LC001256

2015 -- S 0329

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2015

AN ACT

RELATING TO BUSINESSES AND PROFESSIONS - NURSES - NURSE LICENSURE COMPACT

Introduced By: Senators Goodwin, and Miller Date Introduced: February 12, 2015 Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1	SECTION 1.	Section 5-34-2	2 of the General	Laws in	Chapter 5	-34 entitled	"Nurses"	is
2	hereby amended to rea	d as follows:						

5-34-2. License and registration required to practice nursing or use title. -- It is
unlawful for any person to practice or offer to practice nursing in this state or to use any title,
sign, abbreviation, card, or device indicating authority to practice nursing unless that person is
licensed and registered under the provisions of this chapter or by the compact set forth in chapter
5-34-2. License and registered under the provisions of this chapter or by the compact set forth in chapter

8 SECTION 2. Chapter 5-34.3 of the General Laws in Title 5 entitled "Nurse Licensure
9 Compact" is hereby repealed in its entirety.

10 5-34.3-1 Short title. This chapter may be cited as the "Nurse Licensure Compact Act".

11 5-34.3-2 The Nurse Licensure Compact. The nurse licensure compact is hereby adopted

12 and entered into with all other jurisdictions that legally join in the compact, which is, in form,

13 substantially similar to this chapter.

- 14 5-34.3-3 Legislative findings. (a) The general assembly finds and declares that:
- 15 (1) The health and safety of the public are affected by the degree of compliance with and
- 16 the effectiveness of enforcement activities related to state nurse licensure laws;
- 17 (2) Violations of nurse licensure and other laws regulating the practice of nursing may
- 18 result in injury or harm to the public;

1	(3) The expanded mobility of nurses and the use of advanced communication				
2	technologies as part of our nation's healthcare delivery system require greater coordination and				
3	cooperation among states in the areas of nurse licensure and regulations;				
4	(4) New practice modalities and technology make compliance with individual state nurse				
5	licensure laws difficult and complex; and				
6	(5) The current system of duplicative licensure for nurses practicing in multiple states is				
7	cumbersome and redundant to both nurses and states.				
8	(b) The general purposes of this compact are to:				
9	(1) Facilitate the states' responsibility to protect the public's health and safety;				
10	(2) Ensure and encourage the cooperation of party states in the areas of nurse licensure				
11	and regulation;				
12	(3) Facilitate the exchange of information between party states in the areas of nurse				
13	regulation, investigation and adverse actions;				
14	(4) Promote compliance with the laws governing the practice of nursing in each				
15	jurisdiction; and				
16	(5) Invest all party states with the authority to hold a nurse accountable for meeting all				
17	state practice laws in the state in which the patient is located at the time care is rendered through				
18	the mutual recognition of party state licenses.				
19	5-34.3-4 Definitions. As used in this chapter:				
20	(1) "Adverse action" means a home or remote state action.				
21	(2) "Alternative program" means a voluntary, non disciplinary monitoring program				
22	approved by a nurse licensing board.				
23	(3) "Coordinated licensure information system" means an integrated process for				
24	collecting, storing, and sharing information on nurse licensure and enforcement activities related				
25	to nurse licensure laws, which is administered by a non-profit organization composed of and				
26	controlled by state nurse licensing boards.				
27	(4) "Current significant investigative information" means investigative information that a				
28	licensing board, after a preliminary inquiry that includes notification and an opportunity for the				
29	nurse to respond if required by state law, has reason to believe is not groundless and, if proved				
30	true, would indicate more than a minor infraction; or investigative information that indicates that				
31	the nurse represents an immediate treat to public health and safety regardless of whether the nurse				
32	has been notified and had an opportunity to respond.				
33	(5) "Home state" means the party state which is the nurse's primary state of residence.				
34	(6) "Home state action" means any administrative civil equitable or criminal action				

2 board or other authority including actions against an individual's license such as: revocation, suspension, probation or any other action which affects a nurse's authorization to practice. 3 4 (7) "Licensing board" means a party state's regulatory body responsible for issuing nurse 5 licenses. (8) "Multistate licensure privilege" means current, official authority from a remote state 6 7 permitting the practice of nursing as either a registered nurse or a licensed practical/vocational 8 nurse in such party state. All party states have the authority, in accordance with existing state due 9 process law, to take actions against the nurse's privilege such as: revocation, suspension, 10 probation or any other action which affects a nurse's authorization to practice. 11 (9) "Nurse" means a registered nurse or licensed practical/vocational nurse, as those 12 terms are defined by each party's state practice laws. 13 (10) "Party state" means any state that has adopted this compact. 14 (11) "Remote state" means a party state, other than the home state, where the patient is 15 located at the time nursing care is provided, or, in the case of the practice of nursing not involving 16 a patient, in such party state where the recipient of nursing practice is located. 17 (12) "Remote state action" means any administrative, civil, equitable or criminal action 18 permitted by a remote state's laws which are imposed on a nurse by the remote state's licensing 19 board or other authority including actions against an individual's multistate licensure privilege to 20 practice in the remote state, and cease and desist and other injunctive or equitable orders issued 21 by remote states or the licensing boards thereof. 22 (13) "State" means a state, territory, or possession of the United States, the District of 23 Columbia. (14) "State practice laws" means those individual party's state laws and regulations that 24 govern the practice of nursing, define the scope of nursing practice, and create the methods and 25 26 grounds for imposing discipline. It does not include the initial qualifications for licensure or 27 requirements necessary to obtain and retain a license, except for qualifications or requirements of 28 the home state. 29 5-34.3-5 Permitted activities and jurisdiction. (a) A license to practice registered nursing 30 issued by a home state to a resident in that state will be recognized by each party state as 31 authorizing a multistate licensure privilege to practice as a registered nurse in such party state. A 32 license to practice licensed practical/vocational nursing issued by a home state to a resident in 33 that state will be recognized by each party state as authorizing a multistate licensure privilege to

permitted by the home state's laws which are imposed on a nurse by the home state's licensing

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1 license, an applicant must meet the home state's qualifications for licensure and license renewal

2 as well as all other applicable state laws.

(b) Party states may, in accordance with state due process laws, limit or revoke the 3 4 multistate licensure privilege of any nurse to practice in their state and may take any other actions 5 under their applicable state laws necessary to protect the health and safety of their citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated 6 licensure information system. The administrator of the coordinated licensure information system 7 8 shall promptly notify the home state of any such actions by remote states.

9 (c) Every nurse practicing in a party state must comply with the state practice laws of the 10 state in which the patient is located at the time care is rendered. In addition, the practice of 11 nursing is not limited to patient care, but shall include all nursing practice as defined by the state 12 practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the 13 nurse licensing board and courts, as well as the laws, in that party state.

14 (d) This compact does not affect additional requirements imposed by states for advanced 15 practice registered nursing. However, a multistate licensure privilege to practice registered 16 nursing granted by a party shall be recognized by other party states as a license to practice 17 registered nursing if one is required by state law as a precondition for qualifying for advanced 18 practice registered nurse authorization.

19 (e) Individuals not residing in a party state shall continue to be able to apply for nurse 20 licensure as provided for under the laws of each party state. However, the license granted to these 21 individuals will not be recognized as granting the privilege to practice nursing in any other party 22 state unless explicitly agreed to by that party state.

23 5-34.3-6 Applications for licensure in a party state. (a) Upon application for a license, the 24 licensing board in a party state shall ascertain, through the coordinated licensure information 25 system, whether the applicant has ever held, or is the holder of, a license issued by any other 26 state, whether there are any restrictions on the multistate licensure privilege, and whether any 27 other adverse action by any state has been taken against the license.

(b) A nurse in a party state shall hold licensure in only one party state at a time, issued by 28 29 the home state.

30 (c) A nurse who intends to change primary state of residence may apply for licensure in 31

the new home state in advance of such change. However, new licenses will not be issued by a

32 party state until after a nurse provides evidence of change in primary state of residence

33 satisfactory to the new home state's licensing board.

34 (d) When a nurse changes primary state of residence by; 1 (1) Moving between two party states, and obtains a license from the new home state, the

2 license from the former home state is no longer valid;

3 (2) Moving from a non party state to a party state, and obtains a license from the new
4 home state, the individual state license issued by the non-party state is not affected and will
5 remain in full force if so provided by the laws of the non-party state;

6 (3) Moving from a party state to a non-party state, the license issued by the prior home
7 state converts to an individual state license, valid only in the former home state, without the
8 multistate licensure privilege to practice in other party states.

9 <u>5-34.3-7 Adverse actions. - In addition to the provisions described in § 5-34.3-5, the</u>
10 following provisions apply:

11 (1) The licensing board of a remote state shall promptly report to the administrator of the 12 coordinated licensure information system any remote state actions including the factual and legal 13 basis for such action, if known. The licensing board of a remote state shall also promptly report 14 any significant current investigative information yet to result in a remote state action. The 15 administrator of the coordinated licensure information system shall promptly notify the home 16 state of any such reports.

17 (2) The licensing board of a party state shall have the authority to complete any pending 18 investigations for a nurse who changes primary state of residence during the course of such 19 investigations. It shall also have the authority to take appropriate action(s), and shall promptly 20 report the conclusions of such investigations to the administrator of the coordinated licensure 21 information system. The administrator of the coordinated licensure information system shall 22 promptly notify the new home state of any such actions.

(3) A remote state may take adverse action affecting the multistate licensure privilege to
 practice within that party state. However, only the home state shall have the power to impose
 adverse action against the license issued by the home state.

(4) For purposes of imposing adverse action, the licensing board of the home state shall
 give the same priority and effect to reported conduct received from a remote state as it would if
 such conduct had occurred within the home state. In so doing, it shall apply its own state laws to
 determine appropriate action.

30 (5) The home state may take adverse action based on the factual findings of the remote
 31 state, so long as each state follows its own procedures for imposing such adverse action.

32 (6) Nothing in this compact shall override a party state's decision that participation in an
 33 alternative program may be used in lieu of licensure action and that such participation shall
 34 remain non-public if required by the party state's laws. Party states must require nurses who enter

1 any alternative programs to agree not to practice in any other party state during the term of the

2 alternative program without prior authorization from such other party state.

5-34.3-8 Additional authorities invested in party state nurse licensing boards. 3 4 Notwithstanding any other powers, party state nurse licensing boards shall have the authority to: (1) If otherwise, permitted by state law, recover from the affected nurse the costs of 5 investigations and disposition of cases resulting from any adverse action taken against that nurse; 6 7 (2) Issue subpoenas for both hearings and investigations which require the attendance and 8 testimony of witnesses, and the production of evidence. Subpoenas issued by a nurse licensing 9 board in a party state for the attendance and testimony of witnesses, and/or the production of 10 evidence from another party state, shall be enforced in the latter state by any court of competent 11 jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued 12 in proceedings pending before it. The issuing authority shall pay any witness fees, travel 13 expenses, mileage and other fees required by the service statutes of the state where the witnesses 14 and/or evidence are located. (3) Issue cease and desist orders to limit or revoke a nurse's authority to practice in their 15

16 state;

(4) Promulgate uniform rules and regulations as provided for in subsection 5-34.3-10(c).
5-34.3-9 Coordinated licensure information system. (a) All party states shall participate
in a cooperative effort to create a coordinated data base of all licensed registered nurses and
licensed practical/vocational nurses. This system will include information on the licensure and
disciplinary history of each nurse, as contributed by party states, to assist in the coordination of
nurse licensure and enforcement efforts.

(b) Notwithstanding any other provision of law, all party states' licensing boards shall
 promptly report adverse actions, actions against multistate licensure privileges, any current
 significant investigative information yet to result in adverse action, denials of applications, and
 the reasons for such denials, to the coordinated licensure information system.

27 (c) Current significant investigative information shall be transmitted through the
 28 coordinated licensure information system only to party state licensing boards.

(d) Notwithstanding any other provision of law, all party states' licensing boards
 contributing information to the coordinated licensure information system may designate
 information that may not be shared with non-party states or disclosed to other entities or
 individuals without the express permission of the contributing state.

33 (e) Any personally identifiable information obtained by a party state's licensing board

34 from the coordinated licensure information system may not be shared with non-party states or

1 disclosed to other entities or individuals except to the extent permitted by the laws of the party 2 state contributing the information. (f) Any information contributed to the coordinated licensure information system that is 3 4 subsequently required to be expunged by the laws of the party state contributing that information, 5 shall also be expunged from the coordinated licensure information system. (g) The compact administrators, acting jointly with each other and in consultation with 6 administrator of the coordinated licensure information system, shall formulate necessary and 7 8 proper procedures for the identification, collection and exchange of information under this 9 compact. 10 5-34.3-10 Compact administration and interchange of information. (a) The head of the 11 nurse licensing board, or his/her designee, of each party state shall be the administrator of this 12 compact for his/her state. 13 (b) The compact administrator of each party shall furnish to the compact administrator of 14 each other party state any information and documents including, but not limited to, a uniform data 15 set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this compact. 16 17 (c) Compact administrators shall have the authority to develop uniform rules to facilitate 18 and coordinate implementation of this compact. These uniform rules shall be adopted by party 19 states, under the authority invested under subsection 5-34.3-8(4). 20 5-34.3-11 Immunity. No party state or the officers or employees or agents of a party 21 state's nurse licensing board who acts in accordance with the provisions of this compact shall be 22 liable on account of any act or omission in good faith while engaged in the performance of their duties under this compact. Good faith in this article shall not include willful misconduct, gross 23 negligence, or recklessness. 24 25 5-34.3-12 Entry into force, withdrawal and amendment. (a) This compact shall enter into 26 force and become effective as to any state when it has been enacted into the laws of that state. 27 Any party state may withdraw from this compact by enacting a statute repealing the same, but no 28 such withdrawal shall take effect until six (6) months after the withdrawing state has given notice 29 of the withdrawal to the executive heads of all other party states. 30 (b) No withdrawal shall affect the validity or applicability by the licensing boards of 31 states remaining party to the compact of any report of adverse action occurring prior to the 32 withdrawal. 33 (c) Nothing contained in this compact shall be construed to invalidate or prevent any 34 nurse licensure agreement or other cooperative arrangement between a party state and a non-party 1 state that is made in accordance with the other provisions of this compact.

2 (d) This compact may be amended by the party states. No amendment to this compact
3 shall become effective and binding upon the party states unless and until it is enacted into the
4 laws of all party states.

5 5 34.3-13 Employers. This compact is designed to facilitate the regulation of nurses,
and does not relieve employers from complying with statutorily imposed obligations. This
7 compact does not supersede existing state labor laws.

8 5-34.3-14 Construction and severability. (a) This compact shall be liberally construed so 9 as to effectuate the purposes thereof. The provisions of this compact shall be severable and if any 10 phrase, clause, sentence or provision of this compact is declared to be contrary to the constitution 11 of any party state or of the United States or the applicability thereof to any government, agency, 12 person or circumstance is held invalid, the validity of the remainder of this compact and the 13 applicability thereof to any government, agency, person or circumstance shall not be affected 14 thereby. If this compact shall be held contrary to the constitution of any state party thereto, the 15 compact shall remain in full force and effect as to the remaining party states and in full force and 16 effect as to the party state affected as to all severable matters.

17 (b) In the event party states find a need for settling disputes arising under this compact:

18 (1) The party states may submit the issues in dispute to an arbitration panel which will be 19 comprised of an individual appointed by the compact administrator in the home state; an 20 individual appointed by the compact administrator in the remote state(s) involved; and an 21 individual mutually agreed upon by the compact administrators of all the party states involved in 22 the dispute.

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(2) The decision of a majority of the arbitrators shall be final and binding.

SECTION 3. Upon the state of Rhode Island's withdrawal from the "Nurse Licensure Compact", the general assembly directs the department of health to develop a regional, multistate compact for registered nurses and practical/vocational nurses licensed in the State of Rhode Island, the State of Connecticut or the Commonwealth of Massachusetts.

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SECTION 4. This act shall take effect on July 1, 2015.

LC001256

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO BUSINESSES AND PROFESSIONS - NURSES - NURSE LICENSURE COMPACT

1 This act would repeal the nurse licensure compact law and directs the department of

2 health to develop a multistate compact for nurses licensed in Rhode Island, Connecticut and

- 3 Massachusetts.
- 4 This act would take effect on July 1, 2015.

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