BACKGROUND and HISTORY

NAB’s Background, Research and Initial Stakeholder Engagement:

In response to the challenges and changing long term care environment the National Association of Long Term Care Administrator Boards (NAB) began a forward looking approach to how long term care leaders are educated, trained and licensed to practice along the continuum of care. At the same time, NAB committed to addressing the challenges of professional image, inconsistent practice standards, licensure portability, meeting the needs of employers, regulators and supporting NAB’s member regulatory boards and agencies in their role of public protection.

The first step was to validate the role of the contemporary long term care leader to practice along the continuum of care and within lines of specialized service. This was accomplished through conducting a professional practice analysis (PPA) that examined both common and specialized tasks, knowledge and skills (KSS) required along multiple lines of service. The results of the PPA validated the hypothesis that a significant common core of KSSs cross multiple lines of service supporting establishment of a broad based approach to how LTC leaders are trained, educated and licensed. The PPA supports the establishment of a new aspirational and voluntary qualification standard for the Health Services Executive (HSE).

The approach is simple; the HSE qualification recognizes a common core and unique entry level competencies by line of service. Successful demonstration of this combination of competencies as measured by education, experience and examination meets or exceeds the current requirements of licensure to practice as a nursing home administrator (NHA), an assisted living administrator (RCAL), and administrators practicing in the field of home and community based services (HCBS) in the majority of jurisdictions. Thus the NAB has positioned this approach as “Licensure by Equivalency”. It continues to support examination and licensure of NHA and RCAL while adding the option of licensure for HCBS professionals who choose to be licensed in a single line of service.

NAB’s Proposed Licensure by Equivalency:

Licensure by Equivalency offers an additional solution to licensure portability. Licensure portability models, based on common competency standards, have been successful in other professions as an acceptable pathway for entry level and experienced practitioners to demonstrate qualification for licensure. NAB proposes a new qualification standard, the HSE as a broader, inclusive combination of education, experience and examination as meeting the equivalence of licensure qualifications for NHA, RCAL and HCBS. Graduates of a NAB Accredited HSE degree programs (BA/BS), of which two years are dedicated to the long term care administration major and includes a minimum 1000 hour field experience, would be eligible to apply for the HSE. An additional pathway will be offered that recognizes current licensed administrators who meet NAB’s HSE qualification standard.

• The “Licensure by Endorsement” is NAB’s approach to portability. Other occupational professions approach to portability; (i.e., Pharmacy, Occupational Therapy, Nursing, and Medicine) have established national standards adopted by participating states (see Appendix A for additional information on these models). States will maintain their individual existing pathways to current licensure for NHA, RCAL and HCBS as applicable which is important for a new licensee that elects to maintain permanent state residence and/or practice in a specific line of service. States are asked to add the option of the HSE qualification standard as an additional pathway to support practice in multiple lines of service and portability of licensure.

• Currently, most states have models representing:
  o Licensure by Exam: minimum education coursework, AIT/Practicum, state and NAB exam as indicated by state decisions (51 different state models).
  o Licensure by Endorsement: minimum experience standard for applicants moving across jurisdictional lines (51 different state models).
  o Licensure by Reciprocity: the practice of exchanging documents with others for mutual benefit, especially privileges granted by one state to another.
Licensure by Equivalency (as proposed) recognizes the HSE qualification standard as meeting licensure requirements for their jurisdiction (i.e. education, experience and national examination). Upon validation from NAB of meeting the HSE equivalency qualification, the state of practice issues the applicable license to the candidate.

Principles of Licensure by Equivalency:

- Consensus exists that the highest level of Education, Examination(s) and Experience combined meet entry-level competencies in the creation of the Health Services Executive qualification standard.
- Licensure by Equivalency provides a nationally recognized standard, validated by NAB, to be accepted by the state to issue an individual license that meets the nursing home, assisted living or home and community based services administrator requirements of that state.
- States desire exceptional candidates to efficiently earn the privilege to practice in their jurisdiction while promoting public safety through rigorous education, ongoing competency development and accountability.

Why address this issue:

1. Protects the public by assuring highly trained Health Services Executives.
2. Recognizes the evolving long term care services and supports continuum.
3. Recognizes the long standing LNHA licensure transfer challenge confronting LTC professionals and national providers, and streamlines the regulatory interstate portability of license requirements.
4. Acknowledges the issue of licensure portability. Nationally, many occupations are faced with portability of license and the artificial unintended barriers established by each jurisdiction.
5. Additional recent drivers of this recommended change include the White House report “Occupational Licensing: A Framework for Policy Makers”. Member organizations of the Federation of Associations of Regulatory Boards (i.e. Nursing, Pharmacy, Medicine, Occupational Therapy, and Optometry) are proactively accepting the challenge with interstate compacts and portability models. Not officially endorsing, but strongly encouraging success of this model is the Centers for Medicaid and Medicare Services (CMS). Meetings with Leading Age, American Health Care Association, and the American College of Health Care Administrators have resulted in positive support of this approach to licensure.
6. Enhances the image of the profession while removing unnecessary barriers to initial licensure and portability. Offers expanded career opportunities, which enhance recruitment and retention of a highly qualified leadership workforce.

NAB SOLUTION

Proposed HSE Pathways and Standards:

Experience Pathway to Health Services Executive Designation Requirements

- Online HSE application completed and submitted through NAB Verify.
- Official Transcript verifying BA/BS from an accredited college or university.
- Passing exam score from time of initial licensure as an NHA, RCAL, and/or HCBS.
- Successful passing of additional 50 item specialty exams (NHA, RCAL, and/or HCBS) not included in exam of initial licensure.
- Review within the National Practitioner Data Bank (NPDB) and finding no disqualifying actions.
- Verification of active engagement in the long term care field and/or long term care administrator profession in a licensed capacity in the following categories noted below as meeting the state AIT/practice requirements.

<table>
<thead>
<tr>
<th>Current License</th>
<th>NHA</th>
<th>NHA and RCAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>BA/BS</td>
<td>BA/BS</td>
</tr>
<tr>
<td>Addition 50 Item Examination(s)</td>
<td>RCAL + HCBS</td>
<td>HCBS</td>
</tr>
<tr>
<td># Years of NHA Practice/Active Engagement</td>
<td>3 years</td>
<td>3 years</td>
</tr>
</tbody>
</table>

Education Entry-Level Pathway to Health Services Executive Designation Requirements

- Online HSE application completed and submitted through NAB Verify.
- Official Transcript from a NAB-HSE Accredited college/university program showing completion.
• Successful completion of NAB Examination(s) required of a HSE within the two (2) years following application. Required HSE requirements are:
  o Complete and pass a 100 item core exam plus a one specialty exam (NHA, RCAL, or HCBS).
  o Additional 50 item specialty exams (NHA, RCAL, or HCBS) not completed above.
• Review within the National Practitioner Data Bank (NPDB) and finding no disqualifying actions.

- • Official Transcript from a NAB-Accredited college/
- • Online HSE application completed and submitted
- Health Services Executive Designation
- Education Entry-Level Pathway to
- • Verification of active engagement in the long term
- • Review within the National Practitioner Data Bank (NPDB) and finding no disqualifying actions.
- Experience Pathway to Health Services Executive

<table>
<thead>
<tr>
<th>Education</th>
<th>Graduate of a NAB HSE Accredited Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator in Training (AIT)</td>
<td>1,000 hours incorporated into the NAB-Accredited Program</td>
</tr>
<tr>
<td># Years of NHA Practice/Active Engagement</td>
<td>HSE (core exam and three specialty exams)</td>
</tr>
</tbody>
</table>

PROPOSED STATE ACTION AND STATUTORY LANGUAGE:

**State Action:**

The following items are provided to promote consistent and uniform language for each state to determine whether Licensure by Equivalency is best approached through statutes, rules or administrative policy. The global intent is to provide each state common minimum language to add to their compliance requirements to assure consistency of qualifying standards and maintain the operational aspects governed by NAB.

**Options for State Licensure**

NAB recommends one of two options to recognize a licensure candidate who has been validated and qualified as a HSE by the NAB.

1) **HSE as a New Licensure Category:** Establish through statute, regulations or rules a new license category “Health Services Executive (HSE)”. Recognize candidates who have been qualified as a HSE by NAB as meeting the states requirements for an HSE license with this license meeting the state requirements to practice as a nursing home, assisted living or home and community based services administrator as applicable to state licensure requirements.

2) **HSE Meets or Exceeds Current Licensure Equivalency:** Establish through statute, regulations or rules qualifications for licensure for candidates who have been qualified as HSEs by NAB as meeting the states’ requirements to practice as a nursing home, assisted living or home and community based services administrator and issue them a license in the applicable category of state licensure.

**Glossary of Terms**

**Definition: NAB**

“NAB” stands for The National Association of Long Term Care Administrator Boards.

**Definition: Accredited College or University**

“Accreditation” is an academic institution of higher learning that includes general education courses as requisite to the institution’s principal educational programs and that has received institutional accreditation from a regional accrediting organization for higher education or at least one of the following organizations: Middle States Commission on Higher Education, New England Association of Schools and Colleges, the Higher Learning Commission, Northwest Commission on Colleges and Universities, Southern Association of College and Schools, or Western Association of Schools and Colleges (WASC) Senior College and University Commission.

**Definition: Active Engagement**

Active engagement means continuous practice as the Administrator of Record (AOR) or a licensed administrator serving in a supervisory capacity over other AORs. Independent validation must verify the three years of active engagement. For each facility/agency where duties were performed related to the AOR or other long term care supervisory experience, a letter on official organization stationary must be submitted verifying employment. The letter must include:

- The dates of employment with the facility/agency.
- The title(s) of any position(s) held within the facility/agency.
- The number of persons directly supervised by the individual, the number of total employees, and budget size.
- The letter signed and dated by another licensed nursing home administrator (LNHA), a supervisor, or an official of the organization’s human resource department

**Definition: Licensure by Equivalency**

“Licensure by Equivalency” means the board may license any person qualified as a Health Services Executive (HSE) by the National Association of Long Term Care Administrator Boards (NAB) through licensure by equivalency as meeting the minimum qualifications of a
nursing home, assisted living, or home and community based service administrator (as applicable to state licensure requirements). The state may require a state jurisprudence examination. All final licensure decisions are made by the state board.

**Definition: Health Services Executive**

“Health Services Executive” is a licensed individual who has entry level competencies of a nursing facility, assisted living community or home and community based service provider in this jurisdiction or another jurisdiction. The Health Services Executive has met NAB’s minimum standards and the state may grant a license for Health Services Executive, nursing home, assisted living, or for the home and community based services administrator.

**Definition: Practice as Health Services Executive**

“Practice as Health Services Executive” is a qualification that is developed to recognize and promote a quality entry-level education, continued competency, and accountability of leadership that ultimately provides quality services and support in a home-like setting with a commitment to choice, dignity, independence, individuality, and privacy based on client/resident needs and preference in skilled nursing facilities, assisted living communities, and home and community-based services. The Health Services Executive has broad knowledge competencies across the continuum and may be granted licensure as a Health Services Executive, nursing home, assisted living, or a home and community based services administrator in this jurisdiction.

**Definition: NAB Domains of Practice**

“NAB Domains of Practice” are the tasks performed and the knowledge and skills identified as necessary to perform those tasks by NAB in its Professional Practice Analysis. The NAB Domains of Practice can be found on the National Association of Long Term Care Administrator Boards website. The domains are validated through a national survey of administrators representing multiple lines of service and updated every five to seven years.

**Definition: NAB Verify**

NAB Verify is the national application and review process for HSE qualification.

**Definition: National Practitioner Data Bank (NPDB)**

National Practitioner Data Bank (NPDB) is an electronic information repository created by Congress. It contains information on medical malpractice payments and certain adverse actions related to health care practitioners, entities, providers, and suppliers. Federal law specifies the types of actions reported to the NPDB, who submits the reports, and who queries to obtain copies of the reports. Organizations must be authorized according to federal law to submit reports and/or query the NPDB. Organizations authorized to access these reports use them to make licensing, credentialing, privileging, or employment decisions. Individuals and organizations who are subjects of these reports have access to their own information. The reports are confidential and not available to the public. (Information obtained from https://www.npdb.hrsa.gov/)

**NAB: HSE Application and Operational Procedures:**

**Proposed minimums on HSE Application:**

1. Applicants for the Health Services Executive qualification must provide the following for NAB Verify:
   a. Online application with fee.
   b. Personal and demographic information.
   c. Official Transcript from NAB Approved HSE Academic Program for entry level applicant or an official Transcript showing award of BA/BS from an accredited college/university for experience pathway candidates.
   d. Employment/practice history
   e. NPDB query

2. HSE Applicants to the individual state will continue to meet the state’s application requirements:
   a. Current application with new option of HSE Licensure by Equivalency
   b. Associated state application fees
   c. State jurisprudence examination if applicable AND
   d. Validation of the National Association of Boards for Long Term Care Administrators HSE Standard through NAB Verify:

**Frequently asked Questions (FAQs)**

Q. Who makes the final licensure decision?
A. The state board or licensing agency.

Q. Who issues the License?
A. The state board or licensing agency.
Q. Does the HSE qualification standard impact my board/agency’s applicant revenue?
A. No, the states maintain their current fee structure.

Q. What is the role of NAB Verify?
A. NAB Verify is designed as a member service to take the burden of initial HSE standard review and verification off the state board’s staff. The HSE qualification will be provided to the state by NAB Verify. The state maintains final authority to issue a license. NAB has no licensing authority.

Q. Who will pay for the NAB Verify?
A. The applicant will be assessed a fee for the HSE NAB Verify review service.

Q. What is the benefit of NAB Verify to the Applicant?
A. NAB Verify will provide the applicant with membership in a national licensure registry that will support and facilitate licensure portability throughout their career. NAB is exploring additional benefits such as adding a disciplinary databank and the ability to maintain continuing education credits within the applicant’s NAB Verify record.

Q. How do I transfer the Health Services Executive qualification to a different state board?
A. The request for transfer can be made through NAB Verify. The fee to transfer HSE documents is $70.00.

Q. What is required for state participation?
A. Agreement to adopt the NAB HSE qualifications as a state standard in determining licensure eligibility for HSE candidates at the state level.

APPENDIX A

Portability Models

Pharmacy
The National Association of State Boards of Pharmacy established the NABP Clearinghouse many years ago to facilitate the transfer of licensure across states lines. The NABP’s bylaws (Article II) require member participation in the NABP Clearinghouse as a condition for membership. The NABP Clearinghouse is a national database of the licensed profession and all licensure transfers must be processed through the Clearinghouse. Requirements include education, experience, examination, disciplinary records, licensed in good standing, moral/ethical standards and meet continuing education requirements.

http://www.nabp.net/about/constitution-and-bylaws

Occupational Therapy
All occupational therapists must be certified by the National Association of Boards of Occupational Therapy to qualify for state licensure.

Nursing
The Nurse Licensure Compact is an interstate compact. It allows the nurse to have one multi-state license in the primary state of residency. This permits the nurse to practice in other member states both physically and electronically but is subject to each states practice laws. It is modeled after the driver’s license compact which follows the mutual recognition model of licensure. Nurses can practice in multiple states with one license.

https://www.ncsbn.org/nurse-licensure-compact.htm

Medicine
An interstate compact based on a uniform application, model policies, credentials verification defined in the Federation of State Medical Boards (FSMB) Interstate Medical Compact. Participating states must sign onto and abide by the terms of the FSMB. Participation is voluntary by both physicians and state regulatory boards. The compact establishes eligibility factors; examination, education, disciplinary record. License issued by each state of practice.

http://www.licenseportability.org/