February 6, 2017

Re: Supplemental Nursing Services Agencies (HF 582, Schomacker)

Dear Chair Schomacker,

I am writing on behalf of the Minnesota Ambulatory Surgery Center Association (MNASCA), a statewide, non-profit trade association representing the interests of ambulatory surgery centers (ASCs) in Minnesota. I would like to express MNASCA's support for your bill, HF 582.

Our association is committed to promoting quality, value-driven outpatient surgical care. A key component of this is ensuring that our ASCs have the teams of medical professionals necessary to provide care to patients, regardless of the location of the facility. As the legislature has seen and has worked to address in recent years, adequate staffing levels in hospitals and ASCs, particularly in rural areas of Minnesota has been an ongoing issue.

In order to provide access to treatment and services in rural areas, many of our facilities rely on CRNA locum tenens. We have run into issues with the Minnesota Department of Health when interpreting statute, which has resulted in facilities being either unable to hire CRNA locum tenens, or using staffing agencies that are not in compliance with statute.

Pavilion Surgery Center, one of our member ASCs located in Duluth, MN, has been particularly impacted by the lack of clarity in current statute and illustrates their challenges below:

On July 21, 2016, Pavilion Surgery Center had a survey conducted by the Minnesota Department of Health to determine whether the facility was in compliance with federal participation requirements set forth in the Medicare Conditions for Coverage. During the Exit Conference the surveyor presented a verbal Statement of Deficiencies that would require a Plan of Corrections. The surgery center was cited for a condition-level deficiency; utilizing CRNA locum tenens through a staffing agency. The surveyor cited Minnesota Statues 2015; 144A.70 Registration of Supplemental Nursing Services Agencies. A CRNA locum tenens would fall under this statute because they are, “and other licensed health professionals” and we are procuring employment at our surgery center with the CRNA through a staffing agency.
In the following weeks the surgery center corresponded with the MN Department of Health concerning this deficiency. In the initial phone correspondence the surgery center was informed that we would not receive a condition-level deficiency but rather a standard level-deficiency. We were then informed that we would not receive a deficiency, but the surgery center would have to come into compliance with this Minnesota Statue 2015;144A.70

We met with the MN Department of Health to discuss the issue and the challenges we were facing. At this meeting the surgery center was informed that we would have to come into compliance with the Minnesota Statue 2015; 144A.70. Currently the surgery center is not able to comply because the staffing agencies with which we contract do not meet the current statute 144A.70. The staffing agencies state that the CRNA locum tenens are independent contractors and are not employers of the CRNAs and at this time have not changed their contract language. At this time the surgery center does not have any other options for our CRNA locum tenens services but to use staffing agencies that are not in compliance with the statute or to close an operating room when there is a need for CRNA coverage.

Currently the surgery center utilizes CRNA locum tenens to cover our CRNA employees’ vacations and leave due to illness or work injury. If the surgery center is unable to utilize a CRNA locum tenens the center would have to close an operating room and cancel our patients for an indefinite time frame. This would cause a financial hardship for the center and force our other employees to be relieved of their work duties and pay during this time.

We appreciate you bringing HF 582 forward to help clarify this language, and we believe removing “and other licensed health professionals” on line 1.16, will benefit our member ambulatory surgery centers in Greater Minnesota.

MNASCA respectfully asks the committee for its support of HF 582. Thank you for your consideration.

Sincerely,

Rob Simmons
President, MNASCA