

April 14, 2021

Testimony provided for House Government Ops
NLC

Good afternoon. My name is Deb Snell president of AFT Vermont and Vermont Federation of Nurses and Health Professionals. I have been a nurse at the Medical Center for over 21 years with 19 of them in the Medical Intensive Care/ Covid unit. Thank you for granting me the opportunity to speak with you once again about the nursing licensure compact. Many other states are working on this same matter. States like Alaska Washington that are still fighting back against nursing licensure compact in their legislature. Many states like New York and Massachusetts have nursing unions actively fighting the compact.

The thing I most want to stress about the nursing licensure compact is that there is still no evidence that after being around for over 20 years that it is actually worked or made a difference in any state when it came to their nursing shortage.

I believe one of the arguments made last time around was what would happen if VT was in a crisis and we needed to get nurses here. I believe the pandemic has answered that question for Vermont and many other states when there is a crisis states will open their doors and their borders for emergency licensing as our OPR did in the midst of the pandemic. Last year in doing that did not bring nurses who were going to move to our state it brought in travel nurses and I cannot stress strongly enough my belief and what appears to be proven is that the compact is still a dream come true for travel nurse agencies.

I would have to verify this with OPR but at my facility after emergency licensure was granted by OPR we didn't see an influx of nurses coming to Vermont or moving to Vermont. What we saw was travel nurses travel nurses who are making up to \$125.00 an hour plus housing during a pandemic when our hospital claims it's losing money. UVMHC is currently offering a position to travel nurses where they could potentially work between our hospital Porter and CVMC in those travel nurses are making \$5500 a week plus housing. Even though Vermont proved itself during the pandemic of being a place that was able to get through the worst of it and keep our numbers low, nurses are still not coming to our state. In fact speaking to our manager of the emergency Department recently she stated that many of the offers she had made recently have been turned down

because of the wages that were offered. UVMHC is currently offering a \$ 20,000 post tax sign on bonus with \$10,000 in the first check and \$10,000 at the end of two years. I am hearing that haven't been any applicants for these positions.

I would like to cite from a paper that I will share with you and strongly encourage you to read called "Labor Supply Effects of Occupational Regulation: Evidence from the nurse Licensure Compact"

"Our results imply the following for licensing and health care policy. First, while we do not find that the multistate licensing provided by the NLC reduces labor market frictions caused by occupational licensing, it is important to note that we necessarily focus on nurses. The results may not generalize to other licensed professionals, such as lawyers, therapists, physicians and teachers. Second, from a healthcare delivery perspective, our results indicate that the NLC is likely not to increase the labor supply of nurses. We find no evidence that reducing licensing barriers will increase the pool of workers from which hospitals draw or that it will bring nurses into the labor force. As a result, this reduction in licensing barriers does not appear to be a solution to an aggregate shortage of nurses. "

States that have been part of this compact from the beginning are still facing minor to crippling nursing shortages. What this compact it doesn't do is fix why nurses are not coming to Vermont to begin with and why our current workforce continues to leave the OPR has previously testified that it is not difficult to get a license in Vermont in its study done in March 2019 offered no guarantees that nurses will come to Vermont at the compact is passed when new graduates are nurses looking to move research Vermont they will find that we are tied first second and third place is for nursing job openings per capita and also one of the worst I think it was 48 out of 51 for lowest annual nursing salary when adjusted for cost of living these are issues that as a state we need to fix before we can contemplate the compact until we address these issues we will not attract nurses to the state compact or not if the compact passes I fear we will become the Mecca for travel nurses who have a higher salary similar health and retire benefits and a housing allowance of several \$100 a week we need to become competitive our southernmost hospitals are already competing with Massachusetts in New Hampshire and invoking the compact will just make it easier for them to leave we need a bipartisan solution to this problem. I am working on a recruitment and retention workforce at UVMHC in my role as VFNHP President. I truly believe that as a state our attention should be directed on those goals instead of the pipe dream that the NLC would work in our state.

We need to be able to answer this question before the compact can be considered- Why are nurses leaving Vermont? If we can't answer and fix this, the compact has the ability to make this problem worse by making it easier for nurses to leave.

Thank you.

Deb Snell, RN