FAQs: The Enhanced Nurse Licensure Compact
What Policymakers Need to Know

Why should our state join the Nurse Licensure Compact (NLC)?
Dramatic changes are occurring in health care delivery. It is common for patients to travel across state lines for health care. Nurses often provide care across state borders both physically and electronically. The single state license (one license for every state in which the nurse practices) is not economical for nurses or employers. The current licensure model limits mobility of nurses and access to care for patients. In addition, it requires nurse educators that teach online students across the country to hold multiple licenses. The 100-year-old licensure model needs updating and the NLC offers an innovative approach that is safe and in lockstep with 21st century health care.

How does the NLC benefit our state?
• Creates a model that allows nurses to practice freely among member states while still allowing states to retain autonomy and the authority to enforce the state nurse practice act.
• Eliminates redundancy, duplicative regulatory processes and unnecessary fees.
• Improves access to licensed nurses during a disaster or other times of great need for qualified nursing services.
• Benefits military spouses with nursing licenses who often relocate every two years.

How does the NLC keep patients safe?
All nurses practicing under a multistate license must meet a minimum set of licensure requirements, including a fingerprint federal criminal background check. These requirements are based on the highest regulatory standards for licensed health care professionals. Nurses who fail to meet these requirements will not be eligible for a multistate license, and multistate privileges will be removed from nurses when disciplinary actions are taken against a home state multistate license.

Who supports the NLC and why?
In a nationwide survey (2014), 70 percent of nurses support their state joining the NLC. The NLC has removed barriers and impediments to borderless practice. State hospital associations and health care facilities in every state support the NLC, as well as numerous nursing organizations.

Why is this idea coming forward now?
The NLC is not a new idea. It has been in existence for 15 years, with 25 participating states, and has proven itself effective and safe. Recently all state boards of nursing met to add enhancements to the NLC to make it safer and better than ever.

How does the NLC support states’ rights?
While the NLC has a minimum set of licensure requirements that all nurses must meet before obtaining a multistate license, a state entering the NLC still maintains its standards, scope of practice and discipline procedures. The NLC is the best way to regulate the practice of nursing while facilitating interstate practice and allowing each state to have jurisdiction over remote state nurses practicing within the state.
What is the fiscal impact on my state by joining the NLC?
There is a nominal annual fee (currently $6,000) for NLC membership, though the overall fiscal impact of the NLC is unique and varies from state to state. NCSBN offers states grants of financial assistance to help offset the expense of joining and implementing the NLC. NCSBN is also funding the ongoing operational expenses of the compact governing body, the Interstate Commission of Nurse Licensure Compact Administrators.

Who opposes the NLC and why?
In a few states, some nurse unions oppose the NLC; however, in the 25 current compact member states, no empirical evidence suggests that the NLC has ever been the basis for interfering in, or acting as an impediment to, lawful activities of any union acting on behalf of its member nurses. In fact, the model compact statute includes an enabling provision explicitly stating that “this compact does not supersede existing state labor laws.”

Does our state belong to any other compacts like this?
While the NLC is the first interstate compact for a licensed profession, each state is already a member of an average of 25 interstate compacts. The NLC facilitates cross-border practice of nursing whether physically or via telehealth and puts critical systems in place that help keep patients safe. In 2015 the advent of new interstate licensure compacts for physicians, emergency medical technicians, psychologists and physical therapists began. Many states are introducing legislation regarding these additional compacts as well.