

Submitter: Richard Evans

On Behalf Of: Care NW

Committee: House Committee On Behavioral Health and Health Care

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Several comments:

1. Why is the temporary healthcare staffing agency segment being targeted for price/bill rate fixing? Is the State of Oregon doing this to any other businesses?
2. The State of Oregon is inserting themselves into legally binding contracts that staffing agencies have with hospitals, surgery centers, and all other medical facilities. Those contracts, agreed to by all parties, specify what the bill rates are.
3. Setting arbitrary limits on bill rates will have a direct impact on healthcare providers, and will result in providers seeking employment in other professions or in other states. This will impact facilities, especially facilities in the long term care industry, who rely heavily on the non-licensed, (trained and/or credentialed), healthcare providers to provide the majority of care.
4. This will also severely limit equity opportunity for the segment of the healthcare provider population who, for reasons such as childcare, family situations, or going to school to improve their earning ability, can only work part-time. There are not many facilities that will accommodate part-time workers, or provide work-arounds for the above mentioned situations.
5. The testimony of the Oregon Association of Hospitals and Healthcare systems is somewhat disingenuous, when quoting the following: “the extreme prices being reported for nurse staffing agencies from hospitals in our states” and reports of nurse staffing agencies “vastly inflating price by two, three, or more times pre-pandemic rates and then taking 40% or more of the amount being charged to the hospitals for themselves in profits.”
 - In our experience, hospitals have been offering high bill rates and bonuses.
 - The comment about agencies taking 40% or more for themselves in profits, is simply an inflammatory misrepresentation. The actual ‘profit’ is in the single digit percentile.
 - Agencies have the same operating expenses as other businesses: systems, equipment, taxes-unemployment, paid leave, high professional liability insurance premiums, federal withholding for SS/FICA/Medicare, etc.