

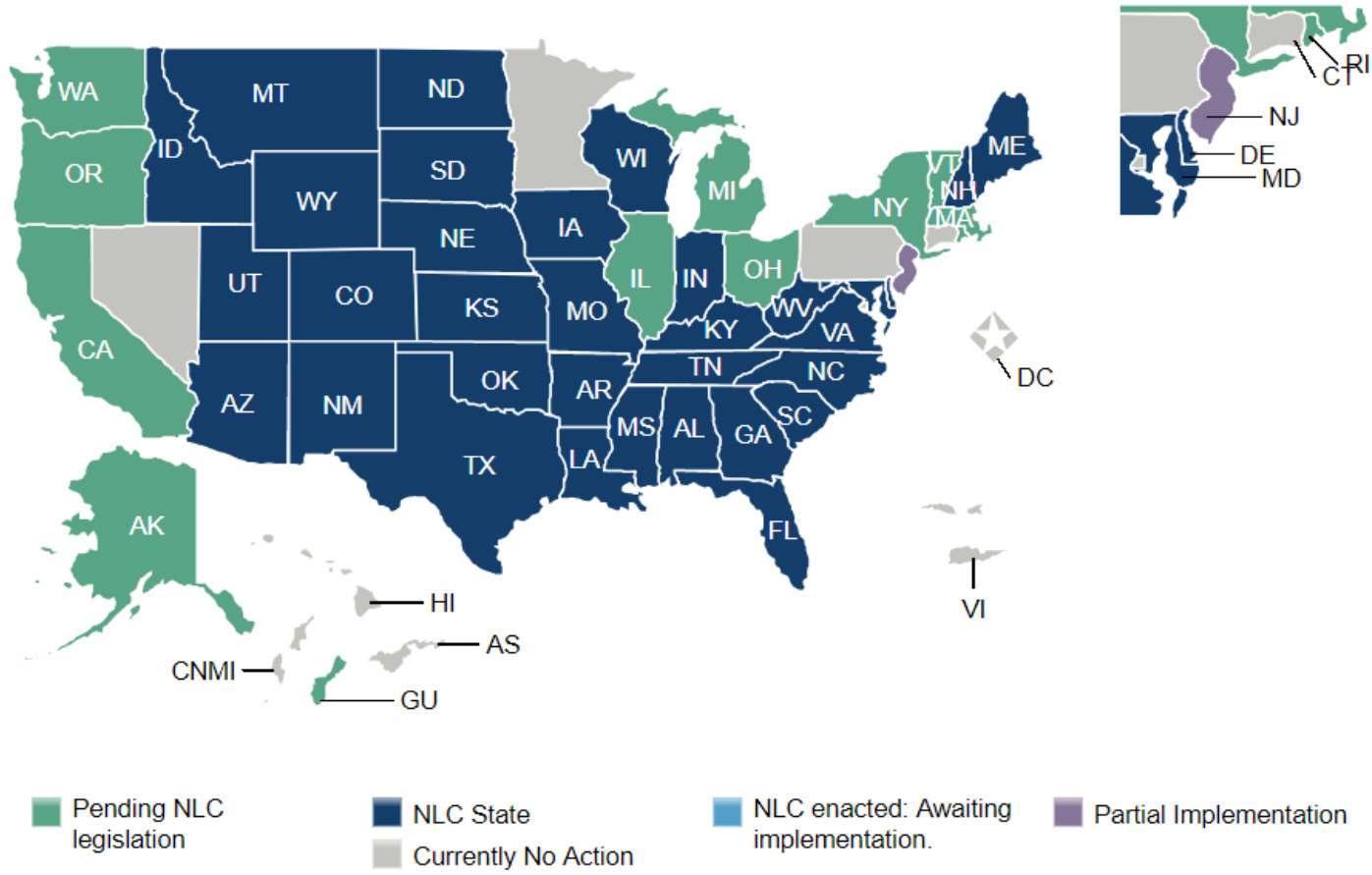
The Enhanced Nurse Licensure Compact

Office of Professional Regulation

What is the Nurse Licensure Compact?

- The compact allows LPNs and RNs to travel between states to work without requiring separate state licenses
- The Compact is enacted in 34 states, 10 states have pending bills related to the Compact
 - Vermont has two bills related to the Nurse Licensure Compact - H. 99 and S. 48

Current NLC States and Status



Benefits of the Compact

For Patients and Employers:

- Possibility for increased workforce
- Enables the continuation of care to patients across state lines
- Resolves telehealth concerns

For Nurses:

- Allows a nurse to work in multiple Compact states with one license
- Reduces red-tape when nurses change employers along state lines if both states belong to the Compact

For Nurse Educators:

- Allows for a didactic educator to provide instruction online without multiple single state licenses

For States in an Emergency:

- Eliminates emergency licenses if the nurse is coming from a Compact State
- Enables telehealth

For Nursing Boards:

- Participating states can share complaint & investigation information
- A Compact state can restrict the privilege to practice of a licensee without action from the home-state
- Reduces administrative pressures to license nurses from Compact states
- A Compact state is part of the governance structure for the Compact

Would there still be a “Vermont License?”



Yes!



The Vermont Board of Nursing would offer a single state license and the multi-state (Compact) license. The fees for these licenses will be the same and the standard license will be a Compact license



Why? Primarily so that people with criminal backgrounds or people with active discipline would be able to work in the state

What is a home-state?

The home-state is the primary state of residence

Where do you have your driver's license?

Where do you vote?



A Compact licensee completes and signs a declaration of primary state of residence

What if a nurse moves to another state?

- If the move is to another Compact state (VT loses fees):
 - The nurse would apply for a new Compact license in the new primary state of residence & show proof of residency
 - A new background check is not conducted
- If the move is to a non-Compact state (VT does not lose fees if the nurse wants to maintain a VT license):
 - The nurse applies for the new state license and the Compact license converts to a single-state license
- If the move is from a non-party state to a Compact state (VT would collect a fee):
 - The nurse applies for a compact state license and the non-compact state license remains unaffected

Fiscal Impact of the Compact:

The Number of Vermont licenses will decrease; out-of-state nurses will utilize compact licenses instead of Vermont licenses.

The Nursing Board is a self-funded board. It is required to pay for its share of the Office of Professional Regulation, i.e. its operation costs (administration and enforcement)

With the Compact we will lose licensees. It is anticipated VT will lose 4,705 licensees

This will result in an approximately a \$932,500 revenue reduction without corresponding decrease in expenses

There are also costs to being in the compact: \$6,000/year and some technology changes which OPR anticipates costing between \$10,000 - 50,000

OPR and the Legislature try to keep fees as reasonable as possible without allowing the Board to enter into a negative balance. OPR will focus on reducing overhead costs to the extent possible.

What does this mean for fees?

The Compact license and the single-state VT license will have the same cost

Current biennial renewal fees are:

RN = \$190

LPN = \$175

It is anticipated that biennial fees would need to be raised to:

RN = \$280

LPN = \$245

OPR will wait until after adoption of the Compact to adjust fees, if at all.
The precise fiscal impact should be known before raising fees.

What is the Vermont Board of Nursing & OPR Position on the Compact?

The Board strongly supports the Compact

OPR supports the Compact because it enables mobility and may attract nurses to the state

Vermont does not graduate enough nurses to sustain the needs of the state

Graduates from Vermont Educational Programs do not all become licensed in Vermont

Castleton 30/46 graduates (65%); Norwich 21/44 (47.7%); UVM approx. 50/100 (50%); VTC 245/321 (76%)

Next steps if S.48 is passed.

The exact financial impact is unknown and will be monitored closely

Every effort will be made to avoid an impact on fees

Other than financial, downsides are minor and many other states have mitigated them

The survey conducted by OPR demonstrated that a majority of VT nurses support the Compact despite the fee impact.

Vermont should not be out-of-sync with what is becoming a national model for nurse licensing