

**Status of 2022 Nurse Staffing Legislation
As of August 10, 2022**

State: California
Bill number: SB 1212
Bill summary: This bill, which was sponsored by the California Hospital Association, did not include rate caps and focused on price transparency by requiring nurse staffing firms to report client by client billing information to state.
End of session: August 31
Lobbying firm: Edelstein, Gilbert, Robson & Smith
Status of bill: **Dead for the session**
Comments: Although the bill did not include rate caps, it still caught the attention of the California Nurses Association. Following conversations with members of CNA and staffing industry lobbyists, CNA announced their opposition to the bill which quickly led the author to announce the bill was dead for the year. However, this is an important issue for CHA and our lobbyist expects this bill to resurface during the 2023 legislative session.

State: Colorado
Bill number: SB 22-210
Bill summary: The original bill included a licensing and registration requirement for nurse staffing firms as well as quarterly reports detailing the average costs of positions being staffed at health care facilities. While this bill did not include rate caps, it did include language requiring the Health Department to convene a task force, consisting of affected parties, to discuss, among other things, “recommendations for determining caps and other limitations on service rates and the amount that supplemental health care staffing agencies may charge for each category of health care workers providing services to health care facilities.” Language restricting employee movement was also included.
End of session: May 11
Lobbying firm: Hicks and Associates
Status of bill: **Governor signed bill into law**
Effective Date: **August 9, 2022 EXCEPT**
Section 8-4-125(2)(c): On or before Sept. 1, 2022
Section 8-4-125(3)(a): On or before Oct. 1, 2022
Comments: The bill was amended to remove the language restricting employee movement and also removed language prohibiting conversion fees. At one point, we were successful in securing representation from the industry on the task force the original bill created, but the task force was done away with in subsequent amendments. The bill now requires quarterly reports, submitted twice a year, listing the quarterly average amount charged to a health care facility for each category of health care worker and a report listing the quarterly average amount paid to health care workers for each category of health care worker.

State: Connecticut
Bill number: HB 5313
Bill summary: The original bill called for capping the amount a nurse staffing firm could charge a health care facility. It also created a new licensing and registration requirement.
End of session: May 4

Lobbying firm: Powers, Griffin & Hill
Status of bill: Signed into law by the Governor
Effective Date: July 1, 2022 EXCEPT

Section 1(b): Not later than 10/1/2022

Section 1(c): Not later than 1/1/2023

Section 1(e): Not later than 7/1/2023

Section 4(d): Not later than 10/1/2023

Comments: ASA and state nurse association members met separately with the bill sponsor and leadership to get rate caps pulled from the bill. The bill now creates an annual registration requirement for nurse staffing agencies and requires them to file an annual cost report for the previous calendar year. Records provided would not be considered public records subject to disclosure.

The bill also requires the Commissioner of Social Services to submit, to the appropriate legislative committees, recommendations based on the cost reports submitted by temporary nursing services agencies. The recommendations may include (1) what, if any, changes are needed in the regulation of rates charged by such agencies, and (2) how best to ensure, within available appropriations, that a nursing home facility is able to maintain adequate nursing personnel during a declared public health emergency. ASA's lobbyist in Connecticut is speaking with legislators and administrative officials to see what role ASA and the industry can play as the report is being developed.

State: Illinois

Bill number: HB 4666

Bill summary: Original bill contained nurse rate caps and also contained several provisions regarding registration, licensing and prohibition of restricting employee movement.

End of session: April 9

Lobbying firm: Government Navigation Group

Status of bill: Signed into law by Governor

Effective Date: July 1, 2022. Various sections pending rules and regulations

Comments: While we were able to achieve stripping rate cap language out of the bill, there are several problematic provisions that made it into the final bill, including a requirement to submit executed contracts, invoices, and quarterly reports to the Department of Labor, as well as the disclosure of certain terms in all contracts with clients. We have turned our attention to the rule drafting process to work on some poorly written sections of the bill and we may consider a cleanup/repeal bill next session.

State: Indiana

Bill number: HB 1332

Bill summary: Benign bill that required registration and licensing as well as record keeping requirements and restrictions on employee movement.

End of session: March 8

Lobbying firm: None

Status of bill: Dead for the session

Comments: The bill never had a hearing and died in Committee.

State: Iowa
Bill number: HF 2521
Bill summary: The legislation focused on reporting requirements and restrictive employment language.
End of session: May 13
Lobbying firm: Capitol Strategies Group
Status of bill: **Signed into law by Governor**
Effective Date: **July 1, 2022. Various sections pending rules and regulations**
Comments: Despite a late push by proponents, we successfully kept rate caps out of the bill by successfully convincing the Senate President that such language would wreak havoc on the state's healthcare system, there are some reporting requirements of aggregated data to the Department of Labor which may be problematic. The bill does include a prohibition on nurse staffing firms from charging facilities a conversion fee. We are focusing on the rule drafting process to work on some poorly written sections of the bill pertaining to the possible amount of information a nurse staffing firm would need to submit to the Department. We will also continue to consider pushing a cleanup/repeal bill next session.

State: Kansas
Bill number: HB 2524
Bill summary: The original bill contained several problematic provisions, including nurse rate caps.
End of session: May 23
Lobbying firm: Watkins Public Strategies
Status of bill: **Dead for the session**
Comments: A bill that included, among other things, a very strict rate cap proposal. Bob Livonius, representing ASA, testified against this bill and we worked with the state nurse association to get the nurse cap language pulled from the bill. Opposition to the bill was so strong that it never received a vote in Committee. Efforts to pass the bill as an amendment to other health care bills were unsuccessful as well.

State: Kentucky
Bill number: HB 282
Bill summary: Requires registration and prohibits noncompete agreements and conversion fees. Adds language regarding nurse staffing pricing to the state's price gouging law. Applies to assisted living and long-term care facilities.
End of session: April 14
Lobbying firm: Government Strategies
Status of bill: **Signed into law by Governor**
Effective Date: **July 14, 2022. Regulations are pending, earliest they would be in place is 1/31/2023**
Comments: After passing the House, the Senate President worked with ASA and the Kentucky Health Care Association to come to a compromise. No rate caps, and compromise language regarding conversion fees (allowed on a sliding scale). Both sides agreed to language stating that, during a state of emergency, if the Department of Health receives a complaint about a nurse staffing firm's pricing, the firm as to submit all of its invoices and pricing information to the Department so it can render a decision on whether price gouging took place. The information is exempt from the state's Open Records Act.

State: Louisiana
Bill number: H. 958
Bill summary: Registration and licensing requirement. Prohibition on conversion fees and training requirements.
End of session: June 6
Lobbying firm: Burland & Maloy, LLC
Status of bill: **Signed into law by the Governor**
Effective Date: **August 1, 2022. Regulations will be drafted, aimed to be in place by 1/1/2023**
Comments: An amended version of the bill was passed by the House and Senate that contains our compromise language which allows for a staffing firm to charge a conversion fee on a sliding scale not exceed 18 weeks. The compromise also prohibits nurse staffing firm from charging a fee of an employee who was a previous employee of the health care facility if that employee had worked there less than 30 days preceding the assignment. The Governor is expected to sign the bill.

State: Missouri
Bill number: HB 2605 (adopted as an amendment and passed as part of SB 710)
Bill summary: Original version, which contained rate caps, was amended to require license and registration, no restrictive covenants or conversion fees.
End of session: May 13
Lobbying firm: Capitol City Insights
Status of bill: **Signed into law by the Governor**
Effective Date: **August 28, 2022. Rules will be drafted, timetable TBD**
Comments: This bill was added as an amendment to another health care bill and successfully filibustered. It was then added as an amendment to another health care bill and passed in the middle of the night. Rate caps were removed from bill. Registration requirement included in bill, as well as quarterly reports to the Health and Senior Services Department for each health care facility participating in Medicare or Medicaid with which the agency contracts; reports must include a detailed list of the average amount charged to the health care facility for each individual health care personnel category and a detailed list of the average amount paid by the agency to health care personnel in each individual health care personnel category. Unfortunately, the bill also prevents health care staffing agencies from charging conversion fees. We will work with the state as they draft potential rules and regulations regarding this bill.

State: Ohio
Bill number: HB 466
Bill summary: Original bill contained rate caps. Substitute version looks to prevent nurse staffing firms from charging a rate higher than 150% of the statewide direct median hourly wage for that category of personnel. The charge must include all charges for administrative fees, contract fees, and other charges in addition to the health care personnel's hourly rate.
End of session: December 31
Lobbying firm: Park Street Law Group
Status of bill: **Passed out of Committee, no vote held before summer recess**
Comments: The bill was amended again and passed out of the House Commerce and Labor Committee but was not brought up for a vote on the House floor before they adjourned for the summer. Our lobbyist will continue to meet with members of the legislature during the break.

State: Oregon
Bill number: SB 1549
Bill summary: Original bill contained rate caps and then contained caps on what a nurse staffing agency could charge a healthcare facility. Also created a new licensing and registration requirement.

End of session: March 4

Lobbying firm: Public Affairs Counsel

Status of bill: **Signed into law by Governor**

Effective Date: **Sections 1 to 7 and the amendments made to current law by sections 8 to 14 go into effect on July 1, 2023. Working groups are currently meeting to (1) discuss licensing requirements and (2) policy proposals and recommendations to establish a process to determine annual rates. Representatives from ASA and nurse staffing firms are on both groups**

Comments: 4 days before the end of the session, we were able to get cap language stripped in favor of a commission to discuss the need and options for potential future rate regulation with industry representation on the commission guaranteed. Had first meeting of nurse staffing industry stakeholder group this week. The commission is looking to hold the first meeting with all parties sometime this summer (July).

State: Pennsylvania

Bill number: HB 2293

Bill summary: Original bill contained rate caps, registration requirement, and prohibition on restricting employment opportunities of their employees, both nurse staffing agency and health care facility. Substitute bill remove rate caps and focuses solely on registration. Employee movement language still in bill which could be read to prohibit conversion fees. Applies to assisted living and long-term care facilities.

End of session: November 30, but lobbyist suggests key date is July 1

Lobbying firm: Emerald Strategies LLC

Status of bill: **Passed by the House, awaiting further action in the Senate**

Comments: A substitute version of the bill, which does not include rate caps, was passed out of the House and currently sits in the Senate Health Committee awaiting further action. The bill was passed largely because the legislature was stuck in town negotiating a budget deal. Our lobbyist has talked to the Senate Health Committee Chair, and she has told him she has no plans to discuss the legislation before the fall at the earliest. Vague conversion fee language remains in the bill, and the group will need to discuss if we want to push to get the language amended further or leave the ambiguous language in place. Our lobbyist will continue to meet with folks over the summer.

State: Rhode Island

Bill number: H. 8032 and SB 2498

Bill summary: Bill contains caps on what a nurse staffing agency could charge a healthcare facility. Also prohibits the charging of conversion fees and hiring of healthcare facility employees.

End of session: June 30

Lobbying firm: Narragansett Consultants LLC

Status of bill: **Bills are dead**

Comments: Both bills died when the legislature adjourned for the year without calling them up for further consideration.