



January 29, 2026

Subject: SEIU 1199NE concerns and proposed amendments to H-7030 (Healthcare Worker Platform Act)

Dear Chair Donovan and Honorable Members of the House Committee on Health and Human Services,

I am writing on behalf of SEIU 1199NE, a labor union representing approximately 7,000 healthcare, home care, and child care workers across Rhode Island, to share our concerns regarding H-7030, the Healthcare Worker Platform Act, and to respectfully request the Committee's consideration of targeted amendments to strengthen the bill.

As drafted, H-7030 establishes a new category of healthcare worker platforms that are explicitly exempt from the statutory framework governing nursing service agencies. While we understand and appreciate the intent to allow flexibility and innovation in staffing models, we are concerned that the bill, as currently written, omits core worker and patient protections that Rhode Island has already determined are necessary in healthcare settings.

Specifically, under the current language, healthcare worker platforms would not be subject to requirements related to criminal background checks, competency verification, health and vaccination standards, workers' compensation coverage, liability insurance, or rate transparency. This would effectively allow healthcare workers to be deployed in clinical settings without the baseline safeguards that apply to every other staffing mechanism used in hospitals and nursing facilities across the state.

Importantly, these concerns are not raised by labor alone. SEIU 1199NE has discussed this bill with representatives from the nursing home industry, and there is shared agreement that additional guardrails are necessary to protect patients, facilities, and workers alike.

To address these gaps, we have drafted language that adds two new sections to the bill to ensure healthcare worker platforms are subject to baseline worker and patient protections—without

reclassifying them as nursing service agencies. The goal is to preserve the platform model while aligning it with existing public health and safety standards.

We respectfully submit the following draft amendments for the Committee's consideration:

23-106-4. Minimum worker and patient protections.

(a) Every healthcare worker platform licensed pursuant to this chapter shall ensure that all healthcare workers utilizing the platform meet minimum standards equivalent to those required of nursing service agencies under chapter 23-17.7.1, including but not limited to the following:

(1) **Criminal background checks.** Completion of a national fingerprint-based criminal background check, including disqualifying offenses, in accordance with department of health requirements.

(2) **Credential and competency verification.** Verification and maintenance of current professional licenses, certifications, training, and demonstrated competencies necessary for the healthcare services to be performed, and assignment of workers only within their lawful scope of practice.

(3) **Health and vaccination standards.** Compliance with all applicable department of health requirements for healthcare personnel, including immunizations, tuberculosis screening, and infection control standards.

(4) **Workers' compensation and liability coverage.** Maintenance of workers' compensation coverage and professional liability insurance for healthcare workers providing services through the platform, in amounts determined by the department of health.

(5) **Rate transparency and limits.** Compliance with rate transparency requirements and maximum allowable rates or markups established by the department of health, which shall be no less protective than those applicable to nursing service agencies under chapter 23-17.7.1.

(b) A healthcare worker platform shall be deemed the responsible entity for ensuring compliance with this section, regardless of any contractual or employment classification of the healthcare worker.

23-106-5. Anti-evasion.

No healthcare worker platform shall structure its operations, contracts, or worker classifications for the purpose of avoiding the requirements of this chapter or undermining protections applicable to healthcare workers or patients under state law.

We believe these amendments are reasonable, consistent with existing Rhode Island law, and necessary to ensure that any new staffing model operates with appropriate accountability and safeguards. We would welcome the opportunity to discuss these concerns further or to work with the Bill Sponsors, Committee, and Legislative Council on any refinements.

Thank you for your time, consideration, and continued work on issues affecting the health and safety of Rhode Islanders.

Respectfully,



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