

Chair Backer and Members of the House Health Finance and Policy Committee,

On behalf of the undersigned organizations, we have come together as the Healthcare Workforce Support Coalition to identify new policy opportunities that help address Minnesota's healthcare and social services industry workforce challenges. Our membership is comprised of a broad representation of healthcare providers, such as hospitals, dental providers and ambulatory surgical centers. Together, we are committed to identifying solutions that will support our workforce and serve our patients.

The Minnesota [2023 Job Vacancy Survey](#), prepared by the Department of Employment and Economic Development, identified *Healthcare Practitioners and Technical Occupations* and *Healthcare Support Occupations* as the professional categories with the third and fourth (respectively) highest number of job vacancies. The two categories noted more than 26,000 vacancies in healthcare-related careers. Determining solutions is an ongoing process, and we, as a coalition, continue to challenge ourselves to identify more traditional policy opportunities, like streamlined licensure pathways and loan forgiveness, and creative alternatives, like exposure to healthcare learning opportunities at earlier ages, to address these outstanding job vacancies.

The primary themes and goals outlined by our coalition are three-fold:

- Ensure safety in our healthcare settings for staff and patients.
- Make it easier and more appealing to work in healthcare in Minnesota.
- Retain, reskill and upskill existing healthcare workers in Minnesota.

We encourage you to consider proposals that seek to achieve the above-mentioned goals and are happy to discuss the impact of such proposals.

Thank you for supporting those who dedicate their careers to providing quality care for Minnesota's patients. We hope you'll join us in identifying and securing solutions that help increase the number of Minnesotans entering the healthcare workforce and supporting growth throughout their careers.

**Please support HF 499.**





March 17, 2025

Professional Distinction

Personal Dignity

Patient Advocacy

Representative Jeff Backer, Chair  
House Health Finance and Policy Committee  
100 Rev Dr Martin Luther King Jr. Blvd  
St. Paul, MN 55155

Chair Backer and Members of the Health Finance and Policy Committee,

On behalf of the Minnesota Nurses Association (MNA), whose 22,000+ members represent 80% of registered nurses actively working at the bedside in hospitals across our state, we are submitting this written testimony to highlight our strong opposition to HF499, which weakens worker protections and union rights, and drastically tilts the scales in favor of employers during labor disputes.

HF499 would extend temporary nursing permits to nurses who are not licensed in Minnesota by a full 30 days, increasing the current temporary permitting period by a full 50%. **MNA is strongly opposed to this unnecessary change.** Advocates for the extension point to delays with applications being processed by the Board of Nursing. While we sympathize with workers who experience delays, most licensure delays are due to the applicants providing inaccurate or insufficient information. It is not uncommon for an individual to apply for a Minnesota license, receive a temporary permit, and then fail to provide mandatory materials such as employment verification forms, home state licensing verification forms, and criminal background checks in a timely manner. Funding to the Board of Nursing was increased last biennium to address capacity issues and improve systems, reducing the delays in licensure processing that are supposedly behind the effort for this change. In applications where the applicant properly completed the application and submitted all required materials, most licenses were issued within 24-36 hours after the Board of Nursing received the required documentation. **HF499 is seeking for a solution to a nonexistent problem.**

We have heard anecdotally that delays in all areas of health licensing may be due to longer processing times with Minnesota's Criminal Background Check Program (CBCP), which provides criminal background check (CBC) services to sixteen of the Minnesota Health Related Licensing Boards (HLBs). If this is the case, we recommend a broader approach that assists the CBC program with decreasing background check time for all HLBs in order to align with the

345 Randolph Avenue  
Suite 200  
St. Paul, MN 55102  
Tel: 651.414.2800  
800.536.4662  
Fax: 651.695.7000  
Email: [mnnurses@mnnurses.org](mailto:mnnurses@mnnurses.org)  
Web: [www.mnnurses.org](http://www.mnnurses.org)



AFL-CIO

improvements and streamlining that has already taken place with the Board of Nursing.

Second, this proposal would have a detrimental impact on the motivating factors that employers currently have to bargain in good faith, and in doing so, it would drastically tilt the scales in favor of the employers without regard to workers. While nurses and other workers do not want to be forced to go on strike, knowing that temporary workers brought in to break these strikes are limited to 60 days limits the length of strikes for both employers and employees. Allowing an additional 30 days for strikebreaking nurses to practice, without a full license in Minnesota, will only continue to drag out the length of strikes. Passing this bill would be an attack on nurses' ability to counteract the greater power and resources that employers already have, and regularly exercise over workers, in labor negotiations and disputes.

Lastly, this bill continues to serve as one way for executives from hospitals, nursing homes, and other healthcare entities, particularly those across the largest health systems in our state who have corporatized every facet of healthcare achievable at this point, can avoid accepting responsibility for a lack of meaningful, substantive changes made across healthcare to support and retain workers. These issues existed before COVID-19, they have since been exacerbated, and yet healthcare CEOs continue to fail to address unsafe staffing, workplace violence, nurse burnout, and other worker retention failings. Instead, hospitals instead continue to focus on shortcuts and short-term band-aid solutions, such as this legislation, which will never address the biggest healthcare workforce issues in our state. This bill is a distraction, and a smokescreen, it is not a real solution to a real problem.

HF499 is a union-busting bill that aims to take the pressure off of healthcare CEOs when there is a labor dispute, providing cover to employers who have failed to support and retain workers. Rather than focusing on how to make it easier to hire strike-breakers, we hope that hospital CEOs will shift their time and attention to instead fixing the ongoing safety issues they have created and neglected. And we hope legislators will refuse to accept this legislation, or any other legislation, that directly takes aim at the rights of union workers.

In Solidarity,

A handwritten signature in cursive script that reads "Chris Rubesch".

Chris Rubesch, RN  
President, Minnesota Nurses Association