

TO: Board of Nursing, Wisconsin Department of Safety and Professional Services

FROM: Allina Health, Crossing Rivers Health, Essentia Health, HealthPartners, Hospital Sisters Health System, Gundersen Health System, Mayo Clinic Health System, UnityPoint Health, Viterbo University, and Wayzata Children's Clinic

DATE: June 8, 2017

RE: Support for the Enhance Nurse Licensure Compact

On behalf of our organizations, we write in support of the Enhanced Nurse Licensure Compact (NLC) and urge the Wisconsin Board of Nursing to adopt a position backing legislation that would build on and improve the existing NLC.

For background, Wisconsin has been participating in the first NLC since January 1, 2000. This interstate agreement allows nurses to obtain one multistate license and practice in other member states. The compact is an important policy to facilitate a multitude of healthcare services, including virtual care such as telemedicine in rural portions of Wisconsin.

The enhanced NLC builds on the success of the original compact with an opportunity to expand interstate cooperation. As of June 2017, twenty-two states have already adopted the enhanced NLC, including the neighboring state of Iowa which enacted legislation unanimously. A minimum of 26 states will need to enact legislation for the enhanced compact to be in effect. Several additional states are expected to pass legislation this biennium, and movement appears strong to achieve 26 states soon. Wisconsin will need to pass legislation to not be left behind.

The benefits of interstate agreements, such as licensing, are abundant. First, the enhanced NLC will continue to provide promote efficiency and reduce administrative burden. Nurses practicing at our organizations are able to seamlessly provide care for patients along the borders in our neighboring states. Second, nurses already licensed in the compact are grandfathered into the updated enhanced compact. Third, nursing telehealth services can continue and expand, ensuring patients in rural areas do not have to travel significant distances for specialty care. Fourth, the enhanced NLC maintains state

autonomy, ensuring states have the right to withdraw and terminate from the compact if desired. Finally, should the worst happen, such as a natural disaster, nurses can be dispatched to aid without the need to consider additional licensure when an interstate compact already exists.

Before legislation is introduced in the Wisconsin legislature, we believe it is imperative the Board of Nursing take an affirmative stance in support of the enhanced NLC. This policy would continue with interstate cooperation, minimize administrative burden, and contribute to the high level of care delivered by our nurses in the state of Wisconsin.

TO: Sheryl Krause, MSN, ACNS-BC, CEN, Chair and Members of the State of Wisconsin Board of Nursing
FROM: Mary Beck Metzger, MSN, APRN-BC, APNP
DATE: June 9, 2017
RE: Support of Pursuing Legislation that adopts the Enhanced Nurse Licensure Compact

On behalf of the Wisconsin Nurse Association (WNA) Board of Directors we would like to provide remarks on the proposed legislative language developed by the National Council of States Board of Nursing (NCSBN) that provide enhancements to the current Nurse Licensure Compact. My name is Mary Beck Metzger and I am a Family Nurse Practitioner and am the APRN Representative to the WNA Public Policy Council. I am here to present WNA's position on the Enhanced Nurse Licensure Compact. WNA is the professional association whose membership is open to any RN in Wisconsin.

Thank you Chairperson Krause and members of the Board of Nursing for sponsoring this informational hearing to gain input from the public regarding the proposed Enhanced Nurse Licensure Compact (eNLC). We are becoming a borderless world with the rise of electronic technologies that cross geographic boundaries. Healthcare systems provide services in multiple states; there is increased use of telehealth services; schools of nursing operate in multiple states and nurse faculty provide instruction in more than one state; faculty teach across state lines in on-line nursing education programs; travel nurses' and flight nurses' work crosses state lines; and nurses responding to disasters in other states all provide services to individuals who are remote from the nurse's home state.

The current multistate licensure for nurses has served Wisconsin well, maintaining public protections at the state level while removing barriers to cross-state border practice.

We also have systems in place that provide information on the status of a nurse license that is available throughout the country. Knowing this, WNA views the (eNLC) legislation developed by NCSBN with their members as very innovative and important to the nursing profession, regulators, consumers and employers. WNA was an active advocate in achieving the adoption of the first Nurse Licensure Compact State Statute Ch. 441.50 in 1999. We believe that the employers of nurses and those RNs that take advantage of the multistate licensure see this as a cost saving benefit as only one license is required from the home state. The savings come from not having to pay multiple state licensure fees.

WNA is aware that portions of the new legislation are problematic for Wisconsin. The most notable concern is that the Department of Safety and Professional Services is prohibited in requiring fingerprinting for all but two types of license holders. WNA believes that it is time to repeal state statute 440.15. The Veterans Health Administration requires fingerprinting for all of their health care professionals. Many nurses already have submitted to palm vein recognition technology when taking the NCLEX exam. WNA finds that including fingerprinting as part of the criminal background check process produces positive outcomes.

One outcome is that DSPS will know that the nurse applying for a license is that nurse and therefore so will the employer.

Within the past year it was reported that a woman hired at a Wisconsin hospital as a RN was an impersonator, using a Milwaukee woman's registered nurse credentials to get a nursing job. It would have been very helpful if the proactive process of fingerprinting had been implemented to thwart such occurrences. In addition, the nurse that was affected by the impersonator could have experienced some very negative outcomes, up to and including temporary loss of license and livelihood. The fingerprinting requirement is not onerous one; many businesses such as Live Scan, Fieldprint and the UPS Store provide efficient, secure, accessible digital fingerprinting services, using approved, standardized and certified digital systems. Part of the Board of Nursing's mission is to protect the public. By adopting the eNLC the Department is supporting this very important mission. Fingerprinting protects lives.

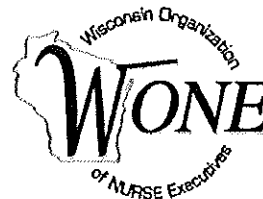
WNA also supports that if the eNLC is adopted, the requirement for fingerprinting will apply to those nurses who are receiving a license either as a new graduate or those applying for licensure by endorsement. All of the currently licensed nurses will be ~~considered to be under the current~~ ^{the new} eNLC. *grandfathered into*

WNA does not view the portion of legislative proposal that creates the Interstate Commission of Nurse Licensure Compact Administrators as a potential hindrance. The eNLC Commission is comprised of all of the representatives from each of the states. It appears that every state will have a vote and have opportunity for debate. It appears that there will be time to consult with the State's Board of Nursing to assist with decision making, including standardized administrative rules language.

WNA views the adoption of the eNLC as the pathway for the adoption of an APRN licensure compact.

There are currently 22 states that have adopted the eNLC and four that are in the process. WNA would like to see Wisconsin display leadership by adopting the eNLC sooner rather than later. It is critical that Wisconsin be seen as a hospitable state for nursing practice, and not have more burdensome requirements than surrounding states.

Thank you for giving us the opportunity to present WNA's position.



June 8, 2017

Sheryl Krause
Chair, Wisconsin Board of Nursing
Department of Safety and Professional Services
PO Box 8935
Madison, WI 53708-8935

Re: WHA & WONE Support Adoption of the Enhanced Nurse Licensure Compact

Dear Ms. Krause:

The Wisconsin Hospital Association ("WHA") and the Wisconsin Organization of Nurse Executives ("WONE") are pleased to support adoption of the Enhanced Nurse Licensure Compact ("eNLC") in Wisconsin.

Wisconsin has been an inaugural member of the current Nurse Licensure Compact ("NLC") since 2000. In 2015, the National Council of State Boards of Nursing drafted the eNLC as a new version of the NLC. Under both the NLC and the eNLC, each member state may issue a multistate RN or PN license to an applicant residing in such member state, and this multistate license grants the license holder a privilege to practice nursing in other member states.

Similar to the NLC, the eNLC would remove redundant red-tape in the nurse licensure process by creating a voluntary, alternative, and expedited process for a nurse residing in another state to receive a privilege to practice nursing in Wisconsin. The eNLC would not interfere with Wisconsin's ability to hold any nurse practicing in Wisconsin accountable for meeting all Wisconsin practice laws. Nurses who would choose not to utilize the expedited eNLC process would not be affected by adoption of the eNLC in Wisconsin, because the eNLC would not interfere with the Board of Nursing's authority to issue nursing licenses outside the eNLC licensure process.


WHA and WONE supported the NLC, and since national introduction of the eNLC in 2015, our organizations have been analyzing and discussing Wisconsin's options for adopting the eNLC with nurse leaders and with hospitals and health systems across the state. Of the more than 20 states that have adopted the eNLC to date, most are currently in the NLC. Among Wisconsin's border states, Iowa is a member of the NLC and on April 21, 2017, enacted enabling legislation to join the eNLC. Because the eNLC generally does not allow states to be members of both the NLC and the eNLC, adoption of the eNLC in Wisconsin will allow nurses practicing in Wisconsin and Wisconsin health care organizations employing such nurses to continue to benefit from the licensure portability currently afforded by the NLC. This will be particularly important for Iowa-licensed nurses practicing in Wisconsin and for Wisconsin health care

organizations utilizing traveling nurses granted privileges to practice in Wisconsin through licenses granted by the NLC process. Adoption of the eNLC in Wisconsin will also allow nurses and health care organizations to optimize future licensure portability benefits as more states adopt the eNLC.

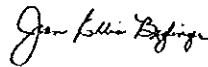
An adequately staffed health care workforce will be essential as Wisconsin hospitals and health systems continue to deliver accessible, efficient, and high-quality health care to their communities, and the eNLC supports such a workforce by expediting the process for nurse licensure and eliminating the need for a redundant application process. By joining with the more than 20 states that have already adopted the eNLC, Wisconsin can continue to enjoy the benefits of the NLC, which has minimized unnecessary time and cost associated with applying for and processing a Wisconsin nursing license and enabled nurses that come to Wisconsin to begin serving patients in Wisconsin communities without delay.

If you have any questions about details of the eNLC, please contact Andrew Brenton, WHA assistant general counsel, at 608-274-1820 or abrenton@wha.org, or Ann Zenk, WHA VP of workforce and clinical practice, at 608-274-1820 or azenk@wha.org.

Sincerely,



Eric Borgerding
President and CEO
Wisconsin Hospital Association



Joan Ellis Beglinger, MSN, RN
President
Wisconsin Organization of Nurse Executives