

TO: Representative Joe Sanfelippo, Chair and Members of the Assembly Committee on Health

FROM: Gina Dennik-Champion, MSN, RN, MSHA Wisconsin Nurses Association
Executive Director

DATE: September 28, 2017

RE: Support for Assembly Bill 500 and the Companion Senate Bill 417, relating to ratification of the Enhanced Nurse Licensure Compact, extending the time limit for emergency rule procedures, and providing an exemption from emergency rule procedures.

Thank you, Chairperson Sanfelippo and members of the Assembly Committee on Health for holding this public hearing on AB 500 and the companion SB 417, which addresses the Enhanced Nurse Licensure Compact (eNLC). My name is Gina Dennik-Champion, I am a registered nurse and have the privilege of serving as the Executive Director of the Wisconsin Nurses Association. On behalf of the Wisconsin Nurse Association (WNA), which is the professional nurses association with membership open to any registered nurse in Wisconsin, I would like to provide remarks on the proposed legislation AB 500/SB 417.

First of all, I want you to know that WNA was a very active supporter of the first Nurse Licensure Compact State Statute Ch. 441.50 which was enacted in 2000. Having seventeen years to review the success and opportunities for improvement has led us to the fact that improvements are needed to the current NLC. The language in AB 500/SB 417 reflects these improvements that will benefit nurses, patients, employers and regulators. AB 500 and SB 417 contain the same language that will be found in every state that adopts this enhanced interstate nurse licensure compact. This language was developed by a number of states board of nursing through the support of their national association, the National Council of States Board of Nursing (NCSBN). The language was vetted with every state board of nursing including Wisconsin. The Wisconsin Board of Nursing has discussed, accepted comments through their informational hearing on June 8, 2017 and took a position of support. WNA testified in support of the principles, concepts and the actual NCSBN proposed legislative language. WNA would like to see Wisconsin remain a member of the interstate nurse licensure compact and be the 26th state to adopt the enhanced nurse licensure compact.

We are becoming an increasingly borderless world. In 2000 Wisconsin enacted legislation that created an innovative way to support the increased utilization of nurses. The multistate license allows nurses residing in one state to practice in another NLC state without the need for obtaining a license for that state. This has produced the following benefits:

- Health care organizations that provide services in multiple states can utilize the services of the RN without having to obtain a nursing license for that state. This saves money on the costs of paying licensing fees. In addition, many states require continuing education as a condition of relicensure. Depending on the state's requirement for the number of continuing education hours, the specific education topics and renewal dates, nurses practicing in multiple states and their employers are finding themselves delivering less care in order to maintain compliance with each of the states continuing education requirements. The only requirement that the nurse is bound to is the home states continuing education rules.
- There are nurses who prefer to work for organizations for a limited time. These "Travel Nurses" are utilized when there are shortages of nurses. If the nurse lives in a state that is compact state and agrees to work in states that are also compact state, that nurse will not need to have multiple licenses.
- In 2000, Wisconsin opened the door for nurses working as nurse educators to teach across state lines either in-person or online without the need for multiple licenses. This has provided some relief related to demand for nurse educators.
- As the use of telehealth services increases across state lines, so will the increased utilization of nurses who will be communicating with patients for such services as pre-visit with the provider, post-visits encounters and spending time with the patient to teach, explain and support patient care and treatment. If the patient resides or temporarily located in a compact state the nurse will not need a license for that state to practice.
- WNA supports the language that requires fingerprinting as part of the criminal background checks for nurses applying for a license. Fingerprinting is becoming common practice for many industries and occupations. For example, the VA hospitals throughout the US require fingerprinting for all healthcare providers and nurses must submit their fingerprint in order to obtain medication from the facilities' automated medication dispensing system, WNA believes that fingerprinting can prevent nurse identity theft. Not too long ago, in Wisconsin, we heard of a case where individual impersonated a nurse. This individual was caught prior to delivering care to the patient. However, without the diligence of the nursing staff, the impact on patient care was certainly at risk as well as ramifications for the nurse whose identity was used by the individual. The use of fingerprinting as an identifier supports patient care, nursing practice and can save lives. It also supports the Board of Nursing's mission which is to protect the public.

- WNA supports the use of an Interstate Compact Commission that will develop the Administrative Code language for the eNLC. The Commission will also be responsible for maintaining the relevancy of the Administrative Code. The Interstate Compact Commission provides for each state board of nursing to designate an individual to be a voting member on the commission.
- The Board of Nursing maintains their legal authority as defined in Wisconsin State Statute Chapter 441. This includes oversight of Wisconsin schools of nursing, licensing requirements, standards for nursing practice, expectations of professional conduct and issue licensure restrictions.

Thank you for giving me the opportunity to present WNA's position. WNA thanks the sponsors of the legislation Senator Howard Marklein and Representative Nancy VanderMeer and the many legislators who have signed on in support including the members of the Assembly Health Committee, Representatives Bernier, Edming, Skowronski, Kremer, Wichgers, Murphy, Jacque and Kolste.

We ask that AB 500 be voted on by the Committee as soon as possible.

I would be happy to answer any questions.