

March 1, 2021

Professional Distinction

Personal Dignity

Patient Advocacy

Senator Rosen Members of the Finance Committee Minnesota Senate Bldg. 95 University Ave W, St Paul, MN 55103 St. Paul, MN 55155

Senator Rosen and Members of the Finance Committee:

With 22,000 members, the Minnesota Nurses Association (MNA) is the largest voice for professional nursing in the State of Minnesota. We are a leader in both the labor and health care communities and a voice for our members on issues relating to the professional, economic, and general well-being of nurses and in promoting the health and well-being of the public. We write to express our opposition to SF 2302, the Nurse Licensure Compact.

As it pertains to the purview of the Finance Committee, we have concerns about the long-term financial impact the Nurse Licensure Compact may have on Board of Nursing operations and nurses seeking a Minnesota license. The most recent fiscal note on the Nurse Licensure Compact estimates the Board will lose roughly \$378,250 per year in renewal fees. Additionally, the Board would lose revenue from new licensees in the future who opt for a multistate licensure, rather than a Minnesota-specific license.

With the loss of revenue, we have the following concerns:

- Licensing fees would be raised for Minnesota licensees. This is even cited in the most recent fiscal note to offset the revenue loss.
- The Board of Nursing would be insufficiently funded to conduct their work of ensuring patient safety and practitioner accountability.
- Currently, licensing fees go towards other important programs like the Criminal Background Check Program, the Prescription Monitoring Program, and the HIV Prevention Program. With a loss of revenue, we worry that funding will be pulled from these vital programs.

In addition to budgetary concerns, we have the following concerns about the Nurse Licensure Compact:

- Inconsistent and diminished quality patient care: MNA believes that nurses everywhere, whether they practice Minnesota or in Mississippi, care deeply about their patients. However, to gain licensure in Minnesota, we simply have a higher standard.
- Loss of state control: Minnesota would have to cede our power to an interstate commission, headquartered out of Washington DC. If the state wanted to change multistate licensure requirements to better match the unique needs of our state, the state would be unable to do so unless all other states agreed to that change.

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- Minnesota has a healthy supply of nurses already: There are 120,420 registered nurses in Minnesota and the number of RN licenses has increased by over 13,000 in the past five years.
- Nurses may leave the state: While Minnesota has a surplus of registered nurses, other states already in the Compact – including Texas, Mississippi, Tennessee, and Louisiana – face a nurse shortage, and may draw nurses away from Minnesota if we joined.
- The Compact would hurt rural healthcare access. Replacing individualized care by registered nurses at the bedside with computerized healthcare can present access challenges to rural residents and could lead to more hospital closures in Greater Minnesota as visits and revenues leave the clinic.
- The Nurse Licensure Compact is different than other medical compacts Minnesota is part of: The physician compact is an expedited licensure model that still requires the physician to receive an individual state license for each state they intend to practice in. The PSYPACT is primarily for telehealth. While the PSYPACT allows a practitioner to conduct in-person care, this is only limited to 30 days within a calendar year. It's meant to be used in an emergency. Nursing, especially in a hospital setting, necessitates in-person care.

MNA recognizes that with current strains on our hospital systems due to COVID, the Compact is assumed to solve these problems, but I, and my fellow nurses, are here to tell you that it will not. What it will do is distract from the roots of our current workforce issues.

What we face is a shortage of nurses willing to work in unsafe conditions that jeopardize the health of their patients, their license, and their mental health. The Nurse Licensure Compact is not a solution to the short-term workforce issues we face. Instead, it could have a lasting and devastating impact on patient care and the nursing profession.

For those reasons we oppose SF 2302.

Sincerely,

Mary Turner, RN President

Minnesota Nurses Association

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