

03/11/24

RE: SF 4444 & SF 4382

Members of the Senate Health and Human Services Committee,

Medical Alley represents a global network of more than 800 leading health technology and care companies including representation from all corners of the state of Minnesota. Our mission is to activate and amplify healthcare transformation.

Recognized worldwide as a leader in healthcare innovation, Minnesota sets a standard for excellence – impacting local communities and influencing global health outcomes and advancements. With access, affordability, and quality as top priorities, Medical Alley and our partners are committed to developing solutions which drive meaningful change and save lives.

It is with this these guiding principles that we express concern about Senate File 4444's impact on access to care. Under the language of this bill, hospital management would lose its authority to engage in an accountability process should a nurse decline a patient care assignment. Allowing an individual nurse to make this type of decision creates an uneven standard for care, resulting in inequitable delivery and possible delays. Patients experiencing episodes of mental illness or those who are victim to substance abuse may not have access to the care they need, exacerbating their illness.

Not only would access to care for patients in need of care be jeopardized under this proposal, but it could allow an individual nurse to establish a staffing framework for the hospital by deciding which patients he or she will see, thereby assigning further patients to other caregivers and increasing their workloads. This decision should be the hands of hospital administration in order to properly balance the needs of the staff with the needs of the patients.

Important safeguards are already in place for hospital staff who believe they do not have the capacity to care for a patient to request further assistance. State law protects whistleblowers who believe they are working in unsafe conditions and prevents employer retaliation.

Medical Alley also is concerned about the impact of Senate File 4382 requiring hospitals to give 300 days notice of any inpatient service change or closure. Such a requirement may put a hospital in a situation of closing a line of service unnecessarily or prematurely before the hospital has a fully accurate financial and personnel assessment of that service.

We ask committee members to prioritize access to care and oppose Senate File 4444 and Senate File 4382.

Sincerely,

Peter Glessing

Senior Director of Policy and Advocacy Medical Alley

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