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Capitol Update

MINNESOTA AMBULANCE ASSOCIATION

Same Old, Same Old...

If indeed brevity is the soul of wit, this week's report is long on 'wit'. Very little has changed since the last UPDATE. The legislature has focused on processing, debating and voting on the various omnibus appropriations bill intended to keep the state operating for the upcoming biennium. Virtually every one of the measures have passed on strict party-line votes with the Republican majority voting "aye" and the Democrat minority voting "no", the latter exercised with a greater volume than the previous as if by employing enough decibels, the measures will magically be defeated. Intensity aside, the measures have passed and are headed for a cool reception by Governor Dayton.

Despite their majorities, the House and Senate Republican-authored bills have differences that will have to be resolved in conference committees. Five Senators and Five Representatives will be appointed to represent the interests of their respective bodies, and will meet to work out a compromise. Based on the individual products of each house, it is difficult to envision resulting legislation that will be acceptable to the Governor.

Once the posturing ends, the press conferences are concluded and legislators take note of the approaching May 24th deadline for adjournment, serious negotiations between the Executive and Legislative branches will begin in earnest. Many of us around the Capitol

have no idea what the end game will be. The Republican refuse to increase taxes to balance the budget and the Governor seems unwilling to accept the severe cuts to many human services programs. What is the middle ground?

There is little utility in going through the two health and human services bills because they do not represent what will be the final product. Suffice it to say that hospitals take a significant financial hit as well as numerous state grant programs. The CALS program is funded in the House bill, but eliminated in the Senate initiative. Medical transportation faces a 4.5% reduction in both bills. Hospital admissions must be reduced in both bills to differing degrees in both bills, as

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addressed in my previous UPDATE. Hospital rebasing is delayed in both and the list of cuts goes on.

For the outside spectators of the current legislative debate, rest assured that this is not the first time in history that Democrats and Republicans were so divided. The undercurrent of frustration is palpable in both committees and during the floor sessions. Minnesota experienced similar divisions in the early 1980s during Governor Al Quie's term of office. It required 7 special sessions to finally reach a mutually acceptable accommodation. Within the past two decades both the federal and state governments have shut down.

Insults and perceived slights among elected officials were addressed in a somewhat different matter in the early 19th century, where duels were often employed to settle disagreements. There was even a clearing near the United States Capitol reserved for such 'negotiations'. To my knowledge, the Minnesota Legislature has not reached that point as of this writing.

Other Issues of Interest

* Both Omnibus Public Safety bills retain full funding

for MRCCs. There is a proposal to shift approximately \$2.5 million from the 911 fund in both years to the General Fund to balance the budget. Money would also be transferred from the Fire Safety Account, although some of the funding is retained. This isn't unlike what volunteer ambulance folks experienced with the Cooper/Sams program where virtually all of the \$15 million balance was taken last session. In addition, there is language that establishes that the Medicaid rate is the amount to be paid for medical care rendered to county jail inmates.

* Funding for Regional Systems and other grant programs administered by the EMSRB remain up in the air.

* Meetings on No Fault repeal continue this coming week. All of the measures proposing changes to the No Fault law will be heard in the Senate Commerce Committee on April 12th. No word on the House side as of yet.

* Neither individual bills or amendments proposing to repeal the Statewide Trauma System have surfaced. A likely scenario would have been a floor amendment in the Senate, last week, when the Omnibus Health and Human Services bill was debated. However, nothing transpired. I believe that we

have the matter well in hand. Sometimes the best lobbying is no lobbying at all.

* Our Revenue Recapture bill is still alive – as a standalone bill which passed the full House and as a section in the Senate's Omnibus Tax Bill. We have been working to make sure that we get the bill enacted one way or the other.

Community Paramedic

This bill continues to await final action by the House. It has taken a back seat to the tax and spending bills, but we are cautiously optimistic that it will be taken up this coming week.

It has been a long drawn out effort to get the measure to this point in the process. Although there only been 3 or 4 formal versions produced, there have been about 18 amendments to the bill as we worked to address a number of legitimate concerns with our legislation. Numerous groups weighed in on our legislation including the physicians, nurses, respiratory therapists, home healthcare providers, fire chiefs, the Department of Human Services, public health agencies and community health workers – to name a few. We have worked with them to frame the bill so that it represents our intentions, without giving up our underlying goals. Some of the organizations now support

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the measure, others do not. We don't feel that we can accommodate any other amendments without harming our initiative.

The Week Ahead

Based on the most recent schedule, this coming week does not appear to have much going on in formal meetings. The finance committees have pretty much cancelled all of their hearings for the week. However, there is a considerable amount of work going on behind the scenes.

One other issue to watch is how the health plans are treated in future drafts of the two health and human services bills, or conference committee. Over the past several weeks, you may have noticed no less than 7 articles pertaining to the plan's current surpluses which total \$2.5 billion dollars. The two Twin Cities papers have focused considerable attention on how much money the plans are making to administer MA care. Even the Governor has jumped into the discussion as to how much is too much. No doubt something will emerge which may mitigate the impact on health care programs and services.