## **MINUTES**

## **HOUSE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, March 03, 2016

**TIME:** 9:00 A.M. **PLACE:** Room EW20

**MEMBERS:** Chairman Wood, Vice Chairman Packer, Representatives Hixon, Perry, Romrell,

Vander Woude, Beyeler, Redman, Troy, Rusche, Chew

ABSENT/ Representative(s) Perry, Vander Woude

EXCUSED:

GUESTS: Sandy Evans and Judy Taylor, Board of Nursing; Michael McGrane, Idaho Nurses

Assoc./Nurse Leaders; Wayne Denny, Idaho Bureau of EMS & Preparedness;

Bruce Cheeseman, Idaho EMSP.

**Chairman Wood** called the meeting to order at 9:02 a.m.

**MOTION:** Vice Chairman Packer made a motion to approve the minutes of the February 12,

2016, meeting. Motion carried by voice vote.

**S 1250:** Sandy Evans, Executive Director, Idaho Board of Nursing (IBON), presented

**S 1250**, legislation to adopt the Advanced Practice Registered Nurse (APRN) Compact, an interstate compact providing for multi-state APRN licensure. The regulatory model, known as mutual recognition, is already in place in 25 states through the Nurse Licensure Compact (NLC) for Registered Nurses (RNs) and Licensed Practical Nurses (LPNs). The APRN Compact provides the same state-based solution to allow an APRN one multi-state license issued in the primary state of residence, eliminating redundant regulatory processes while providing state-based public protection. The compact requires the identical language be adopted between states.

The required real-time, comprehensive national database provides shared information on licensure, investigations, discipline, and alternatives to discipline in all jurisdictions through alerts and cross reporting. The database also provides the ability to compare APRN applicants to the National Sex Offender database prior to issuance of a multi-state license.

The Interstate Compact Commission, comprised of APRN Compact administrators from each participating state, is established as the governing body. The Commission facilitates rules based on the national Model Administrative Procedure Act. It also coordinates implementation and administration of the compact.

The APRN Compact provides a solution to regulatory barriers to telehealth, in-state, and interstate practice. It provides an effective way to regulate the practice of APRNs while granting each participating state the power to seek recourse should an adverse event occur. Minimal fiscal impact is expected on the IBON's dedicated funds.

Answering committee questions, **Ms. Evans** said the APRN annual membership fee is expected to be similar to the \$6,000 Nurse Licensure Compact fee. The licensure database cost will be minimal because the Nursing Licensure Compact database is designed to accept the APRN Compact. Someone with a felony in their background would not qualify for the Compact.

For the record, no one indicated their desire to testify

MOTION: Vice Chairman Packer made a motion to send S 1250 to the floor with a DO

PASS recommendation. Motion carried by voice vote. Rep. Troy will sponsor

the bill on the floor.

S 1251: Sandy Evans, Executive Director, IBON, presented S 1251, legislation to adopt

the "enhanced" NLC to replace the current compact. The enhanced version incorporates uniform statutes, rules, and policies which are applicable and enforceable in all states. The fiscal impact is anticipated to be a one-time cost of

less than \$2,000 to inform stakeholders of the improved compact.

For the record, no one indicated their desire to testify.

MOTION: Rep. Redman made a motion to send S 1251 to the floor with a DO PASS

recommendation. Motion carried by voice vote. Rep. Beyeler will sponsor the

bill on the floor.

S 1281: Wayne Denny, Bureau Chief, Bureau of Emergency Services and Preparedness,

Department of Health & Welfare (DHW), presented **S 1281**, legislation to enact the Recognition of Emergency Medical Services (EMS) Personnel Licensure Interstate Compact (REPLICA). This compact allows EMS personnel from border communities to practice in both states, addresses wildland fire staffing issues, and provides licensure reciprocity without additional testing. Membership will also formally recognize Idaho's commitment to simplifying EMS licensure processes for military veterans and their spouses. Disciplinary actions remain the duty of the

Idaho EMS Physician Commission and the EMS bureau.

The new compact legislation includes definitions, requirements for the home state regional emergency management team (REMT) certification exam and background checks, direction for the home state scope of practice, revoking or restricting a practice, compact severability, reporting requirements, and remote state restrictions. The Interstate Commission is the administrating body and will have rule making authority. Each member state will have a seat on the commission. There will be an annual member state assessment which is not anticipated to be excessive. The compact will become effective once enacted by a tenth state, which is expected in 2017.

Answering committee questions, **Mr. Denny** stated the annual dedicated funds revenue is approximately \$1M from drivers license fees and vehicle registrations. The compact cost is anticipated to be \$3,000 per year. This is a state assessment, not a licensed provider fee. The scope of practice will be clarified during rule making. Idaho's scope of practice adds optional models to the national model. Other states may not have the same optional models. Although home care EMS is not specifically addressed, an emergency medical technician (EMT) working in a community health EMS (CHEMS) capacity would be included in the compact.

For the record, no one indicated their desire to testify.

MOTION: Rep. Hixon made a motion to send S 1281 to the floor with a DO PASS

recommendation. Motion carried by voice vote. Vice Chairman Packer will

sponsor the bill on the floor.

**ADJOURN:** There being no further business to come before the committee, the meeting was

adjourned at 9:52 a.m.

Representative Wood	Irene Moore
Chair	Secretary