



May 5, 2021

The Honorable Sen. Michelle Benson, Chair  
Senate Health & Human Services Finance & Policy Committee  
95 University Avenue W.  
St. Paul, MN 55155

**BY ELECTRONIC MAIL**

The Honorable Rep. Tina Liebling, Chair  
House Health Finance & Policy Committee  
100 Rev. Dr. Martin Luther King Jr. Blvd.  
Saint Paul, MN 55155

**RE: Safety Net Coalition Testimony on Omnibus HHS Finance Bill**

Dear Sen. Benson, Rep. Liebling, and Conference Committee Members,

The Minnesota Health Care Safety Net Coalition (the "Safety Net Coalition") represents Minnesota's safety net providers who serve primarily low-income and uninsured Minnesotans. We work on behalf of safety net providers from all sectors of health care: including medical, dental, mental health, and substance disorder treatment. Our members serve nearly 500,000 Minnesotans in all corners of the state. The Safety Net Coalition's members are on the front lines of working daily with the diverse communities who rely on the state's Medical Assistance program.

The Safety Net Coalition is writing you today to offer our comments on a handful of proposals included in HF 2128 (Liebling)/SF 2360 (Benson). Specifically, the Safety Net Coalition wishes to offer the following perspectives:

**Telehealth:** The COVID-19 pandemic has forced health care providers worldwide to evolve and adapt, nearly overnight, in ways we barely could have predicted a year or so ago. Nothing might be more representative of our care delivery systems' ability to innovate than the expanded use of telehealth technology. The Safety Net Coalition is highly supportive of the language in both omnibus HHS finance bills codifying some of the temporary waivers which made telehealth services available, particularly the ability for an individual to receive services in their home.

The Safety Net Coalition also strongly supports language which would allow telehealth services to be delivered via telephone. As providers who seek out opportunity to serve and care for populations that have historically been under-served, we know the importance of telephone-only telehealth services in the fight to eliminate health disparities in low-income populations and communities of color. Access to reliable high-speed internet and appropriate digital devices can be a barrier to care and the ability to provide services via telephone has been

instrumental in many of our efforts to adapt our service delivery models. We can assure you that at the core of our delivery models will be in-person care to address the medical, dental and behavioral health care needs of our patients. Telephone services are meant to supplement, not replace access to primary care services for our patients.

**Dental Home:** For decades Minnesota has struggled to find the provider infrastructure and reimbursement model necessary to meet the oral health needs of its public program enrollees, particularly children. The Safety Net Coalition believes that language contained in both bills that would direct safety net providers, along with several state agencies and professional organizations, to develop recommendations for “dental home” demonstration projects would be a HUGE step towards solving that problem. We believe that the concept of a “dental home” will support the delivery of comprehensive and coordinated oral health services in community-specific delivery models and link that care to new value-based reimbursement models. We believe these dental home demonstration projects will be a significant step towards ensuring all Minnesotans have access to quality oral health care.

**Use of Federal Funds:** The Safety Net Coalition believes strongly that, in a time of budget surplus, a failure to maximize the value of all available resources—particularly the significant federal dollars allocated to Minnesota in the American Recovery Act—to support those entities serving Minnesota’s most at-risk populations, would be an unimaginable failure. To that end, we believe strongly that the conference committee should construct a budget bill that utilizes general fund dollars for programs and services historically funded by the general fund and use federal COVID-19 relief funds to augment those efforts and support the family and health care providers who have struggled most in the face of the COVID-19 pandemic.

Thank you for taking the time to review the Safety Net Coalition’s comments on the 2021 omnibus health and human services finance bill. If you have any questions or would like to discuss, we would be happy to meet with you.

Sincerely,



Jonathan Watson, Chair  
Minnesota Health Care Safety Net Coalition