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## Postsecondary Education & Workforce Committee

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### HB 1417

**Brief Description:** Concerning the multistate nurse licensure compact.

**Sponsors:** Representatives Volz, Chapman, Graham, Ryu, Schmick, Dye, Walsh, McEntire, Maycumber, Caldier, Dent, Christian, Barnard and Eslick.

<p><b>Brief Summary of Bill</b></p> <ul style="list-style-type: none"><li>• Enacts the Interstate Nurse Licensure Compact.</li></ul>
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**Hearing Date:** 2/3/23

**Staff:** Jim Morishima (786-7191).

**Background:**

Registered nurses (RNs) and licensed practical nurses (LPNs) are licensed by the Nursing Care Quality Assurance Commission. An RN or LPN who is licensed in another state or territory of the United States that meets all other requirements for licensure in Washington may receive a license without examination.

The Interstate Nursing Licensure Compact (Compact) is an agreement between states to expedite the licensure for RNs and LPNs across state lines. As of January 2023, 39 states have enacted the Compact.

**Summary of Bill:**

The Interstate Nurse Licensure Compact (Compact) is enacted. A multistate license to practice registered or licensed practical nursing issued by the nurse's resident state must be recognized by

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each party state as authorizing the nurse to practice under a multistate licensure privilege. Multistate licensure privilege is the legal authorization associated with a multistate license permitting the practice of nursing in a remote state.

### Compact Commission.

The Interstate Commission of Nurse Licensure Compact Administrators (Commission) is established to administer the Compact. The head of the licensing authority of each state, or their designee, shall be a member of the Commission. The interstate commission may promulgate rules and bylaws for the Compact and each member shall have one vote. The interstate commission must pay for reasonable establishment and ongoing operation expenses of the interstate commission. It may levy and collect an annual assessment from each party state to cover these costs.

The Commission must meet at least once a year. Most meetings of the Commission must be open to the public. The Commission may close meetings to the public to discuss certain matters, including noncompliance by party states, employment matters, litigation, disclosure of trade secrets, law enforcement investigative records, and matters specifically exempt from disclosure by federal or state law.

The Commission may promulgate reasonable rules to facilitate and coordinate implementation and administration of the Compact. At least 60 days prior to voting on a rule, the Commission must file a notice of proposed rulemaking. The Commission must then conduct a public hearing and allow the submission of written input. The Commission may enact emergency rules that must undergo the full rule-making process no later than 90 days after their effective dates.

The Commission may not alter:

- requirements to obtain or renew a single-state license;
- the scope of nursing practice in a state;
- the methods and grounds for disciplining a nurse in a state;
- state labor laws; or
- the obligation of any employer to comply with statutory requirements.

Other Compact provisions relating to the Commission include provisions relating to judicial proceedings against the Commission, financing the Commission, and qualified immunity, defense, and indemnification of Commission members.

### Information System.

Each party state to the Compact must participate in a coordinated licensure information system and provide information to the system on licensure and disciplinary history of all licensed registered nurses and licensed practical nurses in the state. When an applicant applies for a multistate license, the home state must check the coordinated licensure information system to determine if the applicant holds or has ever held a multistate license issued by another state, is

participating in an alternative licensing program, and whether the applicant has any disciplinary history.

#### Licensure Process.

Each home state licensing board or commission may issue a multistate license to a qualified applicant residing in that state. The applicant must meet the state's qualifications for licensure, must submit to a criminal background check, including providing fingerprints or other biometric information necessary to complete the check, and must have passed an approved examination. Each license holder is eligible to renew their license provided that they continue to meet all qualifications, including having no disqualifying disciplinary or criminal history.

A nurse may only hold one multistate license at a time and upon moving to a new primary state of residence, must apply for licensure in their new home state. A nurse may apply for licensure in advance of a change in primary state of residence. If a nurse moves to a nonparty state, the multistate license issued by the prior home state converts to a single-state license of that prior home state.

#### Discipline.

The practice of nursing in a party state under a multistate licensure privilege subjects a nurse to the jurisdiction of the licensing board, the courts, and the laws of the party state, including state practice laws, in which the client is located at the time of service.

All party states are authorized to take adverse action against a nurse's multistate licensure privilege in that state and must notify the coordinated licensure information system promptly of any such action. However, only the home state that issued the license may take adverse action against a nurse's license issued by that home state. The home state must give the same effect to reported conduct received from a remote state as it would if the conduct occurred in the home state. If a licensed nurse moves to a new state during the course of an investigation, the home state may complete the investigation and take appropriate action. If the home state takes disciplinary or other adverse action, the nurse's multistate licensure privilege to work in all other party states must be deactivated until the encumbrance has been removed. The home state must report all adverse actions to the coordinated licensure information system.

#### Oversight and Enforcement.

Each party state must enforce the compact and take all actions necessary and appropriate to effectuate the Compact's purpose and intent. Upon request of a party state, the Commission must attempt to resolve disputes between party states and adopt rules regarding mediation and binding arbitration. If the Commission determines a state is in default, it must provide written notice to that state and provide it with remedial training and specific technical assistance regarding the default. In addition, the Commission may bring a legal action in federal court to enforce the Compact. After all other means of securing compliance have been exhausted, a defaulting state

may be terminated from the Compact through a vote of the majority of party states.

Joining and Withdrawing.

States may join the Compact by enacting the Compact's provisions into law. States that enact the Compact before the Compact comes into effect are subject to review after the effective date of the Compact. The Compact may be amended by enactments in all party states. A state may withdraw from the Compact by repealing its enacting statute, but the withdrawal is not effective until six months after the statute's repeal.

Rulemaking.

The Nursing Quality Assurance Commission may adopt rules to implement the Compact.

**Appropriation:** None.

**Fiscal Note:** Requested on January 30, 2023.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.