

HOUSE BILL REPORT

HB 1417

As Reported by House Committee On:
Postsecondary Education & Workforce

Title: An act relating to the multistate nurse licensure compact.

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.

Brief History:

Committee Activity:

Postsecondary Education & Workforce: 2/3/23, 2/17/23 [DPS].

<p>Brief Summary of Substitute Bill</p> <ul style="list-style-type: none">• Enacts the Interstate Nurse Licensure Compact.

HOUSE COMMITTEE ON POSTSECONDARY EDUCATION & WORKFORCE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Slatter, Chair; Entenman, Vice Chair; Ybarra, Ranking Minority Member; Waters, Assistant Ranking Minority Member; Chandler, Jacobsen, Klicker, Leavitt, McEntire, Schmidt and Timmons.

Minority Report: Do not pass. Signed by 2 members: Representatives Hansen and Pollet.

Minority Report: Without recommendation. Signed by 1 member: Representative Reed, Vice Chair.

Staff: Jim Morishima (786-7191).

Background:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

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 Substitute 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 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 Commission may promulgate rules and bylaws for the Compact and each member shall have one vote. The Commission must pay for reasonable establishment and ongoing operation expenses of the 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 (NQAC) may adopt rules to implement the Compact.

Prior to practicing in Washington, an individual holding a valid multistate license under the Compact must submit documentation of the license to the NCQAC. Upon receipt of the documentation, the NCQAC must issue a license by endorsement to the individual.

Substitute Bill Compared to Original Bill:

The substitute bill:

- requires an individual holding a valid multistate license under the Interstate Nurse Licensure Compact to submit documentation of the license to the Nursing Care Quality Assurance Commission (NCQAC); and
- requires the NCQAC to issue a license by endorsement to the individual.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: This bill contains multiple effective dates. Please see the bill.

Staff Summary of Public Testimony:

(In support) This bill addresses the serious issue of the nurse staffing crisis, which is a national problem. Veterans' homes in Washington are experiencing staffing shortages. The veterans' homes have done what they can to attract and retain nurses, including signing bonuses and stipends. Washington is competing in a global market. Health care shortages can lead to delays in care, which can lead to lifelong, debilitating problems. The shortages have been emotionally difficult on nurses and the communities they serve.

This bill is not the only answer, but is only part of a larger solution. Pay, staffing levels, and working conditions are all also important pieces. This bill will allow Washington to join 39 other states in the Interstate Nurse Licensure Compact (Compact) and will be a powerful tool to bring nurses into Washington. This bill will be particularly important in border communities. Many types of credentials are portable. Lots of nurses would love to work in Washington, but it is easier for a physician to transfer to Washington than it is for a nurse. There have not been any issues with this Compact. When stakeholders come together for the greater good, all things are possible.

This bill will be very important to military families. Nursing is a top career for military spouses. Moving states can be extremely stressful for military families and the Compact will save them time, money, and stress. Without the Compact, nurses have to seek licensing by endorsement, which can take months. Under the Compact, military spouses can seamlessly transition to practicing right away. Military spouses who are nurses can benefit the state by allowing vacancies to be filled quickly.

Hospitals serve vulnerable patients in rural areas. Hospitals are having trouble recruiting nurses, especially in rural areas. Washington must make a concerted effort to retain and attract new nurses. There are ways to address all of the concerns that have been expressed about this bill. For example, the registration issue can be addressed by requiring employers to report the employment of multistate nurses. This can be done outside of the Compact by amending state statutes.

(Opposed) Patient care has become more precarious and there are more health care workers leaving the profession. There is no evidence that this Compact will bring more nurses into the state. It is unclear what effect the Compact will have on patient safety. If Washington joins the Compact, there would be no way to know whether an entering nurse has an

encumbered license or even fraudulent credentials. Lack of oversight and accountability increases the danger. There is no way to check for disciplinary investigations. How will the Compact affect reproductive rights, gender-confirming care, and licensing fees? The Compact sets a dangerous precedent that can impact Washington's high standards of care. Washington would be ceding oversight responsibility to a national, nongovernmental entity. There are better places to start addressing staffing shortages than the Compact.

(Other) Washington is in need of nurses. Hospitals are experiencing severe shortages. It takes months to hire nurses. Washington's current license does not enable nurses to cross state lines. This bill is just one piece of the puzzle. Washington is an attractive place to work for nurses, but not being a member of the Compact is a deterrent. Having this Compact in place would have put Washington in a better spot for COVID-19. This bill will help military spouses. Multistate licensees do not create elevated safety risks for patients. This is a good tool for the toolbox and will help in emergencies, improve patient outcomes, and prevent burnout.

Persons Testifying: (In support) Representative Mike Volz, prime sponsor; Tom Davis, Veterans Legislative Coalition; Ramil Codina, United States Air Force; Courtney Hobson; Tim Flemming; Rachel Doblal; Jennifer Graham, MultiCare Health System; Jennifer Burkhardt, Summit Pacific Medical Center; Lisa Thatcher, Washington State Hospital Association; and Deanna Martinez.

(Opposed) Dane Austreng, Service Employees International Union Healthcare 1199 Northwest; Katharine Weiss, Washington State Nurses Association; and Lily Codega-Wilson, United Food and Commercial Workers 3000.

(Other) Elizabeth Hovde, Washington Policy Center.

Persons Signed In To Testify But Not Testifying: None.