



February 20, 2023

House Committee on Behavioral Health and Health Care
Oregon State Capitol
900 Court St. NE
Salem, OR 97302

Re: House Bill 2408
Delivered electronically to OLIS

Chair Nosse, Vice Chairs Goodwin and Nelson, and members of the committee:

The Oregon Association of Hospitals and Health Systems (OAHS) is a mission-driven, nonprofit association representing Oregon's 62 community hospitals. Together, hospitals are the sixth largest private employer statewide, employing more than 70,000 employees. Committed to fostering a stronger, safer Oregon with equitable access to quality health care, OAHS provides services to Oregon's community hospitals ensuring all are able to deliver dependable, comprehensive health care to their communities; educates government officials and the public on the state's health landscape; and works collaboratively with policymakers, community organizations, and the health care community to build consensus on and advance health care policy benefiting the state's 4 million residents.

Hospitals are more than just buildings; they are cornerstones within the communities they serve. Our hospitals are employers, partners in community projects, and community spaces—all while providing vital health services to generation after generation of families in communities across Oregon. We know that when our hospitals are strong, our communities win.

We appreciate the opportunity to express support for House Bill 2408, which would enact the interstate Nurse Licensure Compact. The Nurse Licensure Compact (NLC) allows registered nurses (RNs) and licensed practical nurses (LPNs) to hold one multistate license in their primary state of residence and to practice in-person or telephonically in other compact states, while subject to each state's practice and discipline laws. We believe that licensing compacts increase access to care while maintaining public protection at the state level. The Compact model extends the ability for a practitioner to move more freely from state to state. The Compact also improves the ability of cross-state or multiple state health systems to staff effectively and efficiently.

Currently, the NLC has been enacted in 39 jurisdictions (see enclosed map) allowing more than 2 million nurses the opportunity to practice in all compact states and territories.

Nurses are an integral part of patient care. Hospitals are the top practice setting for RNs in Oregon with nearly 60% working there.¹ Skilled nursing facilities/long term care are the top practice setting for LPNs in Oregon with almost 30% working there.²

In 2022 through House Bill 4003, the Oregon Legislature directed the Oregon Health Care Workforce Committee to conduct a study of the nursing workforce to identify and describe challenges in addressing nurse staffing shortages and offer findings and recommendations. According to that report “Oregon’s nursing education capacity does not produce all the nurses the state needs, leaving Oregon dependent on inter-state migration.”³ Only about 72% of Oregon’s annual demand for new RNs is met by graduates of the state’s nursing education programs, with the balance made up by an increasing number of RNs from other states gaining Oregon licenses by endorsement.⁴ Additionally, the number of Oregon LPN graduates in 2020 was 38% smaller than in 2012.⁵

The Future of Oregon’s Nursing Workforce report developed through House Bill 4003 discussed the Nurse Licensure Compact and noted that “It is generally recognized that the Compact does not increase the size of the overall nursing workforce, but it is a policy solution that addresses short-term staffing needs and facilitates telehealth. It also could be beneficial during emergencies.”⁶ Given that many of the policy solutions to Oregon’s health care workforce challenges require long timelines for the impacts to be recognized, it would be valuable for the Oregon Legislature to also adopt policy solutions that include more immediate relief to the challenges we face, such as the Nurse Licensure Compact.

Other reflections from the report⁷ that are also worth consideration:

- During the state’s public health emergency declaration for COVID-19, nurses licensed in other states could practice in Oregon through emergency provisions; however, those nurses were not under the supervision of the Oregon State Board of Nursing (OSBN) and therefore OSBN could not initiate disciplinary processes. “If those nurses had been practicing in Oregon through the Compact, OSBN would have had authority to oversee their practice and initiate disciplinary action if necessary.”

¹ Health Care Workforce Reporting Program. (2021). *Oregon’s health care workforce: supply and profiles*. Interactive display accessed 02/09/2023. Oregon Health Authority. <https://go.usa.gov/xvn3Z>

² Health Care Workforce Reporting Program. (2021). *Oregon’s health care workforce: supply and profiles*. Interactive display accessed 02/12/2023. Oregon Health Authority. <https://go.usa.gov/xvn3Z>

³ Future of Oregon’s Nursing Workforce (November 2022), page 73: [The Future of Oregon's Nursing Workforce: Analysis and Recommendations \(oregoncenterfornursing.org\)](#)

⁴ Oregon’s Health Care Workforce Needs Assessment 2023, page 63. Draft report, available here: <https://www.oregon.gov/oha/HPA/HP-HCW/Meeting%20Documents/4.-2023-Health-Care-Workforce-Needs-Assessment-Draft-Report.pdf>

⁵ Oregon’s Health Care Workforce Needs Assessment 2023, page 59. Draft report, available here: <https://www.oregon.gov/oha/HPA/HP-HCW/Meeting%20Documents/4.-2023-Health-Care-Workforce-Needs-Assessment-Draft-Report.pdf>

⁶ Future of Oregon’s Nursing Workforce (November 2022), page 68: [The Future of Oregon's Nursing Workforce: Analysis and Recommendations \(oregoncenterfornursing.org\)](#)

⁷ Future of Oregon’s Nursing Workforce (November 2022), page 68: [The Future of Oregon's Nursing Workforce: Analysis and Recommendations \(oregoncenterfornursing.org\)](#)

- “The main effect of the Compact is that it addresses licensure portability issues; it removes the administrative barriers associated with state boards of nursing having to adjudicate each application for licensure endorsement from nurses licensed in another state.”
- “In interviews, key informants generally expressed support for Oregon joining the Compact.”

The report ultimately concluded that:

“OSBN and the Legislature should explore joining the Nurse Licensure Compact with a realistic understanding of its benefits and with strategies to mitigate its costs. If Oregon joins the Compact, it needs to identify strategies to track information about Compact nurses working in the state. Additional funds may need to be allocated to OSBN to ensure it can adapt to the higher administrative costs of managing two types of licenses while losing revenue from licensing fees.”⁸

Earlier this month in President Biden’s State of the Union, the President outlined a vision to advance progress on his Unity Agenda; included in it was support for interstate license reciprocity for delivery of mental health services across state lines.⁹ Interstate license reciprocity was called out as a mechanism to mitigate challenges to connecting more Americans to care. We appreciate and support inclusion of this tactic in the President’s agenda as we feel that interstate license reciprocity, like the Nurse Licensing Compact, would facilitate increased access to care for Oregonians.

Thank you for the opportunity to engage on behalf of our members and the communities they serve.

Thank you,



Andi Easton
Vice President of Government Affairs
Oregon Association of Hospitals and Health Systems

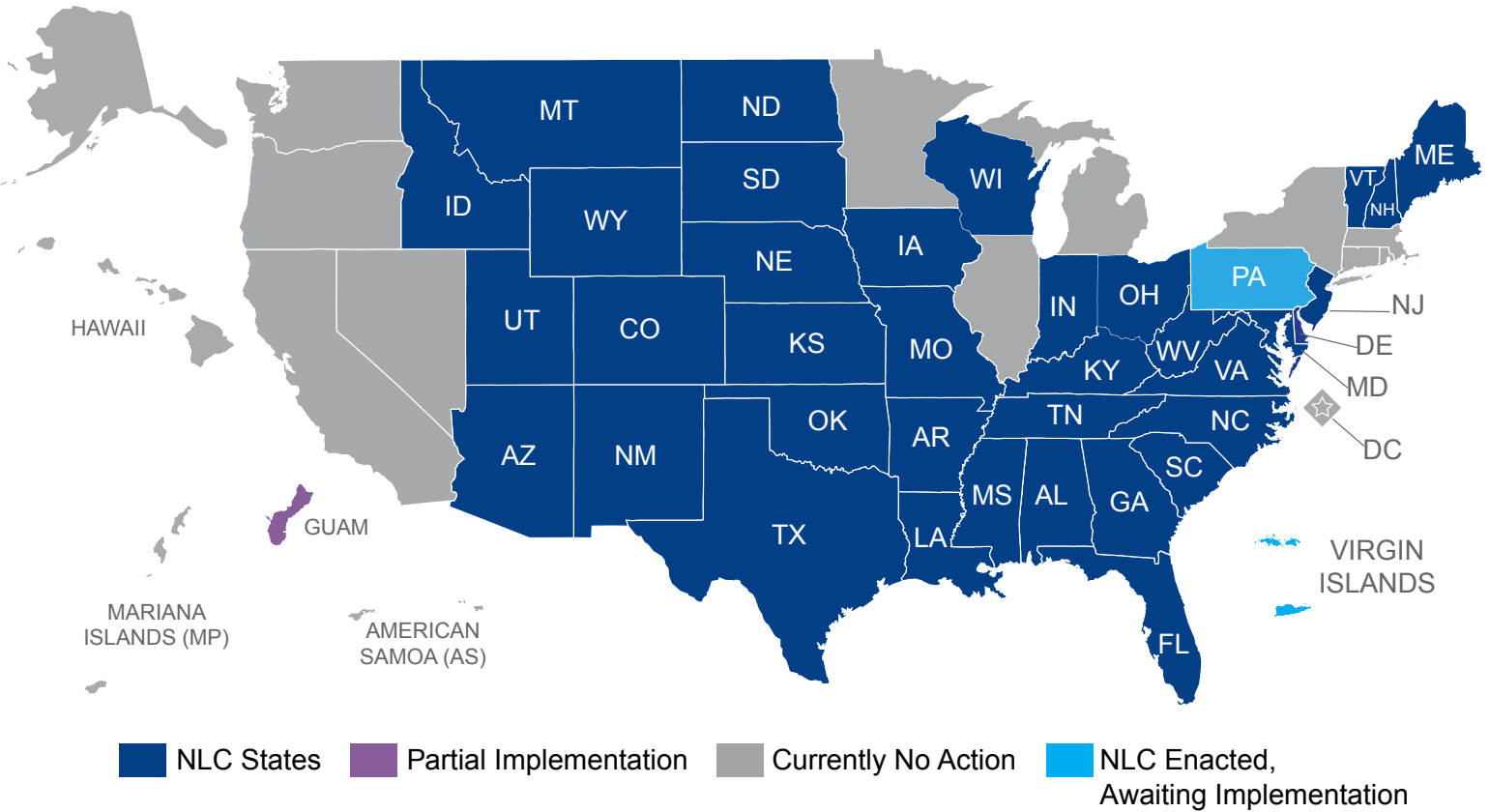
⁸ Future of Oregon’s Nursing Workforce (November 2022), page 74: [The Future of Oregon's Nursing Workforce: Analysis and Recommendations \(oregoncenterfornursing.org\)](#)

⁹ FACT SHEET: In State of the Union, President Biden to Outline Vision to Advance Progress on Unity Agenda in Year Ahead, February 7, 2023, <https://www.whitehouse.gov/briefing-room/statements-releases/2023/02/07/fact-sheet-in-state-of-the-union-president-biden-to-outline-vision-to-advance-progress-on-unity-agenda-in-year-ahead/>



NLC States

39 states have enacted the NLC



Pending NLC States

Guam: Pending implementation in 2022, tentatively. Nurses holding a multistate license in other NLC states may practice in Guam. Guam residents cannot obtain a multistate license until implementation is complete.

Pennsylvania: NLC enacted July 1, 2021. Implementation date is TBD. Criminal background checks must also be implemented. PA residents cannot obtain a multistate license until implementation is completed. Nurses in other NLC states with a multistate license may not practice in PA until implementation is complete.

Virgin Islands: NLC enacted Dec. 6, 2021. Implementation date is TBD. Criminal background checks must also be implemented. VI residents cannot obtain a multistate license until implementation is completed. Nurses in other NLC states with a multistate license may not practice in VI until implementation is complete.