member, Legislative Committee, Maine Nurse Practitioner Association

Owner of MainelyNP Primary Care