

SENT ELECTRONICALLY

May 11, 2021

The Honorable Tina Liebling  
477 State Office Building  
St. Paul, MN 55155

The Honorable Michelle Benson  
3109 Minnesota Senate Building  
St. Paul, MN 55155

The Honorable Jennifer Schultz  
473 State Office Building  
St. Paul, MN 55155

The Honorable Jim Abeler  
3215 Minnesota Senate Building  
St. Paul, MN 55155

The Honorable Aisha Gomez  
529 State Office Building  
St. Paul, MN 55155

The Honorable Mark Koran  
3101 Minnesota Senate Building  
St. Paul, MN 55155

The Honorable Dave Pinto  
503 State Office Building  
St. Paul, MN 55155

The Honorable Paul Utke  
3403 Minnesota Senate Building  
St. Paul, MN 55155

The Honorable Joe Schomacker  
209 State Office Building  
St. Paul, MN 55155

The Honorable John Hoffman  
2235 Minnesota Senate Building  
St. Paul, MN 55155

Dear Health and Human Services Conference Committee Members:

On behalf of all residents of Ramsey County we want to thank you for your efforts to create a health and human services system that works for all Minnesotans. We know that the work of a legislative session is never easy and this one has been particularly trying for a number of reasons. There is a lot to like in these bills and as you work together to craft the Health and Human Services Omnibus package we wanted to connect and share Ramsey County's thoughts on a few items.

**Waivers:** We are pleased to see the codification of some of the key peacetime emergency waivers and modifications issued by the Department of Human Services (DHS) that have enabled county staff to change the delivery method of services without sacrificing service quality. As a result, residents experience limited disruption in their county benefits and they have more choices on how they can interact with the county. These waivers demonstrate a better, more efficient way to deliver services, promote the safety and well-being of county clients and staff, and may have the added benefit of preserving limited state and county resources. Enacting them into permanent law just makes sense and we hope the committee includes them in the final package.

**IMD Repayment:** We thank the House for holding counties harmless from accounting errors relating to IMD treatment. This is not a billing issue; rather, it is an IMD determination issue, which presents a problem for counties because counties have no role in these determinations and had no way of

knowing that there was an error in the equation used to determine our portion of the bill. For county directors to have to come up with funds during this new fiscal year - especially in a year marked by an ongoing pandemic when budgets are already strained with new costs, higher needs and financially impacted communities - is very difficult. We thank the House for acknowledging this challenge and providing state funds to address this error.

**Family First Prevention Services Act (FFPSA):** Ramsey County appreciates the commitment to move forward with state action on the federal Family First Prevention Services Act (FFPSA). FFPSA is an opportunity to move toward a more equitable delivery of child welfare services. This is critical work to continue, especially the work of building out Minnesota's prevention services infrastructure and developing a statewide kinship network; these key areas are critical to addressing the overrepresentation of African American and American Indian children in our child protection system. We know the implementation of FFPSA has significant systemic implications, including significant new financial costs incurred by counties, tribes, and providers. We appreciate the House and Senate proposals recognizing the anticipated loss of Federal IV-E reimbursement funding for counties by including an appropriation to offset this lost revenue.

**Basic sliding fee (BSF) reprioritization:** Ramsey County supports the House provision that simplifies the BSF Child Care Program by reordering the wait list priorities. This proposal goes a long way to address an issue that counties across the state experience – insufficient funding to assist low-income families in securing quality childcare. Many of these families include essential workers impacted by the pandemic. The Basic Sliding Fee (BSF) Child Care Program supports families who are striving to work by ensuring that the children in the family get the benefits of childcare.

**Adult Mental Health Initiative grants:** We want to thank both the House and Senate for including funding increases for Adult Mental Health Initiative (AMHI) grants. AMHI funding has been used to hold together a fragile and fractured system and is utilized to support many necessary services that would otherwise not be available or sustainable. For example, Ramsey County has been able to use some AMHI funding to pilot a co-responder model with law enforcement and mental health practitioners. We do encourage the conference committee to consider ongoing, sustainable dollars for this work that isn't comprised of one-time services but rather community infrastructure that's important to serving individuals and families before their situations reach crisis.

**Expanding Asthma Medicaid Coverage:** We want to thank the House for including Representative Morrison's bill to expand Medicaid coverage to include in-home visits related to asthma. One in 14 children in Minnesota have asthma and for 25% of those children their asthma is not well controlled. This bill provides coverage beyond the core medical treatments required to manage asthma. It looks at where kids live, their homes, and assesses the environmental triggers that may be contributing to their condition. It provides practical, low-cost equipment and supplies to parents and caregivers to address the allergens in a child's home that trigger attacks or aggravate symptoms. Besides supporting good, effective health care, this proposal saves money. A study from the Minnesota Department of Health found that providing an in-home visit and product interventions cost an average of \$468 and saved an average of \$2,428—an overall savings of \$1,960 per child. Everyone benefits: children with asthma, their families, health care providers and insurers and tax payers.

**SNAP:** We are also pleased to see the House inclusion of language to increase the SNAP gross income limit. The SNAP program is a critical lifeline for many low-income Ramsey County families and their children. SNAP reduces food insecurity, lifts families and children out of poverty and reduces health disparities. Overall, SNAP helps to ensure proper nutrition for pregnant women and therefore positive impacts on health and well-being of the unborn child; eliminates the hunger that negatively impacts child's behavior and education; stretches a family's food budget, so the household can focus on rent/mortgage, utilities, education, other necessities; and leads to eligibility for other important programs such as free/reduced school lunch.

**Local Public Health Funding:** We appreciate that both the House and the Senate provided increases to the Local Public Health Grant. Local Public Health has done phenomenal work this past year to ensure that our response to COVID-19 has been robust and designed to meet the needs of our residents. Ramsey County has worked to set up large scale testing and vaccination sites. Between December 29<sup>th</sup> and April 12<sup>th</sup> over 34,000 vaccine doses were provided at 138 clinics.

The Local Public Health Grant is a key source of funding for our "everyday" public health efforts, such as monitoring environmental threats, tracking communicable diseases, working with community partners to promote wellness, identifying disparities and addressing their causes, and controlling the spread of TB in our community, to name a few. This increase is greatly appreciated and so necessary as we begin to address the ongoing impacts of the COVID-19 pandemic. However, we are concerned about the Senate provision to fund a portion of the increase by cutting the Statewide Health Improvement Partnership (SHIP) program. As you know, SHIP provides dedicated funding to reduce health care costs and prevent and reduce the leading causes of chronic disease: tobacco use and obesity. SHIP has also enabled us to build strong relationships in our community, which we have been able to lean on to support our COVID-19 response work. Curbing growing state health care costs requires a strong state investment in upstream prevention, like SHIP, and we ask you to reconsider this programmatic cut.

**Family Home Visiting:** We appreciate that both the House and the Senate have provided additional language regarding the distribution of funding for Family Home Visiting. We also appreciate the additional step taken by the House to add funding for home visiting. Family home visits are an effective way to prevent child maltreatment, promote healthy childhood development and foster self-sufficiency among Minnesota's most at-risk families—all of which help reduce health care and public program costs. Many of you will recall the testimony of Lasherion McDonald who received family home visiting services as a teen mother in Ramsey County. Her experience was so positive that she was inspired to go to college, get her degree, and then return to Ramsey County to work in the same home visiting program as the nurses who helped her. Lasherion's story speaks to the power and impact that home visiting can have.

**Equity in Vaccinations:** We also appreciate the inclusion by the House of funding to support equity in COVID-19 vaccinations. Ramsey County is the most diverse county in Minnesota and we are committed to reaching individuals from racially and ethnically diverse communities who have suffered disproportionately high rates of COVID-19 illness and death. We continue to work with several community partners to ensure our community gets vaccinated.

**Child Support:** We support the child support changes in Article 12 of the Senate bill. The child support guidelines were last updated in 2007. Over time, the child support guidelines table has

become outdated and has created inequities, particularly for low-income families. The changes included in this language are necessary and long overdue. Additionally, the legislation in Article 12 gives counties greater flexibility in reporting late payments to credit reporting bureaus. Unfortunately, the current system has resulted in individuals having their credit score negatively impacted when they are in fact making regular payments. This change will help protect individuals who are making regular child support payments and should not have a negative report submitted to credit agencies.

**Cost shifts:** We do have concerns about the Child Adolescent Behavioral Hospital costs shift and the Waiver Services cost shift that are included in these bills. The stated goals of these cost shifts have been to encourage counties to place patients in less-restrictive settings as soon as possible. For the CABH shift, if there is any kind of delay, counties pay 100 percent of the cost, which currently exceeds \$1,300 per day. For the Waivers, counties are on the hook for ten percent of the costs for individuals ages 18-27 in certain settings. We share the stated policy goal of placing and serving individuals in the most appropriate, productive settings so that they may live their best lives. However, we do not agree that imposing a cost shift will directly result in fewer individuals being placed in the most expensive settings. The fact is that in some areas of the state, viable alternative settings do not exist or may not align with an individual's goals which can place counties in an untenable position. We hope that the House and Senate would not advance this cost shift proposal and instead work with counties and DHS to develop our mental health delivery system more fully.

**Child & Teen Checkups:** We do have concerns about the House proposal to allow Child & Teen Checkup (C&TC) outreach activities to be added to the Integrated Health Partnership (IHPs) contracts. Local public health is contracted to provide administrative services for the C&TC program which includes outreach about the importance of well-child checkups, assisting families with scheduling medical and dental appointments, and arranging transportation and interpreter services. Local public health regularly goes beyond that assistance to coordinate services with WIC programs, Head Start, schools, managed care, immunization services, family home visiting, and other social service programs. The families we work with know us, use our other services, and trust us. Bifurcating this effort between Local Public Health and IHPs results in duplicative programs being run where some children are served by the IHPs and others are served by Local Public Health. This is a proposal that creates state savings by putting a hole in county budgets and we ask you not to include it.

Thank you again for your work in service to the State of Minnesota. In the days ahead please feel free to reach out to us with any questions you may have or to ask for any assistance you may need. Your work is critical to the well-being of all Minnesotans and we are proud to be your partner in these efforts.

Thank you,



Commissioner Toni Carter  
Ramsey County Board Chair