

Correction on bill number  
Cermak  
Montgomery MN 56069

3/28/2025

Regarding  
Wednesday, April 2, 2025 , 8:15 AM

Human Services Finance and Policy

Chair: Rep. Joe Schomacker  
Rep.joe.schomacker@house.mn.gov  
Location: Capitol 123  
Agenda: H.F.2647 An addendum

Dear, Committee

Please add to the assisted bill  
A live Nurse of one needs to be on the second shift of all assisted living facilities

-Maria Cermak



April 2, 2025

**To:** Chair Schomacker, Chair Noor, and Members of the Human Services Finance and Policy Committee

**From:** Alzheimer’s Association, MN/ND Chapter, AARP Minnesota, Mid-MN Legal Aid, Minnesota Elder Justice Center, Office of Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities

**Re:** Opposition to HF 2647

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

Our organizations are writing in opposition to HF 2647 which changes key assessments meant to be completed by a Registered Nurse for residents in assisted living facilities.

Currently, residents are to receive a comprehensive nursing assessment every 90 days or upon a change of condition. These assessments are the foundation of a resident’s care plan and can prompt changes in services provided to the resident, resulting in an increase in fees to the resident or an increase in the waiver rates to the facility. These assessments are intended to create a global evaluation of a resident’s overall health. The Nurse Practice Act identifies this type of assessment as “comprehensive,”. A comprehensive assessment can only be performed by an RN, not an LPN. “Focused” assessments, on the other hand, are narrower in scope, do not provide a global evaluation of a person’s health status, and can be performed by an LPN or an RN. We are concerned that, by reducing the number of comprehensive assessments a resident receives from an RN in their assisted living facility from 4 to 2 per year, overall changes of condition, worsening chronic conditions, and new symptoms can be missed. Without timely comprehensive assessments, treatment can be delayed, and resident health and well-being can be negatively impacted.

We recognize the key role LPNs play in assisted living facilities. LPNs provide much of the care residents receive, know their residents well, and are able to support the comprehensive assessment process through the collection of data. However, the RN is identified in the Nurse Practice Act as the nurse with the knowledge and skill to evaluate that data and create a global picture of the resident’s health. Comprehensive assessments completed by an RN 4 times per year are critical to maintaining the health of a resident.

Residents in assisted living facilities have increasingly complex medical, physical, and mental illness related care needs. Residents with a dementia diagnosis who reside in a secured memory care unit, for example, often have other chronic conditions that can complicate symptoms and care. A 90-day comprehensive assessment completed by an RN is a key service residents in assisted living facilities are paying for and should be receiving.

Finally, we understand there are concerns about an RN workforce shortage. However, the Board of Nursing testified to the House Health Finance and Policy Committee on March 3<sup>rd</sup>, 2025, that there are 134,648 RNs and only 17,887 LPNs registered with the Board in Minnesota at this time. Furthermore, the number of RNs registering is increasing while the number of LPNs is decreasing. We are confused that the workforce shortage concerns are centered on RNs and not the decreasing number of LPNs in the state. This appears to be another reason for RNs to continue performing 4 comprehensive assessments per year.

Thank you in advance for your consideration of this important issue.

AARP Minnesota

Alzheimer's Association, MN/ND Chapter

Mid-MN Legal Aid

Minnesota Elder Justice Center

Office of Ombudsman for Long-Term Care

Office of Ombudsman for Mental Health and Developmental Disabilities