

March 2, 2026

The Honorable Nicholas Kent  
Under Secretary of Education  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, DC 20202

RE: Comments on Proposed Rulemaking, Reimagining and Improving Student Education [ED-2025-OPE-0944]

Dear Under Secretary Kent:

On behalf of Tri-Council for Nursing — comprising the American Association of Colleges of Nursing, American Nurses Association, American Organization for Nursing Leadership, National League for Nursing, and National Council of State Boards of Nursing — we appreciate the opportunity to comment on the Department of Education’s proposed definition of “professional degree” programs.

The Tri-Council represents the full continuum of nursing education, practice, licensure, regulation, and leadership. As stewards of our nation’s largest health care workforce, we are deeply committed to ensuring federal policy fully recognizes and supports the educational pathways necessary to prepare safe, highly skilled nurses who meet the needs of patients, and communities nationwide. The Tri-Council urges the Department to explicitly include post-baccalaureate nursing degree programs — Master of Science in Nursing (MSN), Doctor of Nursing Practice (DNP) and Ph.D. in Nursing — within the definition of “professional degree” programs.

### **Post-baccalaureate Nursing Meets Department’s Criteria for “Professional Degrees”**

The Department’s proposal defines a “professional degree” as one that: signifies completion of academic requirements to begin practice in a profession; requires professional judgment and clinical competence beyond the baccalaureate level; and leads to positions that require licensure. Post-baccalaureate nursing programs unequivocally meet these criteria for “professional degree.” These programs provide advanced didactic coursework, clinical preparation, specialized knowledge, and extensive professional judgment education required for nurses to fulfill essential roles in today’s health care system. Post-baccalaureate graduates practice as advanced practice registered nurses, primary care providers, faculty, educators, researchers, scientists, and clinical leaders.

Under the [APRN Consensus Model](#), all states require post-baccalaureate education as nurse practitioners, certified nurse-midwives, clinical nurse specialists, and certified registered nurse anesthetists. This requirement establishes a national standard for advanced practice education, exactly the type of licensure-linked rigor the Department associates with “professional degree” programs. Post-baccalaureate nursing programs are also aligned with federal classification frameworks, falling within the same “Health Professions and Related Clinical Sciences” Classification of Instructional Programs (CIP) codes series (51) as other degree programs already designated as professional. The Department’s own CIP/SOC crosswalk links these nursing degrees to regulated clinical occupations not accessible to baccalaureate-prepared nurses. Recognizing these programs as “professional degrees” simply aligns loan regulation with existing federal taxonomy and licensure policy.

### **Insufficient Post- Baccalaureate Loan Limits Undermine Advanced Practice, Nursing Education and Clinical Leadership**

The proposed exclusion of post-baccalaureate nursing programs from the definition of “professional degree” would impose federal loan limits that are fundamentally misaligned with the actual cost of advanced nursing education. Capping federal borrowing at \$20,500 annually and at an aggregate limit of \$100,000, falls far below the actual cost of post-baccalaureate nursing education. National Center for Education Statistics data show graduate nursing education averages more than \$33,000 per year, with [recent studies](#) placing the average cost closer to \$38,542 nearly double the proposed cap. This gap is consequential: 69% of nursing students depend on federal loans to pursue post-baccalaureate degrees, and average educational debt for nurse anesthetists already exceeds \$200,000.

Data from the American Association of Colleges of Nursing (AACN) reinforces the magnitude of this impact. Seventy-eight percent of nursing school deans anticipate enrollment declines under the proposed caps, 82% of students report the annual cap will harm their ability to finance necessary post-baccalaureate education, and 81% report the lifetime cap as a barrier to pursuing an advanced degree. These constraints threaten nurse faculty pathways at a time when our country is seeing an ongoing nursing shortage and as we contend with an aging population. National standards require nursing program directors to hold doctoral degrees and faculty to possess advanced nursing education. Restricting access to affordable financing for post-baccalaureate degrees will intensify ongoing faculty shortages, further limit schools’ ability to expand enrollment, and constrict pathways for doctoral-prepared faculty and researchers essential to sustaining nursing education.

### **Exclusion Would Worsen Workforce Shortages and Threaten Access to Care**

These educational pressures coincide with escalating clinical workforce shortages. The [Bureau of Labor Statistics](#) projects 35% growth in APRN roles from 2024 to 2032, requiring approximately 32,700 new APRNs annually to meet demand. The Health Resources and Services Administration reports that as of January 2026, approximately 92 million Americans live in a primary care Health Professional Shortage Area. Rural and underserved communities are disproportionately affected: CRNAs provide more than 80% of anesthesia services in rural counties, and over half of U.S. counties have no obstetric physician, a gap certified nurse midwives help to fill.

These shortages result in longer wait times, delayed diagnoses, increased emergency department utilization, and higher costs for families and health systems. Failure to expand the definition of a “professional degree” would exacerbate these workforce gaps by suppressing enrollment in APRN, nurse educator, and other advanced programs, further constricting clinical capacity. The resulting disruption spans the full continuum of nursing education and practice, affecting APRNs, faculty, leaders, researchers and frontline clinicians.

Excluding post-baccalaureate nursing programs from the “professional degree” classification represents a significant and unnecessary threat to the nation’s health care workforce. This policy change would impede nurses seeking advanced education and licensure and compromise access to high-quality, equitable care for the patients and communities who depend on them. Aligning loan eligibility with the cost of nursing education is essential to sustaining a strong, highly prepared nursing workforce and supporting the health system’s ability to meet rising demand.

**New Loan Limits Undermine Nation’s Capacity to Meet Accelerating Health-Care Demand**  
APRNs provide a growing share of primary care, behavioral health, maternal health, anesthesia, and other essential services. The federal regulatory framework increasingly relies on advanced practice nursing to stabilize workforce capacity. The administration's \$50 billion Rural Health Transformation grant program under the H.R.1 incentivizes APRN utilization by rewarding states that expand nurse practitioner scope of practice. Filling widening provider gaps, especially in underserved communities and among Medicare beneficiaries, depends on APRNs as a core strategy to improve access. Excluding nursing from the “professional degree” designation directly undermines this federal investment and threatens access to care in rural communities most reliant on APRNs for care.

**The Department Possesses Statutory Flexibility to Include Nursing**

The Department has clear statutory authority to include post-baccalaureate nursing degrees within its “professional degree” definition. Congress referenced a regulatory definition that explicitly allows inclusion beyond the examples listed, granting the Department discretion to adopt a broader definition reflective of modern health care practice. Including post-baccalaureate nursing degree programs is fully consistent with statutory language, longstanding Departmental practice, the educational and licensure requirements of advanced nursing roles and national workforce priorities that depend on a robust pathway of highly educated nurses.

**Conclusion**

Post-baccalaureate nursing degree programs — MSN, DNP, and Ph.D.— unambiguously meet the Department’s standards for professional education. These programs are licensure-linked, clinically rigorous and foundational to the preparation of APRNs, faculty, researchers and nurse leaders. Failing to include these programs in the definition of “professional degree” would contradict federal regulatory frameworks, destabilize the academic infrastructure preparing the future workforce and weaken national capacity to meet accelerating health care demand. We urge the Department to explicitly include post-baccalaureate nursing degree programs within the definition of “professional degree” programs. The Department possesses clear statutory authority to implement this inclusion within its regulatory definition. Clear inclusion will ensure regulatory coherence, avoid unintended consequences in implementation and provide institutions and students with the certainty needed to sustain advanced nursing education pathways.

Given the significant pressures facing the health care workforce, robust access to post-baccalaureate nursing education is essential to sustaining the nation’s clinical and academic capacity and ensuring a stable, highly prepared workforce capable of succeeding in the rapidly evolving health care landscape.

Thank you for considering these comments. If you have any questions, please contact Stacey Chappell, AONL’s senior director, advocacy and external communications, at [schappell@aha.org](mailto:schappell@aha.org).

Sincerely,



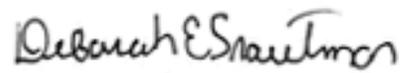
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