

The Enhanced Nurse Licensure Compact: *Important Information for Nurse Executives*

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Since 2000, licensed practical nurses (LPNs) and registered nurses (RNs) in the Nurse Licensure Compact (NLC) states have enjoyed the advantage of a multistate license. Under the NLC, an eligible nurse with primary

state of residence in a compact state is able to hold 1 multistate license issued by the home state, granting the nurse the authority to practice in any of the 25 NLC states in person or via telehealth.

In 2015, the NLC underwent a comprehensive revision that resulted in a new compact known as the enhanced NLC (eNLC). The enhanced NLC will replace the original NLC, which is anticipated to be phased out in the near future. In order for a state to join the enhanced NLC, it must enact legislation.

The enhanced NLC will be implemented on January 19, 2018. To date, 26 states have enacted the enhanced NLC. Of the 25 original NLC member states, 21 states are transitioning to the eNLC and withdrawing from the original NLC, effective January 19, 2018. The 4 states remaining in the original NLC include New Mexico, Colorado, Wisconsin, and Rhode Island. It is critical that nurse executives stay in front of the curve with the changes taking place (*Figure 1*).

QUESTIONS AND ANSWERS

1. When does the eNLC go into effect?

The enhanced NLC (eNLC) went into effect July 20, 2017, when 26 states enacted the eNLC legislation. The significance of this date is that the compact is officially enacted and the eNLC commission can begin to meet, draft rules and policies, and set an implementation date. The effective date is not the same as the implementation date, which is when nurses can practice in eNLC states that have started issuing eNLC multistate licenses. See this resource for more information: https://www.ncsbn.org/Difference_Between_Effective_Implementation.pdf.

2. What is the difference between the effective date and the implementation date?

Based on the legislation, the effective date of the eNLC is “the earlier of the date of legislative enactment of this Compact into law by no less than twenty-six (26) states or December 31, 2018.” The eNLC was enacted in the 26th state on July 20, 2017. As previously stated, the effective date has been set as July 20, 2017. On this date, the compact’s governing body, the Interstate Commission of Nurse Licensure Compact Administrators, “the Commission,” is formed and may begin meeting and performing the work of the compact. The Commission is charged with drafting rules and policies to govern the operations and implementation of the eNLC.

The implementation date, by contrast, is a date set by the Commission on which eNLC states begin receiving applications for a multistate license and when nurses holding multistate licenses may start to practice in eNLC states.

More information is available at https://www.ncsbn.org/Difference_Between_Effective_Implementation.pdf.

3. When will nurses have multistate licenses in eNLC states?

Nurses in the original NLC states that were grandfathered into the eNLC will be able to practice in eNLC states as of the implementation date, January 19, 2018. Nurses in new states that joined the eNLC (Wyoming, Oklahoma, West Virginia, Georgia, and Florida) will be able to practice in eNLC states upon issuance of a multistate license. Each eNLC state will notify its licensees by mail of the implementation date and the process by which a nurse can obtain a multistate license.

4. What happens to nurses in the original compact if their state does not pass the enhanced NLC legislation?

States that do not pass the eNLC will remain in the original NLC until: the state enacts the eNLC, the state withdraws from the original NLC, or the original NLC ends due to having fewer than 2 states as members. At the time of this writing, Wisconsin, Colorado, New Mexico, and Rhode Island are members of the original NLC that have not yet joined the eNLC. These states plan to introduce legislation in 2018 or sooner.

5. What happens to the original NLC after the enhanced NLC starts?

Once the eNLC is implemented, the original NLC will continue to operate until there are fewer than 2 states as members, at which time it will end. As of January 19, 2018, the 21 states in the original NLC that enacted the eNLC will cease to be members of the original NLC. This means that a nurse in Wisconsin, Colorado, New Mexico, or Rhode Island will then hold a multistate license valid in 4 states, rather than 25 states, and will need to obtain additional licensure in order to practice in any of the eNLC states. Conversely, it also means that nurses in the eNLC will no longer have the authority to practice in those 4 states and will need to obtain additional licensure in order to practice in those states (*Figure 2*).

6. Which nurses are grandfathered into the enhanced NLC, and what does that mean?

Nurses in eNLC states that were members of the original NLC may be grandfathered into the eNLC. Nurses who held a multistate license on the eNLC effective date of July 20, 2017, in original NLC states, will not need to meet the requirements for an eNLC multistate license. They are automatically grandfathered. Nurses issued a multistate license after July 20, 2017, will be required to meet the eNLC multistate license requirements.

7. Why was there a change to the enhanced NLC from the original NLC?

The original NLC began in 2000 and grew to 24 member states by 2010. From 2010 to 2015, 1 more state joined. A primary reason identified for the slowed adoption of the NLC was the lack of uniform criminal background check (CBC) requirements among NLC states. As a result, the eNLC requires that all member states implement CBCs for all applicants upon initial licensure or licensure by endorsement. This revision, along with other significant updates, will remove barriers that kept other states from joining. The eNLC will make it possible to get closer to the goal of all states joining the eNLC.

8. How does the enhanced NLC differ from the original NLC?

Primarily, the enhanced NLC adopts 11 uniform licensure requirements (ULRs) in order for an applicant to obtain a multistate license. One of those requirements is submission to federal and state fingerprint-based CBCs. The full list of ULRs can be viewed at https://www.ncsbn.org/eNLC-ULRs_082917.pdf. A fact sheet identifies the key provisions of the eNLC legislation and highlights the differences between the 2 compacts at <https://nursecompact.com/about.htm>.

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