



May 7, 2025

Representative Jeff Backer and Representative Robert Bierman, co-chairs
House Health Finance and Policy Committee

Representative Paul Torkelson and Representative Zack Stephenson, co-chairs
House Ways and Means Committee

Co-Chairs Backer and Bierman, Co-Chairs Torkelson and Stephenson, and members of the House Ways and Means Committee:

On behalf of the Association of Minnesota Counties (AMC), the Minnesota Association of County Social Service Administrators (MACSSA) and the Minnesota Inter-County Association (MICA), we thank you for working to assemble proposals that address the needs of Minnesota's most vulnerable residents. In a state-supervised, county-administered system, our county workforce is on the front lines of implementing federal, state, and local policies and regulations.

We recognize state policymakers have difficult choices to make as you look at potential federal headwinds and a grim state economic outlook that overlays with increased demand for services that protect our most vulnerable residents and their families. Thank you for this opportunity to share our thoughts on elements of HF 2435 (Bierman), the House omnibus health finance bill.

We thank the co-chairs for inclusion of a provision that would extend access to audio-only telehealth services, which proved critical during the pandemic and have been instrumental in improving access to care statewide. (*Article 5, Sections 1 and 9*)

Counties also support provisions to establish a county-administered rural medical assistance (CARMA) program as a step toward innovations. This important rural health care innovation is the result of historic collaboration over the last two years between counties and the Department of Human Services (DHS) and builds off the success of county-based purchasing plans in delivering public health care programs. This county-owned and administered alternative to the Prepaid Medical Assistance Program will allow us to streamline systems and better serve enrollees with greater accountability (*Article 5, Sections 18-19, 21, 23*).

While we do not have an official position on uniform administration of non-emergency medical transportation (NEMT), counties have long supported adequate funding for NEMT, as transportation is a key factor in accessing health care services and improving health outcomes. If the state moves forward as the uniform administrator of this program, counties would like to highlight our concerns around the preservation of adequate payment rates for services and the need for service access in rural areas. Additionally, NEMT services could be improved through administrative simplification, DHS management



of appeals, and greater state agency monitoring to prevent fraud and promote transparency. Counties are skeptical about the projected cost savings but believe that whoever administers the program must prioritize appropriately meeting enrollees' needs for this essential service (*Article 5, Sections 2, 7-8, 10, 12, 27*).

Sincerely,

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