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Legislation Creating New Regulations for Hospital Nurse Staffing Proposed in Wisconsin

WHA's 2026 report calls for action on payer and government red tape, training pathways and care bottlenecks caused by outdated state laws

On Feb. 25, a group of Democratic lawmakers led by Senator Chris Larson (D – Milwaukee) proposed legislation that would create statewide nurse staffing ratios in hospitals and limit the ability for hospitals to establish policies to appropriately staff their facilities for around-the-clock coverage of patients.

With the Assembly already adjourned for the year, this proposed legislation is unlikely to move forward. Regardless, WHA has voiced significant concerns with state lawmakers dictating a one-size-fits-all approach to staffing by elected officials over the judgment of professionals with actual experience in running hospitals across the state.

"Federal and State regulations already require Wisconsin hospitals to maintain appropriate staffing levels, including qualified nursing and other allied staff, to care for patients," said WHA's Senior Vice President of Workforce & Clinical Practice Ann Zenk. She added, "Creating arbitrary ratios in state law without contemplating the very different workforce and care delivery needs that exist across Wisconsin is a dangerous path that risks the closure of critical services."

Similar proposals have stalled in Wisconsin's legislature numerous times, going back to 2003. Not only have efforts on staffing ratios stalled in Wisconsin, several similar pieces of legislation have failed in other states. In those few states where staff ratios exist, their experience does not support bringing the same failed policy to Wisconsin.

Despite having a government mandate aimed at nurse staffing for more than twenty years, California ranks seventh lowest among the states for the Nurse-to-State Population Ratio while Wisconsin ranks in the top third of states .

Just last month, California was also forced to delay new ratio requirements on psychiatric hospitals after staffing ratios, set to take effect on January 31, 2026, would have immediately closed 800 acute psychiatric beds due to staffing constraints. These closures would not only impact patients, but they would also impact law enforcement and other critical public safety professionals who need to find placement for someone who is a danger to themselves or others due to mental illness.

"Nurses know, and hospitals know, that staffing is about more than the numbers. In a time of rising health care demand, and with nursing shortages improving but still present, the opportunity to best and safely utilize the available workforce is a strategy that must be utilized. Additionally, we must remove regulatory burden, and leverage technology, as we work hard to grow the workforce, including the registered nurse workforce, faster," continued Zenk. "Government simply saying 'you must use more nurses' is a completely unrealistic 'solution' to our workforce challenges."

WHA and WHA members will again remind state policymakers that safe staffing is a complex decision based on the needs of the patient and the experience and clinical expertise of the nurses and care teams, the setting and the available resources. Staffing coordinators, nurse managers and direct care nurses, not lawmakers, are best to determine staffing that is properly aligned with patient needs.

WHA members can contact WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk with questions about this latest proposal or any other workforce issue.

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