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OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE

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**New York State Senate
Committee on Finance
State Capitol Building Room 416
Albany, NY 12247**

**Senator Liz Krueger
Chair**

**New York State Assembly
Committee on Ways and Means
198 State Street Room 711-A
Albany, NY 12248**

**Assemblyman J. Gary Pretlow
Chair**

**Remarks of
Christopher R. Arnold
Mid-Atlantic Region Liaison
United States Department of Defense-State Liaison Office**

Support of: Senate S.3007, Assembly A.3007, Part W – Enacts into law the nurse licensure compact to facilitate multistate licensure for nurses.

Testimony

Honorable legislators, the Department of Defense is grateful for the opportunity to support the policies reflected in Part W of the 2025 Executive Budget for Health and Mental Hygiene, addressing licensing issues affecting our uniformed service members and their families. These policies meet the Department's fullest intent regarding military spouse employment and economic opportunities.¹

For the Department, maintaining high standards in occupational and professional licensure is non-negotiable. The Nurse Licensure Compact, or "NLC", aligns with this ethos, offering a beacon of stability and excellence reinforcing the Department's unwavering commitment to those who serve our nation.

I am Christopher Arnold, the Mid-Atlantic Region Liaison at the United States Department of Defense-State Liaison Office, operating under the direction of Under Secretary of Defense for

¹ The Nurse Licensure Compact allows a nurse to hold one multistate license with a privilege to practice in other compact states. This is significant for the military community in that along with active-duty military spouses receiving the benefit of compacts, active-duty members, members of the reserve component, reserve component spouses, transitioning Service members and other Veterans benefit from the mobility provided through the compact.

Personnel and Readiness. We represent the Department and establish relationships with State leaders across the country to harmonize state and federal law and regulation on policy problems of national significance. I thank you for the opportunity to address you today and for your support of our service members and their families.

The ability to practice a profession in different States without the need for multiple licenses is crucial for warfighters and their families, especially considering their frequent relocations (permanent change of station, or “PCS”) relative to civilian counterparts.² Other than an interstate compact, there are no actions a State government can take to support residents of their State who are currently stationed in a different State obtain a license.

The purpose of the NLC is to facilitate interstate practice of nursing with the goal of improving public access to healthcare, while preserving the regulatory authority of States to protect public health and safety through the current system of state licensure. The eleven requirements for the NLC’s multistate license are identical to New York State’s standard licensure requirements and guarantee that bedside nurses follow the same licensing guidelines, with additional safeguards such as mandatory background checks and fingerprinting included under a compact license.³

The NLC allows an active-duty service member, or their spouse, to designate a home State where the individual has a current license in good standing. This State then serves as the individual’s home State for as long as the service member is on active duty, while adhering to the laws, rules and scope of practice in New York.

Interstate licensure compacts have been instrumental in expanding spousal employment opportunities, and easing the burden on military spouses who must navigate the challenging process of transferring their professional licenses or credentials with each PCS move.⁴ The streamlined licensure process reduces costs associated with recertification and lost income due to employment gaps, benefitting both military families and increasing force readiness and retention.

The Secretaries of the Military Departments have made the importance of military spouse licensure explicitly clear as they consider the availability of license reciprocity when evaluating future basing or mission alternatives.⁵ Notably, 10 U.S.C. § 1781(b) note requires the military services to produce annual basing scorecards considering military family readiness issues as a function of combat effectiveness.⁶

² “Military spouses are 10 times more likely to move across State lines than their civilian counterparts,” *Supporting Our Military Families: Best Practices for Streamlining Occupational Licensing Across State Lines*, U.S. Department of Treasury and U.S. Department of Defense, February 2012, page 7.

³ Zhong, Elizabeth H., Brendan Martin, Charlie O’Hara, Michaela Reid, Nicole Kaminski-Ozturk, Michelle Buck, Nicole Livanos, and Maryann Alexander. "Highlights of the Nurse Licensure Compact Survey Findings: Nurses’ Needs, Experiences, and Views." *Journal of Nursing Regulation* 15, no. 2 (2024): 38-44.

⁴ Shakya, Shishir, Sriparna Ghosh, and Conor Norris. "Nurse licensure compact and mobility." *Journal of Labor Research* 43, no. 2 (2022): 260-274.

⁵ 10 U.S.C. §1781b (Public Law 116-283, Section 2883).

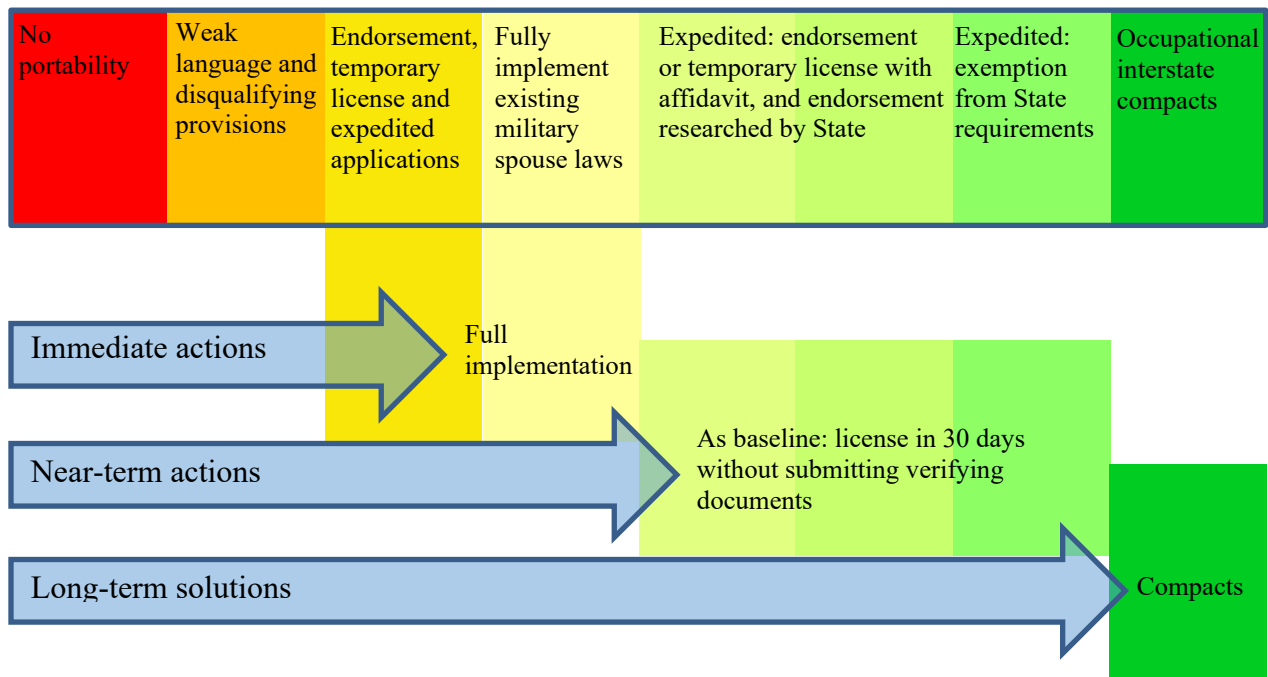
⁶ Notably, §2883(h) requires the Department and each of the military services to produce annual basing decision scorecards at the state and installation level considering military family readiness issues, including interstate portability of licensure credentials.

Occupational licensure compacts provide consistent rules for licensed members to work in other States, such as New York residents presently domiciled in other states while accompanying their military spouse on active duty. Common misinformation about compacts is that they either lower or raise the standards for the occupation, when in fact, compact states have the option to issue a “compact license” and also a “State-only license” to maintain their State’s standards.⁷

Professional licensure has been an enduring problem for military spouses. Obtaining a license in a new State can be both time consuming and expensive, and military spouses often cannot adequately anticipate how to prepare for licensure in a new State due to the unpredictable nature of military moves. The short duration of military assignments, coupled with lengthy relicensing processes, can discourage military spouses from seeking relicensure, causing them to quit an occupation or causing military families to leave the military.

Complicating matters further, the term “reciprocity” is used differently among the States. The continuum of reciprocity related programs is represented graphically below. The continuum goes from red, representing little to no portability, to dark green, representing the DoD’s optimum state of full reciprocity.

The Department advocates that States should pursue multiple approaches to reciprocity simultaneously. Available alternatives can be categorized as being more immediately attainable, achievable within the near-term, or obtainable in the long-term:



The secretaries must consider “whether the State in which an installation subject to a basing decision is or will be located ... has entered into reciprocity agreements to recognize and accept professional and occupational licensure and certification credentials granted by or in other States or allows for the transfer of such licenses and certifications granted by or in other States.” (Id. (b))

⁷ Livanos, Nicole. "The Path to Passage: Massachusetts’ Journey to Joining the Nurse Licensure Compact." *Journal of Nursing Regulation* 15, no. 4 (2025): 60-63.

The Department's commitment to interstate compacts is rooted in addressing the significant burden of occupational relicensing that disproportionately affects military spouses. With an annual 14.5% of military spouses moving across State lines compared to 1.1% for civilian spouses, the need for streamlined licensure processes is critical.⁸

Approximately 34% of military spouses in the labor force require full licensure, and 19% of them face challenges maintaining their licenses.⁹ A 2023 study showed consistent evidence the NLC was proven to significantly improve employment outcomes and increase labor force participation by 5% and the probability of employment by 8% for military spouses.¹⁰

Congress provided the Department authority to enter into a cooperative agreement with the Council of State Governments to provide grants to professions in order to develop compact law to be approved by States.¹¹ The Department has provided funding to ten professions, and two additional compacts are currently under development.¹²

In addition to supporting the drafting of model compact laws for professions, federal law authorizes DoD to support professions with developing database systems to make the compacts more efficient and operational.¹³ These database systems allow States to share information about practitioners using compact provisions to work in member States.¹⁴

The NLC is active in 43 states, including neighboring Connecticut, Massachusetts, New Jersey, Pennsylvania, and Vermont. In nearby Pennsylvania, the state nurse's association had originally been opposed to the Commonwealth joining the NLC, but ultimately supported joining the compact as "*reservations initially expressed by some groups, such as significant lost revenue to the State Board of Nursing or public safety concerns, have not materialized [in other member states].*"¹⁵

In closing, we are grateful for the tremendous efforts that the Empire State has historically made to support our service members and their families. We appreciate the opportunity to support

⁸ Corry, Nida H., Rayan Joneydi, Hope S. McMaster, Christianna S. Williams, Shirley Glynn, Christopher Spera, and Valerie A. Stander. "Families serve too: military spouse well-being after separation from active-duty service." *Anxiety, Stress, & Coping* 35, no. 5 (2022): 501-517.

⁹ Brannock, Mary K., and Nicole A. Bradford. "Barriers to licensure for military spouse registered nurses." *Journal of Nursing Regulation* 11, no. 4 (2021): 4-14.

¹⁰ Kim, Joy J., Michael M. Joo, and Laura Curran. "Social Work Licensure Compact: Rationales, expected effects, and a future research agenda." *Clinical Social Work Journal* 51, no. 3 (2023): 316-327.

¹¹ 10 U.S.C. §1784 (Public Law 116-120, Section 575).

¹² Through a cooperative agreement with the Council of State Governments, grants will allow selected professions to work with CSG's National Center for Interstate Compacts to develop model interstate occupational licensure compact legislation, addressing license portability affecting transitioning military spouses, along with other practitioners in the profession.

¹³ *See supra* at 10.

¹⁴ The current effort to develop compacts through a cooperative agreement and to approve compacts is a collaboration between the federal government, state governments and non-governmental organizations representing professionals and state licensing boards. Through this collaborative effort, all practitioners within a profession will have greater mobility while sustaining the focus on assuring public safety through licensure.

¹⁵ Noah C. Logan. *PSNA Responds to Nurse Licensure Compact* (Letter to Speaker Cutler). Pennsylvania State Nurses Association. July 16, 2020. <https://www.psna.org/psna-responds-to-nurse-licensure-compact/>

these policies and are grateful to you for taking the time to consider these issues. As always, as Mid-Atlantic Region Liaison, I stand ready to assist and answer whatever questions you may have.

Yours etc.,

CHRISTOPHER R. ARNOLD
Mid-Atlantic Region Liaison
Defense-State Liaison Office