



MINNESOTA NURSES ASSOCIATION

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May 5, 2026

Minnesota House Taxes Committee
Minnesota State Capitol Building
75 Rev. Dr. Martin Luther King Jr. Blvd.
St. Paul, MN 55155

Dear Co-Chair Gomez, Co-Chair Davids, and Members of the House Taxes Committee,

The Minnesota Nurses Association's nearly 23,000 members represent 80% of the RNs that actively work at the bedside in hospitals across Minnesota, as well as nurses serving patients in nursing homes, assisted living facilities, clinics, the state prisons and mental health facilities, local public health agencies, state agencies, and elsewhere. Around 1,700 of our RN members call Hennepin County Medical Center (HCMC) their workplace.

As Minnesota's largest safety net hospital, HCMC is essential to our state's healthcare delivery system. It provides critical care for our most vulnerable patients, trains a significant share of Minnesota's healthcare workforce, and employs thousands of nurses and healthcare professionals. HCMC is simply too big and too important for the Legislature to allow it to fail.

Providing HCMC with only enough funding this session to just keep its doors open is not a viable, sustainable solution. Every patient that relies on HCMC regularly for care deserves to know that their nurses and providers will be there for them in the long run, just as every nurse and worker at HCMC deserves to know that the hospital they call their workplace is going to be there, too. Every week that the hospital's future is uncertain for workers means that more nurses, providers, and other frontline workers at HCMC will continue to debate their other options, to consider employment elsewhere, in order to safeguard their employment and their own family finances by working somewhere that provides more certainty. Workers and patients, and the community where HCMC is nestled, all deserve more certainty. The only way to provide that certainty is for the Legislature to act this session and to demonstrate our state's clear commitment to long-term, meaningful investment in Minnesota's largest safety net hospital.

MNA recognizes the political realities of this session, but political complexity alone cannot become an excuse for inaction – or settling for mediocre “solutions”. There is near-universal agreement across both parties, in both chambers, that HCMC is too important to fail. The challenge has not been whether to act, however, but how. MNA appreciates the bipartisan attention to this issue, and the number of legislators working to build consensus around strong solutions. We urge legislators to take that consensus-building a step further by publicly discussing and advancing concrete solutions during the final weeks of session.

MNA has discussed many of these ideas with legislators, some proposals much stronger than others, but ultimately it is members of the legislature – particularly the members and chairs of the Taxes and Health Committees – who are going to need to bring these proposals forward into the light, refine them, and move them to the floor.

The workers at HCMC, and all Minnesotans who rely on this vital safety net hospital, deserve this transparency. Limited access to complete financial data and operational context has made it difficult to fully evaluate every policy option before the Legislature. However, MNA has reviewed enough information to conclude that any legislative proposal that fails to provide substantial ongoing funding will result in major service reductions, significant workforce losses, and serious harm to patient access across Minnesota. Simply put, one-time funding or other short-term funding solutions alone will only delay the fiscal crisis, it will not solve it. HCMC requires a long-term investment that preserves services, provides workers with certainty, and maintains its role as Minnesota’s largest safety net hospital.

While MNA would prefer to raise tax revenues by targeting wealthier corporations or individuals that have the greatest financial means to contribute, given the political realities of this legislative session, MNA supports repurposing the Hennepin County ballpark tax as a practical and sustainable revenue source for HCMC, and is thus in support of H.F. 4841. However, **MNA strongly supports Chair Gomez’ legislation, H.F. 4849, which dedicates new revenue solely to HCMC** and provides the long-term stability the hospital requires.

In addition to prioritizing sustainable, long-term funding solutions through the Tax Bill, we urge the Legislature to provide as much short-term funding as possible while lawmakers and stakeholders explore key questions related to hospital governance and HCMC’s role as the state’s largest safety net hospital for providing uncompensated care. MNA urges the Legislature to keep nurses and other frontline workers at HCMC involved in governance discussions.

Given the state of healthcare funding in this country, especially as the federal cuts stemming from HR1 (“the One Big Beautiful Bill Act”) start hitting safety net hospitals across the state next year, we urge the Legislature to dedicate all the revenues from the repurposed ballpark tax toward HCMC and not elsewhere. **MNA supports the additional HCMC funding proposal put forward by Senator Wiklund within the HHS omnibus bill (SF4612), including the hospital stabilization grant program** for other hospitals who will experience the most financial strains from the cuts of HR1.

MNA believes North Memorial Health, which is expected to announce an acquisition by Sanford Health or another out-of-state corporation as early as May 8, should use some of the \$50M in profits they made from the North Memorial-Maple Grove Hospital last year to financially stabilize the North Memorial-Robbinsdale Hospital – and to finally agree, after over a year of bargaining, to a fair contract with Maple Grove nurses. At the same time, **North Memorial has refused to settle a fair contract with nurses while planning a \$450 million expansion of Maple Grove Hospital in 2027.** MNA believes North Memorial leadership has prioritized positioning the system for sale and securing public subsidies over responsible stewardship of the communities they serve – while it is clear **the CEO of North Memorial has no interest in treating workers with the dignity and respect they deserve**, including through a fair contract.

While MNA appreciates the number of legislators exploring possible funding solutions this session, we urge legislators to coalesce around a joint funding solution that combines a substantial direct appropriation, potentially from “the rainy day fund” in order to ensure that the short-term investment is large enough, pairing these allocations with sustained long-term funding through revenues generated from repurposing the ballpark tax.

MNA believes that Legislators understand the harms that would be caused by allowing HCMC to close. However, we hope that Legislators also understand the extreme uncertainty that the financial conditions of the hospital are having on workers, and that the only way to protect and retain the workforce at HCMC – the largest employer in Downtown Minneapolis – will be to commit to long-term investment in our state’s largest safety net hospital this session. Without this assurance, even one-time funding that keeps the doors open for now will not be enough to prevent the negative impacts to services that could follow.

Please act now to protect and preserve HCMC.

Sincerely,

A handwritten signature in black ink that reads "Chris Rubesch". The signature is written in a cursive style with a white background behind it.

Chris Rubesch, RN
President, Minnesota Nurses Association

Council for Minnesotans of African Heritage
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May 4, 2026

Co-Chair: Rep. Greg Davids
Co-Chair: Rep. Aisha Gomez and
Members of the Taxes Committee, Minnesota Legislature

Re: Support for HF 4841 – Hennepin County local sales tax authority modified, and grants provided to county health care facilities and to the ballpark authority for improvements

Chair and Members of the Taxes Committee:

The Council for Minnesotans of African Heritage offers this letter in strong support of HF 4841. This legislation represents a meaningful opportunity to strengthen the health, stability, and well-being of African Heritage communities across Minnesota, particularly those residing in Hennepin County, where some of the state's largest and most diverse African Heritage populations live, work, and seek care.

African Heritage Minnesotans continue to experience some of the deepest health disparities in the state. Families face disproportionate barriers to trauma care, preventive services, maternal health supports, mental health resources, and culturally responsive care. Many community members rely heavily on safety-net hospitals and county-operated health facilities for essential services, including emergency care and uncompensated care. Strengthening these institutions directly strengthens the health and future of African Heritage families.

HF 4841 provides critical investments that align with the lived realities of these communities. The bill's support for uncompensated care, public health services, and health-related social needs, such as low-barrier housing and supportive services, addresses the upstream factors that shape health outcomes. These investments have the potential to reduce preventable illness, stabilize families, and improve the quality of life for thousands of African Heritage Minnesotans.

The legislation also enhances the infrastructure necessary for high-quality, accessible care. By enabling Hennepin County to modernize and expand its health facilities, HF 4841 helps ensure that African Heritage residents can receive timely, culturally informed, and life-saving services close to home. This is especially vital for community members navigating language barriers, transportation challenges, and economic hardships.

While the Council recognizes the financial considerations associated with a sales tax increase, the long-term benefits of strengthened health systems, expanded safety-net services, and improved community well-being offer meaningful returns for African Heritage communities. HF 4841 advances equity, supports essential health infrastructure, and moves Minnesota toward a future where African Heritage residents can thrive.

For these reasons, the Council for Minnesotans of African Heritage expresses full support for HF 4841 and urges its passage. This legislation represents a significant step toward addressing long-standing disparities and ensuring that African Heritage communities across Minnesota receive the care, dignity, and opportunity they deserve.

Sincerely,

Linda Sloan | Executive Director
Lolita Davis Carter | Legislative & Policy Director
Council for Minnesotans of African Heritage

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The Minnesota Legislature empowered the Council for Minnesotans of African Heritage to ensure that people of African heritage fully and effectively participate in and equitably benefit from the State of Minnesota's political, social, and economic resources, policies, and procedures. Generally, the Council is charged with the responsibility of:

- *Advising the Governor and the Legislature on issues confronting People of African Heritage;*
- *Advising the Governor and the Legislature on statutes, rules, and revisions to programs to ensure that Black people have access to benefits and services provided to people in Minnesota;*
- *Serving as a liaison to the federal government, local government units, and private organizations on matters relating to People of African Heritage in Minnesota;*
- *Implementing programs designed to solve problems of People of African Heritage when authorized by statute, rule, or order; and*
- *Publicizing the accomplishments of People of African Heritage and their contributions to the state.*