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February 25, 2026

Linda McMahon
Secretary
U.S. Department of Education
400 Maryland Avenue, SW
Washington, D.C. 20202

RE: Docket ID ED-2025-OPE-0944 – Reimagining and Improving Student Education

Dear Secretary McMahon:

On behalf of the board of trustees and the members of the Healthcare Association of New York State, thank you for the opportunity to submit comments on Docket ID ED-2025-OPE-0944 – Reimagining and Improving Student Education.

HANYS urges the Department of Education to revise its proposed definition of “professional student” to include advanced practice nursing degrees. Excluding these degrees from the higher lifetime borrowing limits would worsen nationwide healthcare shortages, restrict access to care and undermine efforts to build a stable workforce.

This proposed rule would revise the Direct Loan Program under 34 CFR Part 685 by amending annual and aggregate loan limits for graduate, professional and parent loan borrowers.

The DOE proposes to define “*professional student*” to mean “*a student enrolled in a program of study that awards a professional degree upon completion of the program*” and proposes that a professional degree only includes degrees in the following fields: pharmacy (PharmD), dentistry (DDS or DMD), veterinary medicine (DVM), chiropractic (DC or DCM), law (LLB or JD), medicine (MD), optometry (OD), osteopathic medicine (DO), podiatry (DPM, DP, or PodD), theology (MDiv, or MHL) and clinical psychology (PsyD or PhD).

Given the persistent healthcare workforce challenges in New York and across the nation, **HANYS and our members are very concerned that the proposed definition of “*professional student*” excludes advanced nursing degrees, including:**

- advance practice registered nurses with Doctor of Nursing Practice degrees who provide direct patient care, such as nurse practitioners and Certified Registered Nurse Anesthetists; and
- nursing faculty pursuing Doctor of Philosophy degrees.

Under the proposed definition, students pursuing these advanced degrees would be limited to a reduced lifetime borrowing limit of \$100,000. This restriction would hinder access to advanced nursing education, limit the supply of essential clinicians and



educators and further strain the already challenged healthcare workforce pipeline. As noted in HANYS' *The Case for Change*¹, the demand for healthcare is growing and changing. There is also a well-documented shortage of healthcare workers – both in number and mix. These compounding factors are forcing hospitals to incur higher costs to fill needed positions, if they can fill them at all, further straining the healthcare system.

Strategic investments are essential to meet the needs of today, create stability and build the healthcare system for tomorrow. A foundational element of that strategy includes policies to encourage more people to pursue careers in healthcare, particularly advanced nursing degrees.

It is important to note that not all costs associated with pursuing an advanced nursing degree are related to tuition. Even if nursing schools reduce the cost of tuition, as the proposed rule intends, students will still have to cover the costs of supplies, room and board, and the like. Many of the individuals seeking these degrees do so full-time; they have limited, if any, other sources of income coming in while pursuing their education. Without access to sufficient funds through a loan program, it may become even harder for these individuals to support themselves through their studies.

The proposed rule creates an additional barrier for individuals to pursue advanced practice nursing careers and may further limit the already insufficient number of APRNs, nurse practitioners, CRNAs and nursing faculty. By further limiting the supply of highly trained clinicians and nursing faculty, the proposed rule would reduce patient access to essential services and increase the likelihood that emergency departments would be used to manage preventable and chronic conditions.

Advance practice RNs providing direct patient care

According to the American Association of Colleges of Nursing, in 2024 the number of students in Doctor of Nursing Practice programs grew by 2% or 936 students, marking 21 years of continuous enrollment expansion. DNP programs prepare nurses for practice at the highest level, including APRNs (nurse practitioners, certified registered nurse anesthetists, clinical nurse specialists and nurse midwives). Enrollment in DNP programs has grown steadily for more than two decades from 70 students in 2003 to 42,767 students last year. DNP programs are now offered at 439 schools of nursing across the U.S.²

DNPs can fill critical healthcare workforce gaps. For example, nurse practitioners (Bureau of Labor Statistics job code 29-1171) *“diagnose and treat acute, episodic, or chronic illness, independently or as part of a healthcare team. NPs may focus on health promotion and disease prevention; they may order, perform, or interpret diagnostic tests such as lab work and x rays; and they may prescribe medication. Nurse practitioners must be registered nurses who have specialized graduate education.”*³

In New York, NPs must also be certified.⁴ State law also allows NPs with more than 3,000 hours of experience to practice independently from a physician.⁵ More than 17,600 NPs are employed in New York, ranking the state fourth in the nation.⁶

¹ The Case for Change. (2024). Healthcare Association of New York State. https://www.hanys.org/communications/publications/case_for_change.

² American Association of Colleges of Nursing. (2025). <https://www.prnewswire.com/news-releases/schools-of-nursing-see-enrollment-increases-across-most-program-levels-signaling-strong-interest-in-nursing-careers-302484466.html>.

³ Nurse Practitioners. Bureau of Labor Statistics. <https://www.bls.gov/oes/2022/may/oes291171.htm>.

⁴ Nurse Practitioners. New York State Education Department Office of the Professions. <https://www.op.nysed.gov/professions/nurse-practitioners/certification-requirements>.

⁵ Nurse Practitioners. New York State Education Department Office of the Professions. <https://www.op.nysed.gov/professions/nurse-practitioners/certification-requirements>.

⁶ Nurse Practitioners. Bureau of Labor Statistics. <https://www.bls.gov/oes/2022/may/oes291171.htm>.

With a projected shortage of up to 40,400 primary care physicians by 2036,⁷ NPs are well positioned to help address the growing demand for primary care, particularly in rural and underserved communities.⁸ Nurse practitioners and PAs already make up one-third of all visits billed to Medicare and nearly half in rural areas.⁹ With too few Medicare-supported Graduate Medical Education slots available to train the next generation of physicians and alternative avenues to recruit qualified physicians through programs like the H-1B visa program closing, the need for NPs will only grow.

Previous research has consistently shown that NPs deliver comparable quality and lower-cost care, particularly in states with NP full-practice authority, which allows NPs to practice without mandated physician collaboration or supervision.^{10,11} To ensure hospitals, health systems and primary care practices can provide high-quality, person-centered care in all communities, more NPs are needed, not fewer.

As another example, nurse anesthetists (BLS job code 29-1151) “*administer anesthesia, monitor patient's vital signs, and oversee patient recovery from anesthesia. CRNAs may assist anesthesiologists, surgeons, other physicians, or dentists. They must be registered nurses who have specialized graduate education.*”¹² More than 1,200 CRNAs are employed in New York.¹³ Recognizing the growth of CRNAs in the state, the New York State Legislature is considering proposals to define the scope of practice for CRNAs in state law.¹⁴

Like NPs, CRNAs are helping to fill a critical gap in healthcare. The Health Resources and Services Administration projects a shortage of 10,660 anesthesiology physicians through 2038.¹⁵ For all healthcare titles, HRSA predicts that residents of non-metro areas will face the brunt of these shortages. In 2038, non-metro areas will experience a 58% shortage of physicians; by comparison, metro areas will experience a 5% shortage. The healthcare system must continue to grow and sustain the CRNA workforce to ensure hospitals can continue to perform surgeries, diagnostic procedures, and obstetric services while prioritizing patient comfort and care.

Nursing program faculty

While enrollment increased from 2023 to 2024 in nursing baccalaureate, masters and practice doctorates, fewer students entered research-focused doctoral degree programs in 2024, further challenging efforts to prepare enough researchers, faculty and leaders to meet workforce needs.¹⁶

According to the American Association of Colleges of Nursing, enrollment in PhD nursing programs declined for the eleventh consecutive year, with a slight 0.5% decrease (21 students) from 2023 to 2024. Since 2013, enrollment in PhD programs has decreased by 17.9%, from 5,145 to 4,223 students.¹⁷ This downward trend is of great concern; lower enrollments mean fewer academic

⁷ GlobalData Plc (2024). The complexities of physician supply and demand: Projections from 2021 to 2036. Association of American Medical Colleges. <https://www.aamc.org/media/75236/download?attachment>.

⁸ Xue Y, Smith J. A., & Spetz J. (2019). Primary care nurse practitioners and physicians in low income and rural areas, 2010–2016. *Journal of the American Medical Association*, 321(1), 102–105. 10.1001/jama.2018.17944

⁹ Medicare Payment Advisory Commission (2022). Report to the congress: congressional request: vulnerable Medicare beneficiaries' access to care (final report).

¹⁰ Buerhaus P. I. (2018, September 18). Nurse practitioners: A solution to America's primary care crisis. American Enterprise Institute. <https://www.aei.org/wp-content/uploads/2018/09/Nurse-practitioners.pdf>.

¹¹ Dunbar Jacob J., and Rohay J. M. (2025). State health and the level of practice authority for nurse practitioners. *Nursing Outlook*, 73(1), 102319. Article 102319. 10.1016/j.outlook.2024.102319.

¹² Nurse anesthetists. Bureau of Labor Statistics. <https://www.bls.gov/oes/2020/may/oes291151.htm>.

¹³ Ibid.

¹⁴ Senate Bill 357A. New York State Senate. <https://www.nysenate.gov/legislation/bills/2025/S357/amendment/A>.

¹⁵ Healthcare Workforce Shortages. Health Resources and Services Administration. <https://bh.w.hrsa.gov/data-research/projecting-health-workforce-supply-demand>.

¹⁶ American Association of Colleges of Nursing. (2025). <https://www.prnewswire.com/news-releases/schools-of-nursing-see-enrollment-increases-across-most-program-levels-signaling-strong-interest-in-nursing-careers-302484466.html>.

¹⁷ American Association of Colleges of Nursing. (2025). <https://www.prnewswire.com/news-releases/schools-of-nursing-see-enrollment-increases-across-most-program-levels-signaling-strong-interest-in-nursing-careers-302484466.html>.

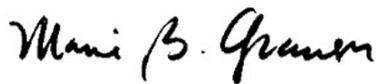
nursing leaders to prepare future nurse scientists, educators and researchers. Without access to student loans to cover the full cost of a PhD, even fewer nurses will choose to pursue this path.

Recognize professional nursing degrees

Every available tool is needed to address the healthcare workforce shortage; lowering the borrowing cap for graduate nursing students would exacerbate existing healthcare worker shortages and jeopardize patient access to care. **HANYS strongly encourages the Department of Education to revise the definition of “*professional student*” to include advanced nursing degrees.**

Thank you for considering our feedback. If you have questions, please contact Christina Miller-Foster, managing senior director, Quality Advocacy, Research and Innovation, at 518.431.7748 or cfoster@hanys.org.

Sincerely,

A handwritten signature in black ink that reads "Marie B. Grause". The signature is written in a cursive, flowing style.

Marie B. Grause, RN, JD
President