

Health Care Coverage for Minnesotans

The cost, quality and accessibility of health care have become major legislative and policy issues in our state and in our country. Substantial increases in the cost of health care have placed considerable stress on federal, state and household budgets, as well as the employment-based health insurance system.

Minnesotans from every walk of life are struggling with the heavy burden of health care while funding for hospitals and clinics has eroded over the last several years, forcing many to reduce services, increase costs to recoup uncompensated care, and even close their doors.

With all this in mind, in the 2010 Legislative Session I joined other lawmakers committed to protecting critical health care providers from more cuts and continuing to pursue reform initiatives focused on improving care while at the same time reducing costs.

The health headliner of the session began last year with the Governor's veto of funding for the state's health insurance program (General Assistance Medical Care (GAMC)) that covers thousands of impoverished, uninsured Minnesotans without dependents.

The prospect of losing the GAMC and the ensuing human toll on Minnesota's poorest and sickest residents galvanized health care providers, hospitals, faith communities and lawmakers to collaborate on restoring a sustainable GAMC program that kept in-line with our still-struggling economy and impending budget concerns.

This collaboration was the starting point for a responsible GAMC plan that passed with strong bi-partisan support in the initial weeks of the 2010 Legislative Session. Unfortunately, the Governor once again vetoed the bill. All of the Republicans who voted for the bill stood firm with the Governor on an override attempt.

A compromised agreement was reached that restored a scaled back GAMC that will lead to significantly reduced reimbursement rates for Minnesota hospitals that preferred the vetoed 2010 legislative solution. Many hospitals across the state decided they could not afford to participate in the new GAMC plan, making it increasingly clear that another option was needed.

Recently passed federal health care reform may provide a path to improve our health care system. The early Medical Assistance (MA) option offered to Minnesota under the federal health care reform bill would help secure stable and comprehensive care for consumers; improve reimbursement to health care providers; and provide over \$1 billion in federal dollars for our hospitals and clinics.

I voted with other legislators to put early MA in state law because it is a good deal for Minnesotans that will allow us to capture a federal match for state dollars we are already spending. The current Governor chose not to opt-in to early MA. This leaves the next

Governor to officially opt-in to a more fiscally sound path that will secure \$1.4 billion in federal dollars to protect, create 20,000 jobs for hospitals and care providers and provide the means to reduce future health costs for all Minnesotans.