# House Research

# - Bill Summary :

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# **Article 1: Minnesota Health Policy Commission**

# **Overview**

Article 1 of this bill establishes a Minnesota Health Policy Commission to develop recommendations to improve health care and health outcomes at lower cost.

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- Minnesota Health Policy Commission. Adds § 62J.90. Establishes a Minnesota Health Policy Commission, specifies membership, lists duties, and provides for terms, compensation, staffing, access to information, governance, selection of members, meetings, conflicts of interest, and expiration.
  - **Subd. 1. Establishment; purpose.** Establishes a Minnesota Health Policy Commission to provide recommendations on steps to take to improve health care and health outcomes at lower cost.
  - **Subd. 2. Commission membership.** Specifies membership of commission, including 11 voting members and 4 nonvoting legislative liaison members.

**Subd. 3. Duties.** Lists duties for the commission:

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- comparing health care costs and public health care program spending to that of other states, and to costs and spending in previous years;
- identifying factors that contribute to Minnesota's health care costs and public health care program spending;

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- monitoring efforts to reform the health care delivery and payment system; and
- recommending reforms to the health care system.
- **Subd. 4. Report.** By June 15 of each year, requires the commission to submit a report listing recommended changes on health care policy and finance to the chairs and ranking minority members of the legislative committees with jurisdiction over health care.
- **Subd. 5. Staff.** Allows the commission to hire a director and other staff, and to contract with private entities for services to allow the commission to carry out its duties.
- **Subd. 6. Access to information.** Allows the commission to obtain any data or information from a state department or agency, as necessary for the commission to carry out its duties. Prohibits private data on individuals, health insurance companies, and employer-sponsored health plans from being disclosed unless the data is deidentified.
- **Subd. 7. Terms; vacancies; compensation.** Allows public members to serve fouryear terms and not more than two consecutive terms, and allows legislative liaison members to serve as long as the member or appointing authority holds office. Provides that removal of members, filling of vacancies, and public member compensation and expenses are governed by section 15.059.
- **Subd. 8. Chairs; officers.** Directs the commissioner to elect a chair annually and other officers as necessary.
- **Subd. 9. Selection of members; advisory council.** Establishes a process for selecting members of the commission, using the Legislative Coordinating Commission and an advisory council.
- **Subd. 10. Meetings.** Requires the commission to meet at least four times a year, and provides that commission meetings are subject to the Open Meeting Law in chapter 13D.
- **Subd. 11. Conflict of interest.** Prohibits a commission member from participating in or voting on a commission decision relating to an organization in which the member has a direct or indirect financial interest.
  - **Subd. 12. Expiration.** Makes the commission expire June 15, 2034.
- 2 **First appointments; first meeting.** Establishes timelines for the advisory council to make initial candidate recommendations, and for appointments of initial commission members. Provides for initial terms. Directs the director of the LCC to convene the first meeting by June 15, 2019, and act as chair until a chair is elected.
- 3 **Appropriation.** Makes a blank appropriation from the general fund to the Minnesota Health Policy Commission to fund its operations.

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# **Article 2: Nurse Licensure Compact**

# Overview

Article 2 establishes the enhanced Nurse Licensure Compact, which allows a nurse licensed in the nurse's home state or state of residency (if the state is part of the compact) to practice in other member states. States must adopt the compact through legislation in order to be members. This bill would allow Minnesota to become a member of the Nurse Licensure Compact.

Nurse licensure compact. Proposes coding for § 148.2855. Establishes and enacts the Nurse Licensure Compact.

#### **Article 1: Definitions**

Defines the following terms:

"Adverse action," "Alternative program," "Coordinated licensure information system," "Current significant investigative information," "Encumbrance," "Home state," "Licensing board," "Multistate license," "Multistate licensure privilege," "Nurse," "Party state," "Remote state," "Single-state license," "State," and "State practice laws."

### **Article 2: General Provisions and Jurisdiction**

- (a) Requires that a multistate license to practice nursing issued by a home state be recognized by states that are parties to the nurse licensure compact.
- (b) Requires a state to implement procedures for considering the criminal history records, including fingerprints or other biometric information, of applicants for initial multistate license or licensure by endorsement.
- (c) Lists the requirements and criteria that an applicant must be required to meet for a multistate license in the home state.
- (d) Allows a party state to take disciplinary action against a nurse's multistate licensure privileges. Requires a state that takes such action to notify the administrator of the coordinated licensure system; requires the administrator to promptly notify the home state of any action taken by remote states.
- (e) Requires a nurse practicing in a party state to comply with practice laws of the state in which the client is located at the time the services are provided. Specifies that the practice of nursing is not limited to patient care, and that the practice of nursing will subject the nurse to the jurisdiction of the nurse licensure board, courts, and the laws of the state in which the client is located.
- (f) Specifies that individuals not residing in a party state can continue to apply for single-state licensure as provided under the state's laws. Specifies that a license granted to these

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individuals does not automatically permit the individual to practice in any other party state unless that state agrees to allow the individual the right to practice.

(g) Authorizes a nurse holding a home state multistate license when the compact is effective to retain and renew the multistate license by the nurse's then-current home state under specified circumstances.

# **Article 3: Applications for Licensure in a Party State**

- (a) Requires the party state licensing board to determine if the multistate license applicant has ever held a license in another state and whether any other state took any adverse actions against the applicant.
- (b) Allows a nurse to hold a multistate license issued by the home state in only one party state at a time.
- (c) Allows a nurse planning to change primary residence to apply for licensure in the new home state before the change; specifies that a new license will not be issued until the nurse provides evidence of the change in residence.
- (d) Specifies that if a nurse changes primary residence by moving from a party state to a nonparty state, the multistate license issued by the former home state converts to a singlestate license valid only in the former home state.

# **Article 4: Additional Authorities Invested in Party State Licensing Boards**

- (a) Authorizes the state licensing board to:
- (1) take adverse action against a nurse's multistate licensure privilege to practice;
- (2) issue cease and desist orders or impose encumbrance on a nurse's authority to practice;
- (3) complete pending investigations on a nurse who changes primary residence during an investigation;
- (4) issue subpoenas for hearings and investigations that require witnesses and evidence;
- (5) obtain and submit biometric information to the FBI for criminal background checks and use the information to make licensure decisions;
- (6) recover the costs of investigations and disposition of cases resulting from any adverse action taken, if permitted under state law; and
- (7) take adverse action based on factual findings of a remote state.
- (b) Specifies that if adverse action is taken by the home state against a nurse's multistate license, the nurse's privilege to practice in all other party states shall be deactivated until encumbrances have been removed from the multistate license.
- (c) Specifies that the compact does not override a party state's decision that participation in an alternative program may be used in lieu of adverse action; requires the home state licensing board to deactivate the multistate licensure privilege under the multistate license for the duration of the nurse's participation in an alternative program.

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# **Article 5: Coordinated Licensure Information System and Exchange of Information**

- (a) Requires all party states to participate in a coordinated nurse licensure information system.
- (b) Requires the commission to formulate necessary and proper procedures for the identification, collection, and exchange of information under this compact.
- (c) Requires all party state licensing boards to report to the coordinated licensure information system all adverse actions, current investigative information, denials of applications, and the reasons for the denials to the coordinated licensure information system.
- (d) Specifies that current investigative information and participation in nonpublic or confidential alternative programs must only be transmitted through the coordinated system to party states.
- (e) Allows party state licensing boards to designate information that may not be shared with nonparty states or disclosed to other entities without permission of the contributing state.
- (f) Specifies that personally identifiable information obtained by a party state's licensing board may not be shared with nonparty states or disclosed to other entities, except to the extent permitted under the laws of the contributing state.
- (g) Requires any information in the system that is later expunged by the laws of the party state contributing the information to be expunged from the coordinated licensure system.
- (h) Requires the compact administrator of each party state to provide a uniform data set to the compact administrators of the other party states. Specifies the data that must be included.
- (i) Requires the compact administrator of a party state to provide all investigative documents and information requested by another party state.

# Article 6: Establishment of the Interstate Commission of **Nurse Licensure Compact Administrators**

- (a) Creates and establishes the Interstate Commission of Nurse Licensure Compact Administrators.
- (b) Establishes the commission's membership, voting, and meetings.
- (c) Authorizes the commission to establish bylaws or rules to govern its conduct, as necessary to carry out the purposes and exercise the powers of the compact.
- (d) Requires the commission to publish its bylaws and rules in a convenient form on the commission's Web site.
- (e) Requires the commission to maintain its financial records in accordance with its bylaws.
- (f) Requires the commission to meet and take actions consistent with the compact and bylaws.
- (g) Lists the commission's powers.

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- (h) Outlines the financing of the commission.
- (i) Outlines provisions related to qualified immunity, defense, and indemnification.

# **Article 7: Rulemaking**

Establishes the rulemaking powers of the interstate commission.

# **Article 8: Oversight, Dispute Resolution, and Enforcement**

Establishes oversight, dispute resolution, and enforcement authority provisions related to the compact and the commission.

# Article 9: Effective Date, Withdrawal, and Amendment

- (a) Provides that the compact will become effective for each state when enacted by that state.
- (b) Requires each party state to continue to recognize a nurse's multistate licensure privilege to practice issued under the prior Nurse Licensure compact until the state has withdrawn from the prior compact.
- (c) Allows any party state to withdraw from the compact upon repeal. Specifies that withdrawal will not become effective until six months after notice is given to the executive heads of all other party states.
- (d) Specifies that withdrawal does not affect the validity or applicability of any adverse action taken by a licensing board of a party state prior to the withdrawal.
- (e) Specifies that the compact does not invalidate or prevent any nurse license agreement or other arrangement between a party state and a nonparty state made according to other provisions of this compact.
- (f) Allows the compact to be amended by the party states. Specifies that an amendment does not become binding upon the party states until it is enacted into law of all party states.

# **Article 10: Construction and Severability**

Allows representatives of nonparty states to participate in the activities of the commission on a nonvoting basis. States that the compact will be liberally construed and that the provisions will be severable. Provides that if the compact is held to be contrary to the constitution of any party state, the compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected for all severable matters.

- 2 **Application of nurse licensure compact to existing laws.** Proposes coding for § 148.2856. Clarifies the applicability of the Nurse Licensure Compact to existing nurse licensure laws.
- 3 **Miscellaneous provisions.** Proposes coding for § 148.2858. Specifies that for purposes of the compact, "head of the nurse licensing board" means the executive director of the Board

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of Nursing. Authorizes the Board of Nursing to recover costs of investigating allegations against multistate licensees.

- **Appropriation.** Appropriates money from the state government special revenue fund to the Board of Nursing to implement the compact.
- **Effective date.** Makes sections 1 to 3 effective upon implementation of the coordinated licensure information system defined in section 1, article 6, but no sooner than July 1, 2019.