

Badger Institute: Nearly 1,000 out-of-state health care providers help Wisconsinites during pandemic

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By JULIE GRACE | December 7, 2020

Since the start of the pandemic, Wisconsin has made it much easier for out-of-state health care professionals to practice and serve patients in the Badger State. Obtaining an occupational license is typically a time-consuming, costly and burdensome process, but all of that has changed in the past few months — at least temporarily.

Through legislation and executive orders, the state has allowed health care providers who are licensed and in good standing in another state to receive a temporary Wisconsin license during the COVID-19 crisis.

According to the Department of Safety and Professional Services (DSPS), the state's licensing agency, Wisconsin received 1,177 total applications from health care professionals looking to practice here between April 1 and Oct. 31. The agency granted 937 of those.

Dr. Marni Feuerman, a licensed clinical social worker from Florida, was one of them.

Feuerman often receives requests from people across the country seeking her counseling services but cannot provide them services if she's not licensed in the patient's state of residence, she says. But now that states, including Wisconsin, are making it easier to obtain a license, she has taken advantage of the opportunity to provide virtual services to patients across the country.

"When someone reached out to me from Wisconsin, I said, 'Well, I can apply to the

Department (of Safety and Professional Services) and see how fast they can move through the application,' " Feuerman says.

She heard back from DSPS within a week or so and has worked with the individual ever since.

"I was impressed with how efficient and easy the process was, and I hope this is the beginning of finding a way to loosen these restrictions if someone has a valid license in another state and there's a need elsewhere," she says.

The impact of more health care workers

The additional 937 health care professionals — doctors, nurses, physician assistants, counselors, social workers and others — joined Wisconsin's workforce as it became increasingly overburdened and overworked. The impact of such an influx of workers is substantial not only for those battling COVID-19 but for mental health and other medical services that might otherwise have been paused or delayed.

DSPS also accepted 556 applications from health care providers looking to practice telehealth to Wisconsin residents. The department did not track how many applicants applied for or obtained both a temporary license and permission to practice telehealth.

Among those who received temporary licenses, there were 245 doctors, 109 nurses, 105 licensed clinical social workers, 99 psychologists, 78 licensed professional counselors, 67 advanced practice nurse prescribers, 48 pharmacists, 29 physician assistants and a handful of other health care professions. These practitioners could serve patients either in-person or virtually.

Kristin Verhoeven, a nurse practitioner at the University of Minnesota Medical Center, also received a temporary Wisconsin license. She specializes in substance abuse treatment.

"During the pandemic, I didn't want to exclude patients in Wisconsin or require them to travel to me to get treatment," Verhoeven says.

"With substance abuse, a lot of people lack stability in general, so we've had to see patients more frequently without exposing them to the virus. So we've lost the face-to-face support they need, but in mental health especially, we don't require hands-on care. So being virtual for all of our patients has worked," she says.

The process to obtain a temporary Wisconsin license was “super easy,” Verhoeven says.

State should adopt universal reciprocity

Streamlining the licensing process for health care workers clearly benefits Wisconsinites in need during COVID-19. But the long-term physical and mental ramifications of the pandemic will continue long after it has ended. Allowing the licensing process to revert to the pre-COVID status quo will be counterproductive.

“I think there have always been some systemic challenges (with licensing) because the technology is moving faster than the health care professions,” says Feuerman. “There’s always laws and restrictions, so it’s tough for people. I can have a perfectly clean license in one state, but I still can’t practice across state lines.”

Some states already have passed laws that recognize most occupational licenses from other states. This summer, Missouri Gov. Mike Parson signed [a law](#) that allows workers to apply for a license before moving to the state and grants reciprocity to professionals who are licensed in good standing. Other states such as Arizona and Pennsylvania passed similar laws months before the pandemic began, and others continue to adopt similar versions of “universal license recognition.”

The Wisconsin licenses for both Feuerman and Verhoeven — along with the licenses of the other 935 health care providers — will expire within the next year. Both women, however, say that if the temporary policy were made permanent, they’d pursue licenses to serve Wisconsinites in need.

Wisconsin policymakers should consider following the lead of their counterparts in other states and adopt universal reciprocity policies that allow licensed health care and other professionals from other states to practice in Wisconsin without long delays or costly requirements.

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