The “Enhanced” Nurse Licensure Compact

The following article is a combination of the three previous articles published in the Nursing Newsletter regarding the “Enhanced” Nurse Licensure Compact. Share this information with your legislators, employers and fellow nurses. Become involved and spread the word. Iowa has been part of the present compact for 16 years and for continued mobility of nurses and adequate access to care of our patients, Iowa needs to adopt the “Enhanced” NLC to continue what we started in the year 2000.

Background information:
On July 17, 1998, the Iowa Board of Nursing voted to initiate compact legislation. By the year 2000, the law, Iowa Code, chapter 152E, included language on the Nurse Licensure Compact and rules, 655IAC, chapter 16 were in effect.

The Nurse Licensure Compact (NLC) is an interstate compact. It allows a nurse to have one multistate license in their primary state of residency. This permits the nurse to practice in other member states both physically and electronically subject to each state’s practice laws. So what is an interstate compact? An interstate compact is a statutory agreement between two or more states (party states) established for the purpose of solving a particular issue or multi-state concern.

To think of this is in simple terms, the NLC is modeled after the driver’s license compact. Each of us are allowed to drive in another state with a license from the state we reside in, though we follow the rules and regulations of the state we are traveling in.

Currently there are 25 states which are members of the NLC. Within these 25 states the belief is that the practice of nursing takes place in the state where the patient resides. Therefore, if a nurse who resides in Iowa and holds an Iowa license practices in a compact state, such as Missouri, she/he would practice on their multistate license following the rules and regulations of Missouri.

This would appear to be a win-win situation for both the nurse and those states which participate in the compact. The compact allows for portability of the nurse
to meet the needs of patients in many states and decreases the potential of more than one licensing fee for the nurse.

So why fix what is not broken? There are many reasons for the “Enhanced” Nurse Licensure Compact as cited below:

1. Though there are 25 states which participate in the compact, there are 25 states which do not. There may be many factors as to why a state is opposed to joining the compact. One factor may be that the requirements for licensure in the compact states are not stringent enough. Currently states which participate in the compact are not required to complete background checks on initial licensure applicants or endorsements. Iowa does require background checks.

2. The Affordable Care Act (ACA) has increased access to care for the nation’s growing and aging population, which in turn requires creative modalities in the delivery of healthcare.

3. The United States Congress is having national licensure discussions which would remove each state’s individual rights for licensing and governing nurses in their respective states.

4. Other health care professions are developing interstate licensure compacts (i.e. medicine, physical therapy, EMS, psychology).

5. Telehealth services are increasingly being utilized. Telehealth delivery has no geographic boundaries. A nurse or an advanced practice nurse may be practicing in a clinic in Iowa and she/he has patients all over the country who she/he communicates with via technology. Again, if the belief is that the practice of nursing is where the patient is, this nurse would require several licenses in those states which are not part of the compact. The need for facilitating interstate nursing practice continues to grow.

Therefore in 2013 through 2015, members of the National Council of State Boards of Nursing (NCSBN) met several times to redraft a new compact. The “Enhanced” Nurse Licensure Compact was approved by the membership in May of 2015. The NCSBN also approved a new Advanced Practice Registered Nurse Compact.

As a brief reminder the National Council of State Boards of Nursing (NCSBN) is an independent, not-for-profit association comprised of boards of nursing from the
U.S. and around the world. NCSBN is the leading source of data, information and research regarding nursing regulation and related issue. The mission of the NCSBN is to provide education, service, and research through collaboration leadership to promote evidence – based regulatory excellence for patient safety and public protection.

By now you are hopefully asking yourself what are the benefits of the “Enhanced” Nurse Licensure Compact, the following will help to answer your questions:

1. A nurse has the ability to practice in multiple states with one license.
2. The compact reduces regulatory requirements by removing the necessity for obtaining a license in each state.
3. The compact clarifies a nurse’s authority to practice in multiple states via telehealth, which in turn increases patient access to care and provides continuity of care.
4. The compact provides member states with the authority to facilitate a discipline case across state lines.
5. The compact gives nursing boards the ability to share complaint and investigative information throughout the investigative process and there is a shared responsibility for patient safety not governed by geographical boundaries. There is a commitment to the protection of the public.
6. The compact provides for uniform law, rules and policies applicable and is enforceable to all compact states.

Not to confuse the issue, Iowa is presently one of the 25 states which are part of the current Nurse Licensure Compact, but as the “Enhanced” Nurse Licensure Compact becomes adopted by states the need for Iowa to adopt the new compact will become vital.

Uniform Licensure Requirements:
One of the driving forces to adopt the “Enhanced” NLC is that all states joining the compact will require uniform licensure requirements. This is one of the following elements which reinforces the fact that the “Enhanced” NLC is safe and efficient:

1. The current NLC had been operational and successful for more than 15 years.
2. All the safeguards that are built into the current state licensing process are required before a nurse is issued a multistate license.

3. The “Enhanced” NLC has uniform licensure requirements so that all states can be confident the nurses practicing within the NLC have met a set of minimum requirements, regardless of the home state in which they are licensed.

4. Although less than one (1) percent of U.S. nurses ever require discipline by a board of nursing (BON), in the rare event of any disciplinary issues, swift action can be taken by the BON regardless of the state where the nurse is licensed or practices. If a nurse is disciplined, the information is placed into the national database, NURSYS®

The following are the uniform licensure requirements that a nurse must meet to be issued a multistate license, regardless of their home state:

1. Meet the home state’s qualifications.
2. Graduate from a qualifying education program.
3. Passed the NCLEX-RN® or NCLEX-PN® exam (or predecessor exam).
4. Have no active discipline on a license.
5. Submit to a criminal background check and have no prior state or federal felony convictions.
6. Not be currently enrolled in an alternative program.
7. Have a valid U.S. Social Security number.

Grandfathering Clause:
The “Enhanced NLC has a grandfathering clause to address nurses who currently hold a multistate license and how the uniform licensing requirements affects their licensure. A nurse holding a home state multistate license on the “Enhanced” compact’s effective date may retain and renew the license provided that:

- A nurse who changes primary state of residence after the “Enhanced” NLC’s effective date must meet requirements to obtain a multistate license from a new home state.

Example – Nurse Nancy holds a multistate license in Iowa, her primary state of residence. She moves to Missouri, also a compact state, but she has a history of a felony which would now prohibit her from receiving a multistate license in Missouri. Nurse Nancy may receive a single state
license in Missouri if she meets the laws and rules set forth in Missouri for licensure.

- A nurse who fails to satisfy the requirements due to a disqualifying event occurring after the compact’s effective date is ineligible to retain or renew a multistate license.

Example – Nurse John holds a multistate license in Iowa, his primary state of residence. The Iowa Board of Nursing is informed that Nurse John has been convicted of a felony. He would no longer be eligible for a multistate license.

Adoption of the Compact:
As of this publication the “Enhanced” compact is on the move nationally and has been adopted in the following states: Arizona, Florida, Idaho, Missouri, New Hampshire, Oklahoma, South Dakota, Tennessee, Virginia and Wyoming.

The Iowa Board of Nursing will introduce legislation to adopt the “Enhanced” Nurse Licensure Compact in the 2017 Legislative Session.

The effective date of the “Enhanced” NLC legislation is determined by either 26 states joining the compact or by the date December 31, 2018.

- Example 1: If 26 states join by January 1, 2017, the “Enhanced” NLC becomes effective.
- Example 2: If only 20 states have joined by December 31, 2018, the “Enhanced” NLC still becomes effective.

As a reminder here is important information you should know as Iowa moves forward with the “Enhanced” Nurse Licensure Compact:

1. Iowa is one of 25 states currently a member of the Nurse Licensure Compact (NLC).
2. The NLC has been operational for over 15 years.
3. The “Enhanced” NLC is an updated version of the current Nurse Licensure Compact with the goal to have all 50 states become members.
4. Key elements of the “Enhanced” NLC:
   a. Provides for uniform licensure requirements for all states.
b. The practice of nursing takes place in the state where the patient resides.
c. Nurses have the ability to practice in multiple states with one license.
d. Reduces regulatory requirements by eliminating the necessity to obtain a license in each state.
e. Increases access to care while maintain public protection.
f. Clarifies a nurse’s authority to practice in multiple states via telehealth.
g. Allows nurses to quickly cross state borders and provide vital services in the event of a disaster.
h. Removes burdensome expense for both the nurse and the organizations that employ them.
i. Provides member states the authority to facilitate a discipline case across state line.


Keep the momentum going and support the “Enhanced” Nurse Licensure Compact for Iowa.