

FIRST REGULAR SESSION

# HOUSE BILL NO. 556

## 93RD GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVES BLACK (Sponsor), WALTON, CHINN, BIVINS, ROARK,  
SMITH (14), ICET, JACKSON, COOPER (120), EMERY, MYERS AND KINGERY (Co-sponsors).

Read 1<sup>st</sup> time February 15, 2005 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

0939L.02I

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### AN ACT

To amend chapter 335, RSMo, by adding thereto twelve new sections relating to the nurse licensure compact.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 335, RSMo, is amended by adding thereto twelve new sections, to  
2 be known as sections 335.300, 335.305, 335.310, 335.315, 335.320, 335.325, 335.330, 335.335,  
3 335.340, 335.345, 335.350, 335.355, to read as follows:

#### NURSE LICENSURE COMPACT

##### ARTICLE I

6 **335.300. FINDINGS AND DECLARATION OF PURPOSE. 1. The party states**  
7 **find that:**

8 **(1) The health and safety of the public are affected by the degree of compliance**  
9 **with and the effectiveness of enforcement activities related to state nurse licensure laws;**

10 **(2) Violations of nurse licensure and other laws regulating the practice of nursing**  
11 **may result in injury or harm to the public;**

12 **(3) The expanded mobility of nurses and the use of advanced communication**  
13 **technologies as part of our nation's healthcare delivery system require greater coordination**  
14 **and cooperation among states in the areas of nurse licensure and regulation;**

15 **(4) New practice modalities and technology make compliance with individual state**  
16 **nurse licensure laws difficult and complex;**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17 (5) The current system of duplicative licensure for nurses practicing in multiple  
18 states is cumbersome and redundant to both nurses and states.

19 2. The general purposes of this Compact are to:

20 (1) Facilitate the states' responsibility to protect the public's health and safety;

21 (2) Ensure and encourage the cooperation of party states in the areas of nurse  
22 licensure and regulation;

23 (3) Facilitate the exchange of information between party states in the areas of nurse  
24 regulation, investigation, and adverse actions;

25 (4) Promote compliance with the laws governing the practice of nursing in each  
26 jurisdiction;

27 (5) Invest all party states with the authority to hold a nurse accountable for meeting  
28 all state practice laws in the state in which the patient is located at the time care is rendered  
29 through the mutual recognition of party state licenses.

30 **ARTICLE II**

31 **335.305. DEFINITIONS.** As used in this Compact, the following terms shall mean:

32 (1) "Adverse action", a home or remote state action;

33 (2) "Alternative program", a voluntary, non-disciplinary monitoring program  
34 approved by a nurse licensing board;

35 (3) "Coordinated licensure information system", an integrated process for  
36 collecting, storing, and sharing information on nurse licensure and enforcement activities  
37 related to nurse licensure laws, which is administered by a non-profit organization  
38 composed of and controlled by state nurse licensing boards;

39 (4) "Current significant investigative information":

40 (a) Investigative information that a licensing board, after a preliminary inquiry  
41 that includes notification and an opportunity for the nurse to respond if required by state  
42 law, has reason to believe is not groundless and, if proved true, would indicate more than  
43 a minor infraction; or

44 (b) Investigative information that indicates that the nurse represents an immediate  
45 threat to public health and safety regardless of whether the nurse has been notified and  
46 had an opportunity to respond;

47 (5) "Home state", the party state that is the nurse's primary state of residence;

48 (6) "Home state action", any administrative, civil, equitable, or criminal action  
49 permitted by the home state's laws that are imposed on a nurse by the home state's  
50 licensing board or other authority including actions against an individual's license such as:  
51 revocation, suspension, probation, or any other action affecting a nurse's authorization to  
52 practice;

53 (7) "Licensing board", a party state's regulatory body responsible for issuing nurse  
54 licenses;

55 (8) "Multistate licensing privilege", current, official authority from a remote state  
56 permitting the practice of nursing as either a registered nurse or a licensed  
57 practical/vocational nurse in such party state. All party states have the authority, in  
58 accordance with existing state due process law, to take actions against the nurse's privilege  
59 such as: revocation, suspension, probation, or any other action that affects a nurse's  
60 authorization to practice;

61 (9) "Nurse", a registered nurse or licensed/vocational nurse, as those terms are  
62 defined by each state's practice laws;

63 (10) "Party state", any state that has adopted this Compact;

64 (11) "Remote state", a party state, other than the home state:

65 (a) Where a patient is located at the time nursing care is provided; or

66 (b) In the case of the practice of nursing not involving a patient, in such party state  
67 where the recipient of nursing practice is located;

68 (12) "Remote state action":

69 (a) Any administrative, civil, equitable, or criminal action permitted by a remote  
70 state's laws which are imposed on a nurse by the remote state's licensing board or other  
71 authority including actions against an individual's multistate licensure privilege to practice  
72 in the remote state; and

73 (b) Cease and desist and other injunctive or equitable orders issued by remote  
74 states or the licensing boards thereof;

75 (13) "State", a state, territory, or possession of the United States, the District of  
76 Columbia, or the Commonwealth of Puerto Rico;

77 (14) "State practice laws", those individual party's state laws and regulations that  
78 govern the practice of nursing, define the scope of nursing practice, and create the methods  
79 and grounds for imposing discipline. State practice laws does not include the initial  
80 qualifications for licensure or requirements necessary to obtain and retain a license, except  
81 for qualifications or requirements of the home state.

82 **ARTICLE III**

83 **335.310. GENERAL PROVISIONS AND JURISDICTION. 1.** A license to practice  
84 registered nursing issued by a home state to a resident in that state will be recognized by  
85 each party state as authorizing a multistate licensure privilege to practice as a registered  
86 nurse in such party state. A license to practice licensed practical/vocational nursing issued  
87 by a home state to a resident in that state will be recognized by each party state as  
88 authorizing a multistate licensure privilege to practice as a licensed/practical vocational

89 nurse in such party state. In order to obtain or retain a license, an applicant must meet the  
90 home state's qualifications for licensure and license renewal as well as all other applicable  
91 state laws.

92 2. Party states may, in accordance with state due process laws, limit or revoke the  
93 multistate licensure privilege of any nurse to practice in their state and may take any other  
94 actions under their applicable state laws necessary to protect the health and safety of their  
95 citizens. If a party state takes such action, it shall promptly notify the administrator of the  
96 coordinated licensure information system. The administrator of the coordinated licensure  
97 information system shall promptly notify the home state of any such actions by remote  
98 states.

99 3. Every nurse practicing in a party state must comply with the state practice laws  
100 of the state in which the patient is located at the time care is rendered. In addition, the  
101 practice of nursing is not limited to patient care, but shall include all nursing practice as  
102 defined by the state practice laws of a party state. The practice of nursing will subject a  
103 nurse to the jurisdiction of the nurse licensing board and the courts, as well as the laws, in  
104 that party state.

105 4. This Compact does not affect additional requirements imposed by states for  
106 advanced practice registered nursing. However, a multistate licensure privilege to practice  
107 registered nursing granted by a party state shall be recognized by other party states as a  
108 license to practice registered nursing if one is required by state law as a precondition for  
109 qualifying for advanced practice registered nurse authorization.

110 5. Individuals not residing in a party state shall continue to be able to apply for  
111 nurse licensure as provided for under the laws of each party state. However, the license  
112 granted to these individuals will not be recognized as granting the privilege to practice  
113 nursing in any other party state unless explicitly agreed to by that party state.

#### 114 ARTICLE IV

115 335.315. APPLICATIONS FOR LICENSURE IN A PARTY STATE. 1. Upon  
116 application for a license, the licensing board in a party state shall ascertain, through the  
117 coordinated licensure information system, whether the applicant has ever held, or is the  
118 holder of, a license issued by any other state, whether there are any restrictions on the  
119 multistate licensure privilege, and whether any other adverse action by any state has been  
120 taken against the license.

121 2. A nurse in a party state shall hold licensure in only one party state at a time,  
122 issued by the home state.

123 3. A nurse who intends to change primary state of residence may apply for  
124 licensure in the new home state in advance of such change. However, new licenses will not

125 be issued by a party state until after a nurse provides evidence of change in primary state  
126 of residence satisfactory to the new home state's licensing board.

127 **4. When a nurse changes primary state of residence by:**

128 **(1) Moving between two party states, and obtains a license from the new home**  
129 **state, the license from the former home state is no longer valid;**

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

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

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#### ARTICLE V

137 **335.320. ADVERSE ACTIONS.** In addition to the general provisions described in  
138 Article III of this Compact, the following provisions apply:

139 **(1) The licensing board of a remote state shall promptly report to the administrator**  
140 **of the coordinated licensure information system any remote state actions including the**  
141 **factual and legal basis for such action, if known. The licensing board of a remote state**  
142 **shall also promptly report any significant current investigative information yet to result**  
143 **in a remote state action. The administrator of the coordinated licensure information**  
144 **system shall promptly notify the home state of any such reports;**

145 **(2) The licensing board of a party state shall have the authority to complete any**  
146 **pending investigations for a nurse who changes primary state of residence during the**  
147 **course of such investigations. It shall also have the authority to take appropriate actions(s),**  
148 **and shall promptly report the conclusions of such investigations to the administrator of the**  
149 **coordinated licensure information system. The administrator of the coordinated licensure**  
150 **information system shall promptly notify the new home state of any such actions;**

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

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

158 **(5) The home state may take adverse action based on the factual findings of the**  
159 **remote state, so long as each state follows its own procedures for imposing such adverse**  
160 **action;**

161           **(6) Nothing in this Compact shall override a party state's decision that participation**  
162 **in an alternative program may be used in lieu of licensure action and that such**  
163 **participation shall remain non-public if required by the party state's laws. Party states**  
164 **must require nurses who enter any alternative programs to agree not to practice in any**  
165 **other party state during the term of the alternative program without prior authorization**  
166 **from such other party state.**

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#### ARTICLE VI

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168           **335.325. ADDITIONAL AUTHORITIES INVESTED IN PARTY STATE NURSE**  
169 **LICENSING BOARDS. Notwithstanding any other powers, party state nurse licensing**  
170 **boards shall have the authority to:**

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171           **(1) If otherwise permitted by state law, recover from the affected nurse the costs**  
172 **of investigations and disposition of cases resulting from any adverse action taken against**  
173 **that nurse;**

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174           **(2) Issue subpoenas for both hearings and investigations which require the**  
175 **attendance and testimony of witnesses, and the production of evidence. Subpoenas issued**  
176 **by a nurse licensing board in a party state for the attendance and testimony of witnesses,**  
177 **and/or the production of evidence from another party state, shall be enforced in the latter**  
178 **state by any court of competent jurisdiction, according to the practice and procedure of**  
179 **that court applicable to subpoenas issued in proceedings pending before it. The issuing**  
180 **authority shall pay any witness fees, travel expenses, mileage and other fees required by**  
181 **the service statutes of the state where the witnesses and/or evidence are located;**

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182           **(3) Issue case and desist orders to limit or revoke a nurse's authority to practice in**  
183 **their state;**

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184           **(4) Promulgate uniform rules and regulations as provided for in subsection 3 of**  
185 **section 335.335.**

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#### ARTICLE VII

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187           **335.330. COORDINATED LICENSURE INFORMATION SYSTEM. 1. All party**  
188 **states shall participate in a cooperative effort to create a coordinated data base of all**  
189 **licensed registered nurses and licensed practical/vocational nurses. This system will**  
190 **include information on the licensure and disciplinary history of each nurse, as contributed**  
191 **by party states, to assist in the coordination of nurse licensure and enforcement efforts.**

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

197 **3. Current significant investigative information shall be transmitted through the**  
198 **coordinated licensure information system only to party state licensing boards.**

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

203 **5. Any personally identifiable information obtained by a party states' licensing**  
204 **board from the coordinated licensure information system may not be shared with non-**  
205 **party states or disclosed to other entities or individuals except to the extent permitted by**  
206 **the laws of the party state contributing the information.**

207 **6. Any information contributed to the coordinated licensure information system**  
208 **that is subsequently required to be expunged by the laws of the party state contributing**  
209 **that information, shall also be expunged from the coordinated licensure information**  
210 **system.**

211 **7. The Compact administrators, acting jointly with each other and in consultation**  
212 **with the administrator of the coordinated licensure information system, shall formulate**  
213 **necessary and proper procedures for the identification, collection and exchange of**  
214 **information under this Compact.**

#### 215 **ARTICLE VIII**

216 **335.335. COMPACT ADMINISTRATION AND INTERCHANGE OF**  
217 **INFORMATION. 1. The head of the nurse licensing board, or his/her designee, of each**  
218 **party state shall be the administrator of this Compact for his/her state.**

219 **2. The Compact administrator of each party shall furnish to the Compact**  
220 **administrator of each other party state any information and documents including, but not**  
221 **limited to, a uniform data set of investigations, identifying information, licensure data, and**  
222 **disclosable alternative program participation information to facilitate the administration**  
223 **of this Compact.**

224 **3. Compact administrators shall have the authority to develop uniform rules to**  
225 **facilitate and coordinate implementation of this Compact. These uniform rules shall be**  
226 **adopted by party states, under the authority invested under subsection 4 of section 335.325.**

#### 227 **ARTICLE IX**

228 **335.340. IMMUNITY. No party state or the officers or employees or agents of a**  
229 **party state's nurse licensing board who acts in accordance with the provisions of this**  
230 **Compact shall be liable on account of any act or omission in good faith while engaged in**  
231 **the performance of their duties under this Compact. Good faith in this article shall not**  
232 **include willful misconduct, gross negligence, or recklessness.**

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**ARTICLE X**

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**335.345. ENTRY INTO FORCE, WITHDRAWAL AND AMENDMENT. 1. This Compact shall enter into force and become effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this Compact by enacting a statute repealing the same, but no such withdrawal shall take effect until six months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.**

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**2. No withdrawal shall affect the validity or applicability by the licensing boards of states remaining party to the Compact of any report of adverse action occurring prior to the withdrawal.**

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**3. Nothing contained in this Compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this Compact.**

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**4. This Compact may be amended by the party states. No amendment to this Compact shall become effective and binding upon the party states unless and until it is enacted into the laws of all party states.**

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**ARTICLE XI**

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**335.350. CONSTRUCTION AND SEVERABILITY. 1. This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or provision of this Compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.**

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**2. In the event party states find a need for settling disputes arising under this Compact:**

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

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



**335.355. APPLICABILITY OF COMPACT. 1. The term "head of the nurse licensing board", as referred to in Article VIII of this Compact shall mean the executive director of the Missouri state board of nursing.**

**2. A person who is extended the privilege to practice in this state pursuant to the Nurse Licensure Compact is subject to discipline by the board, as set forth in this chapter; for violation of this chapter or the rules and regulations promulgated herein. A person extended the privilege to practice in this state pursuant to the Nurse Licensure Compact shall be subject to adhere to all requirements of this chapter, as if such person were originally licensed in this state.**

**3. Sections 335.300 to 335.355 are applicable only to nurses whose home states are determined by the Missouri state board of nursing to have licensure requirements that are substantially equivalent or more stringent than those of Missouri.**