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2016-17 Governor's Budget - Nursing, Board of

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<http://mn.gov/health-licensing-boards/nursing/>

AT A GLANCE

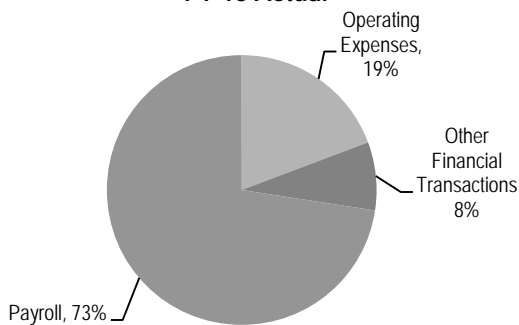
- 94,000 Registered Nurses
- 24,000 Licensed Practical Nurses
- 6,500 Advanced Practice Registered Nurses
- 14,500 Public Health Nurse Registrations
- 1,800 jurisdictional complaints
- 550 Drug Enforcement Administration verifications
- 68 nursing education programs

PURPOSE

The Board of Nursing's purpose is to protect the health, safety and welfare of the public in their receipt of nursing services. The Board carries out its mission by regulating nursing education, licensure and practice. These functions contribute to the statewide outcomes that **all Minnesotans have optimal health and people in Minnesota are safe**. The agency strives for **efficient and accountable government services** through innovation, technology, and internal controls.

BUDGET

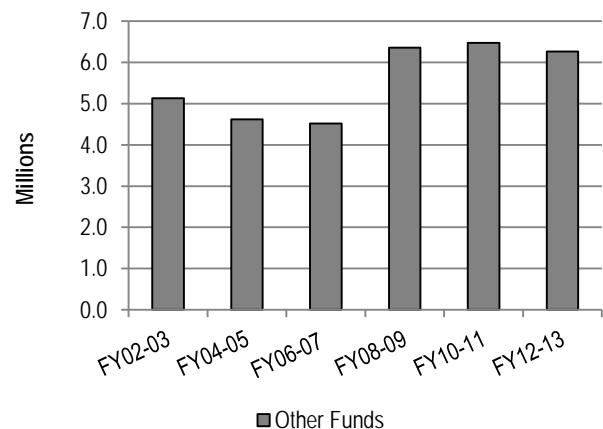
**Spending by Category
FY 13 Actual**



BPAS

Source:

Historical Spending



Source: Consolidated Fund Statement

The Board is funded by licensure fees. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount sufficient to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as salaries, rent, costs associated with disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation. Fees have not been raised since 2001. The Board receives no general fund dollars.

In addition to Board operations, licensure fees fund activities that support multiple boards and/or other agencies. Some of these are: the Administrative Services Unit (interboard), Health Professionals Services Program (interboard), HIV, HBV and HCV Prevention Program (Department of Health), Prescription Monitoring Program (Pharmacy Board), Office of the Attorney General for legal services and the Voluntary Healthcare Provider Program (interboard).

STRATEGIES

The Board of Nursing holds nurses accountable to legal, ethical, and professional standards. The Board achieves its mission of public protection by defining these standards and issuing licenses to practice nursing. Once a license is issued, the Board monitors licensees' compliance to state laws and takes action against the licenses of those nurses who have exhibited unsafe nursing practice and who present a risk of harm to the public.

The Board contributes to the statewide outcome that **people in Minnesota are safe** by:

1. Ensuring an ethical and competent nursing workforce by reviewing credentials and providing a legally defensible nurse license examination. The Board of Nursing licenses registered nurses, licensed practical nurses, advanced practice registered nurses, and public health nurses to ensure that the individuals who practice nursing in Minnesota have the requisite education, competence, and ethical character to practice nursing safely and effectively.
2. Establishing and conducting a complaint investigation process that is expedient, just and commensurate with the perceived risk to public safety. The Board investigates complaints and takes action against nurses who violate the Nurse Practice Act. This action includes removing nurses from practice who are a risk to patient safety and monitoring nurses whose practice requires remediation and oversight to ensure public safety.
3. Upholding nursing education standards through consultation and survey. The Board monitors program graduation pass/fail rates on the national nurse licensure examination; facilitates innovative approaches to address nursing workforce and nursing faculty shortages; provides consultation to nursing education programs regarding national nurse licensure examination (NCLEX®) pass rates; conducts research to promote a safe, competent and sufficient nursing workforce; and advises prospective nursing students regarding educational tracks and scholarships.
4. Analyzing and disseminating data for use in regulatory decisions. The Board provides employers and the public with verification of a nurse's authority to practice. Additionally, data is submitted to required national and federal databases and other county and state government agencies. The Board also participates in the collection of nursing workforce data to inform decision making related to educational planning, workforce development and emergency preparedness.
5. Collaborating in statewide initiatives on nursing practice, education and patient safety. The Board promotes standards of safe nursing practice by interpreting relevant laws and rules. The Board participates in nursing practice forums with nursing organizations and other state agencies to establish nursing performance guidelines for safe nursing practice so that employers and consumers can make informed decisions regarding the performance of nursing services.

RESULTS

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Licenses issued within 24 hours of meeting all requirements	9,605	10,298	FY 2012 & FY 2013
Quality	Public availability of data on nursing licensure and authority to practice: <ul style="list-style-type: none"> • Online renewal display in real time • Online verifications of license 	45,000 448,000	51,000 560,000	FY 2012 & FY 2013
Quantity	Percent of all licensure services performed online	88%	90%	FY 2012 & FY 2013
Quality	Complaint resolution cycle: <ul style="list-style-type: none"> • Average number of days to resolve complaints • Number of cases older than 180 days 	203 19	204 10	FY 2012 & FY 2013
Quantity	Automatic verification service use	24,000	27,000	FY2012 & FY 2013

Minnesota Statutes sections 148.171-148.285 (<https://www.revisor.mn.gov/statutes/?id=148.171>) provides the Board of Nursing with legal authority to regulate nursing practice for the purpose of public protection. Chapter 214 prescribes further authority related to investigations and discipline procedures of the Board and other health-related licensing boards. Chapters 13 (Government Data Practices), 14 (Administrative Procedures) and 15 (State Agencies in General) all provide guidance to the Board's operations.

Expenditures By Fund

	Actual		Actual FY14	Estimate FY15	Forecast Base		Governor's Recommendation	
	FY12	FY13			FY16	FY17	FY16	FY17
1201 - Health Related Boards	2,884	3,377	3,422	4,495	4,169	4,169	4,224	4,278
2000 - Restricted Misc Special Rev	0	0	0	11	10	10	10	10
Total	2,884	3,377	3,422	4,505	4,179	4,179	4,234	4,288
<i>Biennial Change</i>				1,667		430		594
<i>Biennial % Change</i>				27		5		7
<i>Governor's Change from Base</i>								164
<i>Governor's % Change from Base</i>								2

Expenditures by Program

Program: Nursing Board of	2,884	3,377	3,422	4,505	4,179	4,179	4,234	4,288
Total	2,884	3,377	3,422	4,505	4,179	4,179	4,234	4,288

Expenditures by Category

Compensation	2,257	2,444	2,542	3,011	3,061	3,077	3,074	3,144
Operating Expenses	622	654	870	1,493	1,117	1,101	1,159	1,143
Other Financial Transactions	5	278	9	1	1	1	1	1
Capital Outlay-Real Property	0							
Total	2,884	3,377	3,422	4,505	4,179	4,179	4,234	4,288

Full-Time Equivalent

	31.0	32.5	33.0	33.0	33.0	33.0	33.0	33.0
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(Dollars in Thousands)

1201 - Health Related Boards

	Actual		Actual FY 14	Estimate FY15	Forecast Base		Governor's Recommendation	
	FY12	FY 13			FY16	FY17	FY16	FY17
Balance Forward In		687		215				
Direct Appropriation	3,545	3,668	3,637	4,355	4,134	4,134	4,189	4,243
Open Appropriation	25	7	0	0	35	35	35	35
Net Transfers		(2)		(75)				
Cancellations		983						
Expenditures	2,884	3,377	3,422	4,495	4,169	4,169	4,224	4,278
Balance Forward Out	686		215					
<i>Biennial Change in Expenditures</i>				1,656		421		585
<i>Biennial % Change in Expenditures</i>				26		5		7
<i>Gov's Exp Change from Base</i>								164
<i>Gov's Exp % Change from Base</i>								2
FTEs	31.0	32.5	33.0	33.0	33.0	33.0	33.0	33.0

2000 - Restricted Misc Special Rev

	Actual		Actual FY 14	Estimate FY15	Forecast Base		Governor's Recommendation	
	FY12	FY 13			FY16	FY17	FY16	FY17
Balance Forward In				1				
Receipts	0	0	1	10	10	10	10	10
Expenditures	0	0	0	11	10	10	10	10
Balance Forward Out			1					
<i>Biennial Change in Expenditures</i>				11		9		9
<i>Biennial % Change in Expenditures</i>						88		88
<i>Gov's Exp Change from Base</i>								0
<i>Gov's Exp % Change from Base</i>								0

Nursing, Board of

FY16-17 Biennial Budget Change Item

Change Item Title: Operating Adjustment

Fiscal Impact (\$000s)	FY 2016	FY 2017	FY 2018	FY 2019
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Health Related Boards Fund				
Expenditures	55	109	109	109
Revenues	0	0	0	0
Net Fiscal Impact = (Expenditures – Revenues)	55	109	109	109
FTEs	0	0	0	0

Recommendation:

The Governor recommends additional funding for compensation related costs associated with the delivery of agency services. This amount represents an annual increase of 1.8% for General Fund compensation costs.

Rationale/Background:

Each year, compensation costs rise due to labor contract settlements, and changes in employer-paid contributions for insurance, FICA, Medicare, retirement, and other factors. Absorbing this increase in compensation costs within existing agency base appropriations results in reduced staffing and/or reduced non-compensation spending.

Proposal:

The Governor recommends increasing agencies' general fund budgets for employee wage and benefit costs by 1.8% per year for FY 2016-17. Agencies were instructed to include a 1.8% increase to total compensation each year in their base budgets, based upon the compound annual compensation spending rate increase per FTE over the last ten years for executive branch employees. This recommendation is intended to allow agencies to maintain their current level of agency operations.

For non-General Fund direct appropriated funds, the Governor's budget recommendations also include an adjustment of 1.8% per year, where the amount can be supported by the source of revenue.

Results:

This proposal is intended to allow agencies to continue to provide current levels of service and information to the public.

Statutory Change(s):

N.A.