

## Background

- In 1999, Utah and Arkansas became the first two states to pass NLC legislation. On Jan. 1, 2000, Texas, Utah and Wisconsin became the first states to implement the NLC.
- The NLC allows a nurse to have one license (in his or her state of residency) and to practice in other states (both physically and electronically), subject to each state's practice law and regulation.
- The NLC includes registered nurses (RNs) and licensed practical or vocational nurses (LPN/LVNs).
- Advanced practice registered nurses (APRNs) are not included in the NLC. A separate APRN Compact offers states the mechanism for mutually recognizing APRN licenses and authority to practice.
- As of 2010, 24 states have joined the NLC. A map of current NLC states can be viewed by visiting [www.ncsbn.org/nlc](http://www.ncsbn.org/nlc).

## NLC General Purposes

- Facilitate state's responsibility to protect the public's health and safety;
- Ensure and encourage cooperation of party states to hold each party state and nurse accountable;
- The exchange of information between states is facilitated by Nursys®, NCSBN's (National Council of State Boards of Nursing) comprehensive nurse licensure information system utilized for license verification and discipline purposes.

## Benefits of the NLC

- Clarification of the authority to practice for many nurses currently practicing in telenursing;
- Greater mobility for nurses;
- Improved state and facility access to licensed nurses during a disaster or other time of great need for qualified nursing services;
- Provides an effective solution to broad public policy issues that ignore state boundaries, but prevent federal interference;
- Effective solution in addressing "suprastate" problems;
- Enables the states (within their sovereign capacity) to act jointly and collectively;
- Drives uniform licensure requirements for nurses;
- Facilitates lawful nursing practice;
- Facilitates continuity of care for consumers through e-health;
- Reduces duplicative regulatory processes and allows state regulatory agencies to reallocate resources;
- Through enhanced discipline and information-sharing among participating NLC states;
- Sharing of information via Nursys, NCSBN's (National Council of State Boards of Nursing) comprehensive nurse licensure information system utilized for license verification and discipline purposes.
- Boards of nursing (BON) are able to solve problems jointly, learning from each other while improving processes and efficiency; and
- Strengthens relationships between BONs.



## Findings of 2006 National Gallup Research on Nurse Licensure Compact

- Of 800 nurses surveyed, 88 percent supported the NLC.
- Nurses responded to having greater flexibility and reduced licensure fees practicing across state lines.
- BONs responded that there is improved communication and collaboration between states regarding disciplinary matters and there are streamlined licensing procedures and decreased regulatory barriers.
- Employers responded that the NLC has facilitated the nurse hiring process.

## Major Barrier Identified

A fear of union strike-breaking is a known barrier to adoption of the NLC. To this end, optional enabling language offers a provision which stipulates that NLC statutes do not supersede existing labor laws. In the history of the NLC, there has not been a reported situation where NLC nurses used their privilege to practice to go into another NLC state where there was a strike.

## Some NLC Supporters

- American Academy of Ambulatory Care Nursing
- American Organization of Nurse Executives
- American Association of Occupational Health Nurses
- American Nephrology Nurses Association
- American Telemedicine Association
- Case Management Society of America
- Center for Tele-health & e-Health Law
- Disease Management Association of America
- Emergency Nurses Association
- State Alliance for e-Health of the National Governors Association Center for Best Practices
- U.S. Department of Commerce

## From the First Annual Report and Recommendations from the State Alliance for e-Health:

*The State Alliance thoroughly examined the opportunities and challenges in pursuing options for multistate practice and e-health expansion. Among these were licensure structures to support cross-state e-health consultations, and remote delivery of health care services; the need to enable mail-order pharmacies, telehealth, and telemedicine; and the potential of the current Nurse Licensure Compact as a model for other health professions. Given the level of activity across the country of state nursing boards supporting the NLC and the NLC's benefits to enabling e-health, the State Alliance encourages the remaining state nursing boards to join the compact as well.*

*Governors and state legislatures should direct the state's nursing board to participate in the NLC, given the importance of the NLC for e-health purposes. Governors and state legislatures should provide financial support to the nursing boards for the initial implementation of the NLC and ensure that the boards are funded at levels needed to assure public protection operations.*