

May 1, 2023

Senator Melissa Wiklund
Representative Tina Liebling

Re: SF 2995: Omnibus Health and Human Services appropriations

Dear Chair Wiklund, Chair Liebling, and Members of the Health and Human Services Conference Committee:

The City of Minneapolis appreciates the opportunity to comment on the omnibus bills being considered by this conference committee.

Elevated Blood Lead Level (EBL) – We are in support of reducing the EBL from 10 mg/dL to 3.5 mg/dL in statute, as there is no safe level of lead exposure. In fact, our Health Department has been intervening at 5 mg/dL by providing in-home assessments for children in our communities who test positive and hit the trigger point of 5 mg/dL. Further reduction of the EBL to intervene at 3.5 mg/dL will result in a doubling of the children that we support, per data from the Minnesota Department of Health (MDH). **To help us absorb this increased workload, the annual estimated cost need for the City of Minneapolis' Health Department is \$220,000. We are requesting that funding for local public health be included.**

Emergency Shelters – The City of Minneapolis appreciates the operational funding for emergency shelters that has been included in the Senate bill (Article 11, Sec. 4), as targeted funding is needed for ongoing shelter operations and homelessness response in Minneapolis and Hennepin County to ensure that we have no gaps into the future. The City also appreciates the capital funding for emergency shelters that has been included in the House bill (Article 6, Sec. 7) so that projects that are ready to start construction can begin.

Comprehensive Overdose and Morbidity Prevention – Minneapolis is facing a crisis in that unsheltered and culturally diverse persons often do not have access to prevention and supportive services. The City appreciates the establishment and funding for this program as found in Article 3, Sec. 38 in the House bill.

Public Health Emergency Preparedness (PHEP) – We are pleased to see the inclusion of this language in both the House (Article 15, Sec. 3) and Senate (Article 4, Sec. 36) bills. For the City of Minneapolis, Federal funds provide the only stable support for our Health Department. We have been in constant response mode since 2018 (unsheltered homelessness response, Drake Hotel fire, and the COVID-19 pandemic), and Federal funds alone are insufficient to cover staff or community PHEP expenses.

Public Health Systems Transformation – While the City appreciates the inclusion of this language in both the House (Article 15, Sec. 3) and Senate (Article 18, Sec. 3) bills, the Senate language is more favorable, as we view Community Health Workers as part of the public health infrastructure and are happy to see that they are included. In addition, the amount of funding as prescribed in the Senate bill helps meet the needs of our Health Department.

MNCare Inclusion Act – We appreciate the inclusion of this language in Article 2, Sec. 23 of the House bill, since the only health care coverage that undocumented persons have is through Emergency Medical Assistance, which does not allow for sufficient inpatient hospital care, primary and preventative care. A lack of coverage exacerbates health disparities and can result in death or disability.

Thank you for your time and thoughtful consideration of this letter. Please contact me if you have any questions.

Sincerely,

Heidi Ritchie

Heidi Ritchie
Deputy Commissioner of Health
City of Minneapolis