

September 1, 2020

Members of the House Health Care Committee
Vermont State House
115 State Street Montpelier, VT 05633

Via Email

Dear Representatives:

We are writing to urge you to pass S.125, an act relating to Vermont's adoption of the Interstate Nurse Licensure Compact.

As you know, Vermont's rural health care system entered the current global pandemic struggling with significant workforce shortages. Prior to March, providers across our continuum were united in the effort to address this issue. The needs in the area of nursing were identified as particularly acute, contributing to significant increases in traveling nurse costs in hospitals, long-term care facilities and home health agencies. The Rural Health Task Force spent considerable time evaluating this issue and crafting a series of recommendations that would support the development of our workforce. The task force recommendations include both short-term and long-term strategies to address these challenges, including educating and retaining more of our own nurses in Vermont as well as attracting nurses from around the country. Adoption of the Interstate Nurse Licensure Compact is a key task force recommendation. As you will recall from the robust testimony, it is also supported by the Office of Professional Regulation, the Vermont Board of Nursing, and the American Nurses Association.

The task force workforce report can be found here:

<https://gmcboard.vermont.gov/sites/gmcb/files/documents/Rural%20Health%20Services%20Report-%20Workforce%20White%20Paper%20FINAL%201.23.20.pdf>

More than 30 states are already members of the compact, including New Hampshire, where many of the nurses employed in Vermont reside. They cross the border every day to come to work in border communities. Failing to adopt this measure will place Vermont health care providers at a competitive disadvantage in recruiting nursing staff that want the flexibility a compact license provides. We must adapt to meet the needs of the workforce and encourage nurses to choose Vermont as their home state. Vermont is currently in a unique position to attract nurses from across the nation as many look to relocate to less urban areas in light of the pandemic.

In addition, the pandemic has highlighted the importance of telehealth services as a critical means of providing care. Patients will continue to expect to access care remotely, and it is the location of the patient not the clinician that determines what licensure is required. This will create challenges after the public health emergency waivers end. For example, along the Connecticut River it's common for Vermont patients to travel to New Hampshire for health care and New Hampshire patients to receive care in Vermont or via a combination- a specialist in one state and a primary care in another. To stay connected with their patients, those practitioners need both a Vermont and a New Hampshire license. Rather than having to obtain multiple licenses, a compact license would be a preferable means of ensuring ongoing access to health care services.

Our experience with COVID-19 demonstrates the need to develop a more robust health care workforce, particularly in the area of nursing. While we have not seen a tremendous number of cases to date in Vermont, we have experienced severe and negative impacts on the availability of nursing staff in the few facility outbreaks Vermont has experienced. In addition, providers are challenged to adequately staff in instances where staff need to quarantine because of a possible exposure to COVID, illness, or travel to a restricted area. Lack of child-care options is also exacerbating the nursing shortage. This pandemic has taught us that we need to implement the identified solutions to increase the availability of nurses across the continuum of care now.

Your support of S.125 will have a concrete and positive long-term impact on the development of the nursing workforce in Vermont. Passage of this bill will provide meaningful assistance to ensure that we will have the providers we need to care for Vermonters once this crisis is over, and in the event we experience future public health emergencies.

Sincerely,

Devon Green
VP, Government Relations
Vermont Association of Hospitals and Health Systems

Jill Mazza Olson
Executive Director
VNAs of Vermont

Laura Pelosi, on behalf of
Vermont Health Care Association
Bayada Home Health and Hospice

Julie Tessler
Executive Director
Vermont Care Partners: VT Council

Georgia J. Maheras
Vice President of Policy & Strategy
Bi-State Primary Care Association

Patrick Gallivan
Executive Director
Vermont State Dental Society

Matthew S. Houde
Vice President, Government Relations
Dartmouth Hitchcock Health