



Minnesota Hospital Association

161 Saint Anthony Ave., Ste. 915  
Saint Paul, MN 55103-2382

[www.mnhospitals.org](http://www.mnhospitals.org)

April 18, 2024

Chair Wiklund and Members of the Senate Health and Human Services Committee,

On behalf of the Minnesota Hospital Association (MHA) and the patients that our 141 hospital and health system members across the state serve, we write to you today regarding multiple provisions in the Senate Health and Human Services Budget Omnibus, SF 4699 as amended. We are still reviewing the Omnibus and will provide additional comments as needed throughout the remaining legislative process. For your reference, upon initial review MHA supports the following provisions:

- Providing new and additional funding for Graduate Medical Education (GME) via a teaching hospital surcharge and supplemental payments (Article 1, Sections 1-3).
- Establishing Medical Assistance (MA) reimbursement for cell and gene therapies in inpatient hospital settings (Article 1, Section 4)
- Implementing a retroactive alternative inpatient rate for children's hospitals caring for patients residing in the hospital for multiple years (Article 2, Section 3)
- Establishing the hospital nursing educational loan forgiveness program at the Minnesota Department of Health (Article 5, Section 9)
- Modifying hospital moratorium requirements to allow for 100 beds to be transferred when a hospital is being replaced (Article 6, Section 25)
- Increasing and modifying MA reimbursement rates for mental and behavioral health services, including but not limited to first episode psychosis specialty care and children's residential mental health crisis stabilization services (Article 9, Sections 9-14)
- Directing the Commissioner of Health to establish a Health Professions Workforce Advisory Council (Article 19, Section 26)

Additionally, MHA has remaining concerns and will continue to work with this Committee, bill authors, and key legislative stakeholders on provisions establishing and modifying medical debt collection practices (Article 3, Sections 1-4, 20, 24, 34-4), provisions pursuing Minnesota's Public Option program (Article 3, Sections 5-19, 25-33, 41), and provisions establishing new medical record retrieval fee structures (Article 19, Section 6).

As work continues on the Omnibus, we urge Chair Wiklund and this Committee to consider including provisions modifying and enhancing the prior authorization process carried by Senator Morrison this session. We also urge this Committee to consider one-time funding for hospital avoidable days. Minnesotans spent 195,000 avoidable days in hospitals in 2023, costing hospitals \$487 million in unpaid patient care.

In closing, we are supportive of many provisions in the Senate Health and Human Services Budget Omnibus and recognize the Chair's effort to maximize the inclusion of positive changes despite significant demand for the limited resources available.

Mary Krinkie  
Vice President of Government Relations  
[mkrinkie@mnhospitals.org](mailto:mkrinkie@mnhospitals.org)

Danny Ackert  
Director of State Government Relations  
[dackert@mnhospitals.org](mailto:dackert@mnhospitals.org)