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Office of Commissioner Jan Malcolm Minnesota Department of Health (MDH) 625 North Robert Street St. Paul, MN 55155

Dear Commissioner Malcolm:

SEIU Healthcare Minnesota & Iowa represents almost 50,000 healthcare workers, including over 10,000 Minnesota hospital workers. We appreciate the opportunity to provide input for your review of the proposed mHealth/Acadia hospital project.

To begin, we fully share and want to echo the concerns and questions raised by the Minnesota Nurses Association in their letter of June 27, 2022. Like them, we are troubled by a for-profit company in general and, more specifically, by Acadia's record. It is obvious and universally acknowledged that Minnesota needs more mental health bed capacity. Yet we lack these beds because our healthcare financing system undervalues mental health and other basic healthcare services that don't produce large returns. If we allow a for-profit company to carve out a profitable section of the market, we just reinforce a failed model. At a minimum, MDH should require a strict and enforceable guarantee that mHealth will not reduce its remaining mental health bed capacity at other facilities, such as the mHealth Riverside campus.

In addition, we would like to share some of our own concerns with mHealth that lead us to doubt their ability to ensure that this project serves the public interest. While mHealth may say they have not laid-off employees at Bethesda or St. Joseph's, they have taken steps to eliminate jobs. For example:

- Around October 2020, they gave a reduction notice for approximately 4.5 FTEs to the pharmacy unit at St. Joseph's.
- Around the same time, they gave notice that all 5 LPN positions at St. Joseph's would be eliminated.
- Around April 2021, they gave another reduction notice for 3 FTEs to the pharmacy unit at St. Joseph's.
- Finally, when mHealth shut down the Bethesda facility, we know that not all workers were rehired by mHealth. In addition, even those that were rehired lost important scheduling and other seniority benefits.

Judged simply by their actions, mHealth has sought to replace an important community asset staffed by quality caregivers with good jobs, with a for-profit facility staffed by employees without the guarantee of similar quality careers. If your analysis substantiates this record of prioritizing their own economic benefits over the health of our community, we encourage the Department to find that the proposal is not in the public interest.

Sincerely yours,

Jamie Gulley