



Minnesota Hospital Association



May 5, 2022

Dear Legislators,

We are writing to request your support for legislation that would extend a critical deadline relating to background studies and remove the duplicative fingerprint and background study process for licensed health care providers.

Throughout the pandemic we have been grateful for your work to enact policy changes that provided flexibility for health and human service providers to meet their staffing needs during the public health emergency. This includes legislation that modified background study requirements and allowed the Minnesota Department of Human Services (DHS) to extend an emergency background study process through July 2, 2022. This was a much-welcomed intervention to ensure that, while there was limited access to fingerprinting sites, there was still a viable pathway to adequately vet prospective staff without disrupting the onboarding process.

However, with the recent resumption of fully compliant, fingerprint-based studies for healthcare and human service providers, our members which represent a variety of employers across the caring professions, including adult day services providers, home care agencies, hospitals and health systems, assisted living facilities, nursing homes, child care providers and speech language pathology providers have reported numerous challenges that are impacting their ability to complete the background study process and hire staff in a timely manner. Among others, these challenges include travel distance to fingerprinting sites, supporting study subjects with navigating a complex fingerprinting enrollment and consent process, and extended turnaround times to receive study results in some cases. With over 40,000 open positions in the healthcare sector alone, our members are facing the most severe workforce shortage in memory, and we must do everything possible to eliminate barriers to hiring new employees and retaining existing employees at this critical time.

There is considerable urgency to resolve this issue, because without additional action individuals who received emergency studies must clear a fully compliant study by July 2, 2022 in order to continue working and serving the individuals whom our organizations support. While we appreciate engagement by DHS on this matter, we continue to hear feedback from members about serious concerns regarding the capacity of the DHS Background Study system to both keep up with current demand and process the backlog by that date.

In addition, we urge you to act to eliminate the duplicative fingerprint and background study process between DHS and the health licensing boards. Currently, a licensed health care provider must complete two fingerprint-based background studies in order to provide care in an MDH regulated care

facility, one for their respective licensing board and one for DHS. Removing the duplicative process not only reduces the current number of providers in the DHS emergency study backlog but also removes a significant barrier to recruiting and retaining Minnesota's licensed health care workforce while retaining patient safety. DHS, the Minnesota Board of Medical Practice, and the Minnesota Board of Nursing worked together on this and support the provision

**As such, we feel strongly that action is needed to extend the validity of emergency-based studies to at least January 1, 2023<sup>1</sup> and remove the duplicative fingerprint background study requirement<sup>2</sup>. These changes would allow more time to process all of the emergency studies and reduce the current number of providers in the DHS emergency study backlog.**

Sincerely,

Association of Residential Resources in Minnesota  
The Long-Term Care Imperative  
Minnesota Child Care Association  
Minnesota Home Care Association  
Minnesota Hospital Association  
Minnesota Speech Language Hearing Association

cc:

Senator Jeremy Miller  
Speaker Melissa Hortman  
Rep. Kurt Daudt  
Senator Melisa Lopez Franzen  
Rep. Ryan Winkler  
Senator Jim Abeler  
Senator Paul Utke  
Senator Karin Housley  
Rep. Tina Liebling  
Rep. Jennifer Schultz  
Matt Burdick, Director of State Government Relations DHS  
Chuck Johnson, Deputy Commissioner DHS  
Kulani Moti, Inspector General DHS  
Dawn Davis, Deputy Inspector General DHS

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<sup>1</sup> House HHS omnibus bill (SF 4410, Article 19, Section 26)

<sup>2</sup> Senate HHS omnibus bill (SF 4410, Article 13, Section 5)