Nurse Licensure Compact: Nuts & Bolts
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Nurse Licensure Compact (NLC) 2000-2018

Nuts & Bolts
Most important & fundamental pieces that fasten compact parts together
1. **New** legal structure: interstate compact agencies are “supra state” and “sub federal” which necessitate different governmental structure

- Most legislators & other governmental officials are unfamiliar with compacts *quasi* governmental structure
- “Courts typically treat a compact agency like a state agency, rather than hold the compact agency is a state agency” (Jeffrey Litwak, 2018 Interstate Compact Law: Cases & Materials)
- First compact adopted 1783; 235 years and 200 compacts later, many still state “it will never work”

**What works:** Education and messaging that communicates how the an unusual agency works into the familiar governmental structure.
2. Identical “sameness”: Compact enacted by the legislature, becomes law & the “contract” may not be amended, modified or otherwise altered without the consent of all parties

- The original NLC model act was originally adopted in 1997 & enacted in 2000
- The enhanced compact language was adopted in 2015 or 18 years later & enacted January 2018
- Unlike model laws, which need not to be identical, interstate compacts between states must be adopted verbatim, thus they offer great uniformity and stability, but limited flexibility

**What works**: Vigilant legal review to ensure there are not any material differences in the proposed language when introduced. The NLC has on occasion determined that the language adopted by the state was not binding and therefore not recognized by the other party states.
3. **Portability procedures** - Licensees need only one multi state license which gives them a privilege to practice in other states that have implemented the NLC

- Applicants who meet the Uniform Licensure Requirements (ULR’s) and do not have any disqualifying event, are eligible for a multi state license
- In general, no additional fees, paperwork or review is needed

**What works:** Under the NLC, currently licensed nurses moving from one state to another party state may continue to work on the multi state privilege until the new license issued. Nurses do not need stop work when moving to a new primary state of residence.

*One multistate license issued locally & recognized nationally*
4. **IT**: Data system fastens together information between all states/territories

- Nursys is a national data base that is free & allows employers & public verify multistate and single state licenses and privileges to practice
- Multistate licensure privilege means the nurse has the authority to practice in any compact party state

**What works:** Nurses & Human Resource Staff need non technical explanations of the multistate compact requirements i.e. webinars, videos & educational material such as FAQ’s

Nurse leaders also need assistance & education on how to validate licenses from home state or primary state of residence.
5. **IT**: Nursys data system enhances sharing of applicant and licensee records & disciplinary histories among compact states when endorsing into new primary state of residence

**What works**: Nurses who declare a new primary state of residence in another party state apply for licensure when the person holds privileges only granted to citizens of the new state; i.e. drivers license, voter registration, payment of federal income taxes

*NLC does not alter the scope of practice provision of state practice acts*
6. **Rulemaking**: Interstate compact rules are unique-viewed as independent & separate from state or federal rulemaking processes

- NLC has modeled the process to mirror APA’s model acts
- The intent of rulemaking is to assure due process primarily obtained through notice & comment procedures

**What works:** No matter how lawful, technically sound & reasonable the rule may be, the NLC will not adopt rule as law if the public or commissioners do not want it.
8. **ULR’s**: Harmonizing of state licensure standards- Uniform Licensure Requirements (ULR)

- Builds confidence in the qualifications of those who are practicing nursing in multiple states
- ULR’s: meet state qualifications; eligible graduate of approved pre-licensure program; foreign applicants pass English proficiency exam, successfully pass NCLEX, eligible/active unencumbered license, finger prints/biometric data for state/FBI history, no felony history, no misdemeanor related practice of nursing, not currently enrolled ATD, self disclosure if in ATD, valid SS number

**What works:** 31 states have enacted the NLC. Licensure portability benefits consumers of healthcare through access to care when more states enact the compact.
9. **Enforcement**: Authority for disciplinary action across state lines

- Multistate license provides privilege to practice in all party states. Such provisions provide for a “stronger and more efficient state board enforcement in the context of modern cross-border practice in which state lines are often blurred.”  
  
  UAA, supra note 60, at 1-2

**What works:** Member states coordinate and communicate information about licensee conduct. Party states ensure disciplinary action may be taken against the license or the privilege to practice. Adverse actions are reported to Nursys within fifteen days on date action was taken.
Summary: Nine Nuts & Bolts

• The NLC journey will continue to create new ways to “fasten things together”

• Thank you!

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