Nurse Licensure Compact Issue in Minnesota Frequently Asked Questions

Issue

Currently 24 states participate in the Nurse Licensure Compact (NLC), which allows a registered or practical nurse to have one license in his or her state of residence and to practice both physically and electronically in other NLC-participating states. All Minnesota Border States have joined the NLC. This licensing arrangement facilitates the emerging field of e-health to improve or enable health care, supports continuity of care, and allows flexibility for nurses to serve the needs of their patients both regionally and nationally.

Coalition Position

Coalition members urge support for participation in the NLC to allow Minnesota nurses the flexibility to more easily serve patients' needs both regionally and nationally.

Background

The NLC is a legal agreement that recognizes nurse licensure in good standing in all states that have adopted the compact. **NLC does not replace the state's right to regulate nursing practice within its borders.** Currently, all states bordering Minnesota are part of the compact, and coalition members identify significant benefits from NLC adoption:

- *Safer, higher-quality medical care for patients:* NLC ensures better access to continuing care for chronically-ill patients who need care-management services that often can be performed across state lines via the telephone or Internet. As technology and health care reform models such as medical home move forward, the NLC will help provide clarity around newer mediums for providing care such as tele-nursing or nurse help lines. We recognize that we will not be treating patients the same in the future as we are today and we need to be prepared to meet the needs of our patients and evolve to accommodate new models of care.
- *Greater job satisfaction and flexibility for nurses*: NLC allows nurses to provide continuity of care for patients who are leaving the hospital or clinic; it also increases a nurse's career flexibility and reduces administrative costs for holding multiple state licenses.

All of our systems provide care to patients in multiple states and we are all working to provide our patients with the best health care. The NLC helps breakdown state boundaries that are not relevant to providing patients with safe, quality care.

NOTE: The NLC does <u>not</u> impact the statutory authority at state or federal levels for collective bargaining. The NLC does not enable strikebreaking or interfere with state labor laws. In the 12-year history of the NLC, there has not been a reported situation where NLC nurses used their privilege to practice to go into another NLC state where there was a strike.

Question	Answer
Does NLC threaten patient safety and the quality of care in Minnesota?	 The NLC would improve patient safety, access to and quality of care in Minnesota by eliminating geography as a barrier to meeting patients' needs across the health care continuum. The NLC: Enables continuing care to non-resident patients from party states who receive initial medical treatment in Minnesota. Allows nurses from border communities to provide care across state lines, improving access to care in rural areas for patients suffering from chronic illness and other health problems.
Does NLC supersede existing state law and removes the state's ability for oversight, evaluation or change of existing policies?	The NLC does not limit a state's ability to establish or change their own rules and policies governing nurse practice laws. Under the Compact, <u>states maintain their authority</u> to hold nurses accountable for meeting all state practice laws for the state in which the patient is located at the time care is given. Every nurse practicing in a party state <u>must comply with the practice laws of the state is state in which the patient is located at the time care is rendered.</u>
Would adopting the NLC result in significant financial loss for the state of Minnesota due the Compact's annual maintenance fee and loss of revenue from non- resident licensure fees?	The NLC's benefits of increasing access to and improving quality of patient care in Minnesota far outweigh the costs associated with its implementation. The annual maintenance fee to the National Council of States Boards of Nursing for Compact States is \$3,000. The Minnesota Board of Nursing testified in favor of the NLC in 2011. The MN Board of Nursing does NOT anticipate significant revenue change resulting from the loss of non-resident licensure fees.
Does the NLC contravene existing labor policies, impeding union activity and nurses' right to organize?	Since going into effect 12 years ago, <u>there has not been a single reported instance of NLC nurses using their privilege to practice to go into another NLC state where there was a strike</u> . The Compact does NOT impact statutory authority at state or federal levels for collective bargaining, and does NOT enable strikebreaking or interfere with state labor laws.
Does the NLC threaten individual nurses' ability to practice?	 The NLC improves nurse mobility in party states and eliminates additional license fees for nurses that practice in multiple states. The NLC ensures nurses in party states are bound only by their scope of practice, medical training and the needs of their patients – not geographic boundaries.