Interstate Compacts for Nurses

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What is an interstate compact?

- A statutory agreement between two or more states established for the purpose of remedying a particular problem of multistate concern
- A contract between two or more party states
  - Signatories: state legislatures and governors
  - Nebraska is a member of 31 interstate compacts
Mutual Recognition Model of Licensure

The APRN Compact is modeled after the driver’s license compact which follows the mutual recognition model of licensure.

How “Mutual Recognition” Works

• Ex. NE driver in SD
  – SD speed limit 70mph
  – NE driver goes 90mph, the average speed limit in NE on a similar road, and gets pulled over.
  – Which rules of the road are followed?
  – Which license is the action taken against?
enhanced Nurse Licensure Compact (eNLC)

- The Nurse Licensure Compact is an interstate compact.
- It allows an RN/LPN to have one multistate license (in primary state of residency)
- This permits the RN/LPN to practice in other member states (both physically and via telecommunications) subject to each state’s practice laws

What is the NLC?
Nebraska’s History

- Nebraska joined the original NLC in 2001
- 25 states participated in the original NLC
- eNLC Enhancements:
  - Uniform licensure requirements
  - Federal CBC requirements
  - Operational improvements

The eNLC Today
The 2018 Playing Field

**Legislative Update**
- First time filing:
  - Kansas
  - Michigan
  - Indiana (withdrawn)
  - Vermont
- Continued Efforts:
  - New Jersey
  - Massachusetts
  - Illinois
- Legislative Hurdles:
  - Union opposition
  - Workforce data
  - Medical opposition

Advanced Practice Registered Nurse Compact
(APRN Compact)
What is the APRN Compact?

- The APRN Compact is an interstate compact.
  - It allows an APRN to have one multistate license (in primary state of residency)
  - This permits the APRN to practice in other member states (both physically and via telecommunications) subject to each state’s practice laws

APRN Compact: The Historical Perspective

- **2000-2002**: NCSBN Adoption of APRN Compact
  - Major weakness: APRN practice at the time varied greatly from state to state
    - Ex. Title: APN, ARNP, APNP, APRN-P
  - NCSBN and stakeholders decided to create uniform practice guidelines for aprns and revise the compact once states were more uniform
- **2005-2008**: Creation and adoption of Consensus Model for APRN Regulation
  - Stakeholders: LACE, professional organizations, regulators
### APRN Requirements vs. Consensus Model

<table>
<thead>
<tr>
<th>APRN Requirements</th>
<th>Consensus Model</th>
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<tbody>
<tr>
<td><strong>Title</strong></td>
<td>Advanced practice registered nurse (APRN)</td>
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| **Roles Recognized** | Certified registered nurse anesthetist (CRNA)  
|                   | Certified nurse-midwife (CNM)  
|                   | Clinical nurse specialist (CNS)  
|                   | Certified nurse practitioner (CNP) |
| **Education**     | Graduate degree or post-graduate certificate |
| **Certification** | Maintenance of national Certification |
| **Licensure**     | State grants APRN “license” separate from RN license |
| **Practice Autonomy** | Independent |
| **Prescriptive Authority** | Independent: pharmacologic and non-pharmacologic |

### APRN Compact *revamped*

- Adopted in 2015 by NCSBN membership
- First introduced in state legislatures in 2016
- Elements of the APRN Compact
  - APRN Consensus Model: model language and rules
  - Governing structure: Interstate Commission
  - Public Safety Features
**APRN Compact: Consensus Model Captured in Statutory Provisions**

- **Independent Practice**
  - “An APRN issued a multistate license is authorized to assume responsibility and accountability for patient care independent of a supervisory or collaborative relationship with a physician. This authority may be exercised in the home state and in any remote state in which the APRN exercises a multistate licensure privilege”

- **Independent Prescribing**
  - Compact addresses prescriptive authority for non-controlled substances only
    - “Multistate license APRNs may prescribe non-controlled substances”
  - Prescriptive authority for controlled substances will be determined by the party state laws where care is taking place

- **Title & Licensure**

**Rulemaking:**

Remaining APRN Consensus Model Elements

- **Roles**
  - Certified Nurse Practitioner (CNP)
  - Clinical Nurse Specialist (CNS)
  - Certified Registered Nurse Anesthetist (CRNA)
  - Clinical Nurse Midwife (CNM)

- **Education**
  - Graduate or post-graduate level

- **Certification**
  - Maintain national certification
APRN Compact Governing Structure

- Interstate Commission of APRN Compact Administrators
  - “Each party state shall have and be limited to one administrator. The head of the state licensing board or designee shall be the administrator of this Compact for each party state”
  - Each commissioner is entitled to one vote
- Rulemaking authority: the commission shall govern the rulemaking authority
  - Rules have the force and effect of law
  - Authority is not limitless:
    - Art. III (B) By rule, the Commission shall adopt the APRN Uniform Licensure Requirements (“ULRs”). The ULRs shall provide the minimum requirements for APRN multistate licensure
    - Art. III (d) By rule, the Commission shall identify the approved APRN roles and population foci for licensure as an APRN.

Public Safety Features

- Authority to Obtain and Submit Federal Criminal Background Checks
  - “A state must implement procedures for considering the criminal history records of applicants for initial APRN licensure or APRN licensure by endorsement.”
- Prompt reporting to NURSYS of participation in alternative to discipline programs
- Current significant investigatory information
  - Flag puts states on notice
- Goal = Communication between otherwise siloed entities in the name of patient safety
APRN Compact Legislative Update
APRN Compact Effective Date

• The APRN Compact will go into effect once 10 states have enacted the APRN Compact language

Growing Opposition to APRN Compact

• American Society of Anesthesiologists have publically opposed the APRN Compact
  – Reasons: APRN Consensus model tie, independent practice included in language, domino effect
• Pending AMA Resolution
  – 2017 House of Delegates: ASA presentation
  – Midyear Meeting: broadened resolution
  – 2018 House of Delegates: stay tuned
APRN Compact Supporters

- **Workforce:** state workforce centers, Campaign for Action coalitions
- **Profession:** APRN role groups, APRN specialty groups, nurses associations, nurse executive and CNO organizations
- **Education:** nursing education organizations and programs
- **Consumer:** AARP, National Patient Safety Foundation
- **Regulation:** state boards of nursing, umbrella boards / departments
- **Military families:** National Military Family Association, Department of Defense, Military Officers Association of America

Legislative Meeting Tips: LB 687

- **Read-up**
  - What are the Senator’s main issues?
  - What area of the state do they represent?
    - Border/central, urban/rural, etc.
  - Committee assignments?
  - Minority or Majority party?
  - Leadership position?
Make your pitch: LB 687

- **Workforce:**
  - A nursing shortage is coming. We need to ensure that our workforce is capable meeting the needs of patients in your district and across our state. The APRN Compact will allow APRNs to participate in telehealth and cross-state facilities to deploy their staff as patient needs shift.
  - Nebraska’s primary care provider shortage is worse than the national average. By 2030 it has been estimated that NE will need to increase its primary care workforce by 11%. APRNs can help fill the gap in the most rural areas of our state.

- **Reducing Regulatory Barriers:**
  - The APRN Compact helps to reduce regulatory barriers of APRNs who wish to practice in Nebraska or participate in growing industries such as telehealth and online education. Without the compact NE APRNs will need to obtain and maintain multiple licenses in different states in order to work.

- **Military Families:**
  - Nebraska is proudly home to many military families. As these families relocate often, the APRN Compact allows them to continue working immediately upon relocation, without waiting in line for, and paying for, a new license with each move.

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Make your pitch: LB 687

- **Education:**
  - The APRN Compact helps to facilitate online education. Our universities are increasingly offering online courses. This service helps to keep our schools competitive, and allows our great education programs to reach students across the country. Nurse educators at our universities must be licensed where their students are located. The APRN Compact would allow them to reach more students.

- **Mobility**
  - Qualified licensees are often held back by the “borders” drawn by old licensure systems. The APRN Compact, and the various other healthcare licensure compacts, help to break down those borders and facilitate licensure mobility.

- **Emergency Preparedness**
  - As soon as an emergency occurs, APRNs in compact states can immediately enter and begin providing emergency care to victims. Whether it be a natural disaster—flooding, tornadoes, fire—or an attack or otherwise, interstate compacts mobilize professionals to get on scene.
Make your pitch: LB 687

– **Telehealth**
  - The landscape of healthcare is changing. As technology advances, telehealth becomes a viable way to provide care and follow-up care to patients across the state. In areas where providers are lacking, patients will be able to receive care through technology. Often, the patients or providers will be across state lines. The APRN Compact facilitates providers participating in telehealth.

– **Recruitment**
  - It is important for Nebraska to keep talented professionals in our state and incentivize professionals to relocate to our state for employment. Interstate compacts are a great way to promote Nebraska as a business-friendly state with a modern and dynamic workforce.

What about March 2nd?

- Involvement in Nursing Orgs.
  - State nurses association, APRN role/specialty organizations, Campaign for Action state chapters (AARP & RWJ)
  - Look for leadership opportunities: policy/government committees

- What you can do to make a difference
  - Attend coalition meetings
  - Testify at committees, meet with legislators, contact lawmakers
    - Remember: personalize your ask to your issues, and theirs!

- Stay Engaged
Stay Connected

- Please visit nursecompact.com and aprncompact.com for APRN/NLC Compact resources, an interactive map showing introductions and enactments, and to Take Action by sending an email/tweet/facebook message to your lawmaker and governor.

Questions?