

June 8, 2026

LeadingAge PA

**PHA**  
PENNSYLVANIA  
HOMECARE ASSOCIATION

**RCPA**  
REHABILITATION & COMMUNITY  
PROVIDERS ASSOCIATION

**HAP**  
The Hospital + Healthsystem  
Association of Pennsylvania

The undersigned organizations, which are part of a collaborative group known as the Pennsylvania Provider Advocacy Coalition (PPAC), write to urge the Committee to pause consideration of House Bill 1611, and allow time for meaningful stakeholder engagement before advancing the proposal.

PPAC represents a diverse range of organizations, including hospitals, long-term care facilities, nursing homes, community-based services, behavioral health providers, and providers serving individuals with intellectual disabilities and autism. We share the goal of protecting older Pennsylvanians from abuse and neglect. We also want to ensure that any amendments to the Older Adult Protective Services Act are crafted in a way that allows health care services which older adults and all Pennsylvanians depend on to continue uninterrupted and recognize the challenges, including workforce pressures and lack of funding, that these providers face.

We welcome the opportunity to discuss these and other concerns about unintended consequences that House Bill 1611 would have on the health care workforce across care settings.

The bill requires every applicant for employment at a covered facility to obtain state and national criminal history clearances, regardless of role or patient contact, overseen by the Pennsylvania Department of Aging. There are hundreds of thousands of people working in Pennsylvania's health care ecosystem. While we understand this provision includes direct care and allied health professionals working with older adults, this requirement, as drafted, would apply equally to those seeking roles that have no interaction with older adults whatsoever, including facility operations and management. Requiring the department to process this high volume of applicants could create unnecessary delays in hiring. This would additionally require new unfunded costs for workers and employers while simultaneously creating bottlenecks in onboarding that could impact access to care in an environment already struggling with workforce shortages.

The bill would also establish rigid employment bans applied uniformly across all positions and all facility types, with no clear requirement that the offense bear any connection to the role being filled. We support restrictions on hiring individuals with serious violent histories into roles that involve direct contact with patients. Our concern is with the reach of the list that captures offenses that may not have a demonstrable connection to older adult safety, particularly when the position itself involves no patient contact. Under the bill as drafted, an individual with a DUI conviction could be barred for five years from a groundskeeping role, and someone with two misdemeanor theft convictions could be similarly prohibited from working in scheduling. These applicants would all be subject to the same hiring restrictions as a direct care worker.

We are not suggesting that criminal history should not be considered for hiring decisions. We support strong safeguards. We are asking that the General Assembly allow time to work with stakeholders to ensure that any new framework does not include unintended consequences that could disrupt health care delivery.

Thank you for your consideration.

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Pennsylvania Homecare Association

Rehabilitation & Community Providers Association

The Hospital and Healthsystem Association of Pennsylvania