



Chair Noor and Members
House Human Services Finance & Policy Committee
Minnesota House

March 18, 2026

Dear Chair Noor and Members,

The Consumer Advocates Coalition writes to express our strong support for **HF 2216**, which strengthens important consumer protections and safety standards for Minnesotans living in nursing homes and assisted living facilities.

HF 2216 takes several common-sense steps to improve resident safety, transparency, and fairness in long-term care settings. The bill:

- Ensures facilities are better prepared to respond to medical emergencies by requiring automatic external defibrillators (AEDs);
- Improves transparency for prospective residents and families; and
- Strengthens baseline consumer protections in assisted living and nursing home settings.

Life-saving measures

Advocates consistently hear from residents and families that they assume assisted living facilities will provide life-saving interventions when wanted and needed. Unfortunately, residents and families are finding this is not always the case.

One family member shared that they personally had to perform the Heimlich maneuver on a choking resident because staff could not intervene and instead instructed them to call 911. In another reported incident, a resident death was linked to a facility's no-lift policy.

Placing AEDs in assisted living facilities and nursing homes supports residents who want access to life-saving measures in emergencies. The Minnesota State Capitol is equipped with AEDs; residents in long-term care settings deserve the same level of protection and preparedness.

Difficulty finding and evaluating assisted living facilities

Choosing an assisted living facility is one of the most significant and stressful decisions families make. While key regulatory information about facilities is technically public, it can be difficult for consumers to locate and interpret.

HF 2216 improves transparency by requiring facilities to provide their most recent survey results and three years of complaint investigations, correction orders, and fines. This information will

help prospective residents and their families better understand the quality and history of a facility before making a move.

Advocates regularly hear from residents and families who report they did not fully understand the facility they were moving into until after they arrived. Residents also report being surprised by the level of care provided—sometimes more than expected, but often not enough to meet their needs. Greater upfront transparency will support informed decision-making and better alignment between resident needs and facility services.

Advocates also hear from residents and families that they feel pressured to get guardianship or conservatorship as a prerequisite for admission to an assisted living facility or nursing home. While we recognize there are instances in which these restrictive decision-making pathways are needed, supported decision-making models that are less restrictive should be prioritized.

Residents of nursing homes and assisted living facilities, and their families, deserve confidence that facilities are prepared for emergencies and are transparent about the care they provide. HF 2216 makes practical, common-sense improvements that advance resident safety, consumer awareness, and accountability.

For these reasons, we respectfully urge the committee to support HF 2216.

Thank you for your leadership on behalf of older adults and vulnerable Minnesotans.

Sincerely,

Consumer Advocates Coalition



March 17, 2026

The Honorable Mohamud Noor
Chair, Human Services Finance and Policy Committee
Minnesota House of Representatives
5th Floor, Centennial Office Building
St. Paul, MN 55155

The Honorable Joe Schomacker
Chair, Human Services Finance and Policy Committee
Minnesota House of Representatives
2nd Floor, Centennial Office Building
St. Paul, MN 55155

Re: Legal Aid/Minnesota Disability Law Center Support for HF 2216

Dear Chair Noor, Chair Schomacker, and Members of the Committee:

Legal Aid and the Minnesota Disability Law Center (MDLC) thank you for the opportunity to provide written testimony and support for HF 2216. We support the entirety of this bill, which contains numerous protections and additional rights that will improve the wellbeing of individuals who choose to reside in assisted living and other facilities.

We appreciate the prohibition of a guardian or conservator as an admission criterion to a nursing home, assisted living, or group home. Many people with disabilities are capable of managing their own affairs, and requiring them to have a guardian as a condition of admission is restrictive and unnecessary.

The numerous financial protections in the bill will help strengthen the rights of individuals in assisted living facilities. The provision in lines 2.13-2.25 ensures that the contracts that residents sign will not change due to a change in facility ownership. The provision in lines 2.28-3.29 rightfully requires facilities to justify the amount they wish to charge for housing and services. The prohibition on mandatory arbitration in lines 4.8-4.21 will increase the legal rights of residents, and the protections in lines 4.24-5.20 will ensure that residents are not discharged because they choose to pay for their services with public rather than private funds. All of these provisions will improve the wellbeing of assisted living residents.

Thank you for the opportunity to submit written testimony regarding HF 2216. We urge you to support this bill.

Sincerely,

/s/ Eren Sutherland

Eren Sutherland
Acting Deputy Director
Minnesota Disability Law Center

A handwritten signature in black ink, appearing to read "Ellen Smart", written in a cursive style.

Ellen Smart
Staff Attorney
Legal Services Advocacy Project

This document has been formatted for accessibility. Please call Ellen Smart at 612/746-3761 if you need this document in an alternative format.

March 18th, 2026

Dear Mister Chairman and members of the committee,

I am writing to you regarding HF2216.

My husband moved into Round Lake Senior Living in March of 2023. In February of 2025 my husband passed away in the memory care unit.

I will never know if he would have survived because our building does not have an AED. By the time the EMT's arrived , he was pronounced dead.

Not only do we not have an AED, the policy here is to render no care except first aid, not even CPR.

Although we are a senior living community, there are a lot of people here who are vibrant and would like the chance to live even if they have a cardiac event.

Please consider voting in favor of HF2216.

Thank you,

Sharon M. Dueber

March 18, 2026

To: Members and Chairman of the Human Services Finance & Policy Committee

From: Connie During, resident at Round Lake Senior Living and retired medical technologist

I am writing in support of SF 3844 and HF 2216

To: Representative Mohamud Noor, Co-Chair of the Human Services Finance & Policy Committee
Representative Kelly Moller

I am a resident of Round Lake Senior Living in Arden Hills, MN. I am 78 years old, and one might think that I don't belong at a Senior Living facility, but I disagree and will tell you why. I decided to move here because I was living in Arizona, and after my husband passed away, I knew I needed to be closer to my family. AND, I never wanted to move again.

I had no idea that I was moving into a For Profit Corporate establishment. Why didn't I know that, you might ask? I had other things to think about:

- I was grieving the loss of my husband
- I had to decide where to move: to France or to Minnesota in order to be with one of my children and their families.
- I had to sell my house
- I had to decide if I could downsize from a 2500 sq ft house to a 1200 sq ft apartment – would my furniture fit?
- How would apartment living be after being in a single family dwelling for the last 55 years?
- Would I make friends? What would I do with my spare time?
- How would I handle tornadoes and blizzards?
- How easily will I find new doctors, dentists, hairdressers, etc?

These are all legitimate concerns, so no, I didn't for a second think that an assisted living facility, even though I'd be independent, put corporate interest before the lives of their residents.

That is, until at the Resident's Counsel meeting when we asked our General Manager if we could have an AED installed in the building. She said in a forceful tone of voice, and I paraphrase, "We will not ever be getting an AED; we are not required, by law, to have one".

That was startling, but here we are, the residents, trying to change the law. I hope you agree that it is important. Remember, brain cells start dying in less than five minutes without oxygen. After 10 minutes, chances of survival are small. Have you ever had to care for a person who had been resuscitation?

Please consider my request.

Wednesday, March 18, 2026

To: Members and Chairman of the Human Services Finance & Policy Committee

I am writing in support of SF 3844 and HF 2216

To: Representative Mohamud Noor, Co-Chair of the Human Services Finance & Policy Committee

Representative Kelly Moller

My name is William Sumner and I currently reside at Round Lake Senior Living center in Arden Hills. I support bill S 3844 and HF 2216 because they provide an option in emergency situations. I am slowly losing my sight and am on kidney dialysis 3 days a week. In 2024 we presented a request to Management for the purchase of AEDs and for the training of staff in their use. To which the response from Senior Management was that, "This will never happen." There is currently no State requirement that AEDs and training in their use is a requirement for Senior Living facilities.

This facility is owned and managed by the Lifespark corporation, a financial investment company, not a health care provider. Lifespark's response of not providing AEDs and their application removes the option and choice in an emergency situation to save lives. Brain damage occurs in about 4 minutes of oxygen deprivation. Our building is far from a medical facility and EMTs response time can be close to 15 minutes for a 911 call.

For people like myself, an Independent Living resident, staff will not participate in any emergency care, refusing to help a fallen resident, or any other emergency procedures. They have been instructed to call 911 and have the EMTs provide the care.

Building Management told us that we were welcome to fund-raise to buy, pay for the training of ourselves, (and providing training as residents age out), and maintaining the machines. This leaves us with 80 and 90 year olds administering emergency care, including resuscitation of other 80 and 90 year olds, not knowing their End-of-Life wishes or their Care Plan.

In summary, we live in dread of losing a friend or neighbor whose life may have been saved but for the lack of this basic lifesaving device.

Thank you for considering my testimony of my experience and my support for this Bill.

William Sumner

Round Lake Senior Living

Arden Hills, MN

Wednesday, March 18, 2026

To: Members and Chairman of the Human Services Finance & Policy Committee

I am writing in support of SF 3844 and HF 2216

To: Representative Mohamud Noor, Co-Chair of the Human Services Finance & Policy Committee

Representative Kelly Moller

My name is Stephanie Fredrickson, a resident of Round Lake Senior Living in Arden Hills, MN. In June 2023, my husband and I moved here at the urging of our 2 sons due to his deteriorating health (years -long Type I diabetic, heart attack victim and a fractured, poorly healing vertebra). Our expectations were that some basic emergency care would be available to independent residents like us. Later if necessary, various levels of Assisted Living care would be available if needed. We found out that the Aides were not allowed to provide ANY care to Independent Living residents such as helping them up if they fell.

Imagine my dismay when I discovered that the building did not have AEDs nor was staff trained in their use. Schools, churches, hockey rinks and big box stores are just a few of the places where AEDs are prominently present. I know that AEDs can save lives. An estimate I found was that 17,000 lives are saved annually; high school athletes on the field, senior citizens mowing their lawns and anyone being transported in an ambulance. Brain damage begins after about 4 minutes of oxygen deprivation which of course can lead to death or life-long organ damage. We are instructed to call 911 ourselves and that the EMTs would operate AEDs and provide any other emergency medical care. I have seen ambulances take 15 minutes to get here.

Our Building Management told us that there was no way that they would provide AEDs nor the training in their use for us or for the staff. If we residents wanted them we could fund-raise to pay for the machines and to train residents in their use. (I also understand that not all residents wish to be resuscitated in a cardiac emergency. Careful record keeping will need to be part of the provision of AEDs.) We are here because we are elderly and asking us to save each other's lives is a bit ludicrous. I dread the day on which a friend or neighbor dies because this basic care is unavailable. I've been working with other residents for 2 years to assure that this doesn't happen.

In 2025, I paid about \$50,000 in rent and extras to live here. Some resident's expenses are much, much higher. It also seems a bit much to expect our rent to rise yet again to pay for this basic need.

Thank you for hearing my personal testimony and that it, with the witnessing by others, will convince you to support these Bills.

Stephanie Fredrickson