Jail Healthcare

Minnesota counties are responsible — and required by federal law — for delivering critical health services to inmates. Incarcerated individuals have diverse and significant health needs, such as chemical use disorders and mental health diagnoses. Individuals with mental health and/or chemical health indicators are more likely to return to jail than those without these indicators. Providing access to federal health benefits to incarcerated individuals would help counties break the cycle of recidivism caused or exacerbated by untreated mental illness and/or substance use disorders, thereby improving public safety.

AMC urges congress to support current legislative efforts to restore Medicaid and other federal benefits for incarcerated individuals during periods of pre-trial incarceration and 30 days prior to release from prison or jail. The Medicaid Inmate Exclusion Policy (MIEP) prohibits the use of federal funds and services for medical care provided to inmates of public institutions. This prohibition of federal resources has negatively impacted rehabilitation outcomes and puts a financial strain on local budgets. Allowing incarcerated individuals to receive services while in pre-trial custody and prior to their release from jail or prison will expand access to vital mental health and addiction services, thereby decreasing recidivism and improving health outcomes for individuals reentering the community. Ensuring uninterrupted health coverage for incarcerated individuals, particularly during the transition period when they are reentering their communities, is essential for protecting the health and safety of the community overall.

AMC supports legislative efforts to restore benefits under the Social Security Act for incarcerated individuals.
Responding to the Workforce Shortage Crisis

As is the case in many states across the country, a worker shortage is having severe impacts on local economies in Minnesota. With a historically low unemployment rate, there are currently four job vacancies for every jobseeker looking for work. This worker shortage is taking a toll on Minnesota employers as they struggle to fill positions and retain talent. There are multiple issues contributing to the current workforce shortage. Minnesota’s labor force participation rate has dropped since the pandemic began, including for older workers. Workers left the labor force due to a number of factors including childcare issues, retirement, and fear of COVID-19 and have not returned. Additionally, there is a mismatch in what workers want to do versus what jobs are available and the skills employers need. Now more than ever, we need strong and widely available workforce development programming to provide the education and training needed to bridge the skills gap. Support services are also necessary to ensure jobseekers have the appropriate childcare, financial resources, and tools they need to successfully participate in training programs and enter the workforce.

Public Health Emergency Preparedness (PHEP)

Responding to disasters and emergencies — whether health-centric or not — is a core responsibility of Minnesota’s local public health departments. In Minnesota, PHEP funding goes to the state and is passed through to locals. Past proposals to redistribute PHEP funds and a series of funding cuts highlight the vulnerability of federal funding and compromised local public health’s ability to respond to emergency events, such as COVID-19. Despite a temporary influx of federal funds in response to COVID-19, historically, federal funding has been cut drastically (from nearly $16 million in 2002 to $9.2 million in 2019) and funding expectations were not realigned to reflect the cuts. AMC supports adequate, sustained funding for local public health emergency planning and response to support ongoing training and equipment needs and alignment of grant expectations with funding levels.

Workforce Innovation and Opportunity Act (WIOA) Reauthorization

A strong federal workforce system is key to our continued economic recovery after the disastrous effects of COVID-19 on workers, businesses, and local economies. As such, AMC supports the reauthorization of the Workforce Innovation and Opportunity Act (WIOA) which was signed into law in 2014. It was due for reauthorization in 2020, but was not reauthorized. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market and match employers with the skilled workers they need to compete in the global economy. AMC joins the Minnesota Association of Workforce Boards (MAWB) in supporting increased funding for WIOA workforce and adult education grants to at least FY 2020 authorized levels as well as restoring career and technical education (CTE) state grant funding to $1.3 billion. Adjusted for inflation, federal funding levels are $3 billion less today than what our nation collectively invested in the publicly funded workforce system in 2000. After nearly two decades of disinvestment, the economy needs significant new investment.
Broadband and Transportation

The Infrastructure Investment and Jobs Act delivers much needed federal investments in both transportation and broadband. The bipartisan bill includes $284 billion for transportation, including a long-term surface transportation reauthorization, increased investments in off-system bridges, and $100 billion in competitive resources for counties over five years. Additionally, the bill provides $65 billion for broadband, including $42.45 billion in grants to states for broadband deployment. AMC will continue to work together with NACo and our partners at the state level to ensure successful implementation of the funding and programs provided for in the bill. While this funding is pivotal in the success of our infrastructure – roads, bridges, transit, broadband, and beyond – there is much work to do to get our transportation system up-to-speed and deliver border-to-border broadband across the state and nation.

Child Wellbeing

AMC supports federal efforts to assist states and counties to make the needed reforms in all areas related to the federal Family First Prevention Services Act (FFPSA). The FFPSA is intended to transform child welfare systems into systems that support children and families in community, reducing the need for out of home placement. Counties seeking to prevent or respond to abuse and neglect and to support families in preventing children from entering foster care have been further challenged by the impacts of COVID-19 in program implementation. As jurisdictions continue to work towards implementation of FFPSA, AMC supports efforts to increase administrative flexibility, bolster the Title IVE Clearinghouse to increase programing and expand access to culturally relevant and responsive programming and increase funding and supports, including workforce and mental health supports, aimed at assisting counties making the transition. Additionally, AMC supports a waiver for Qualified Residential Treatment Programs (QRTPs) to be considered Institutions of Mental Diseases (IMDs), to ensure federally funded health care and treatment are available to eligible children in these placements.

Election infrastructure NEW

Counties play a major role in administering Minnesota's elections. From election preparation (printing ballots, purchasing/testing election equipment, processing voter registration applications, training election judges) to administering and issuing absentee mail balloting, running voting sites on and before election day, submitting election results, and running canvassing boards, counties are the frontline of Minnesota's election system making sure the election process runs orderly and professionally. Elections serve as the pillar of democracy and thus, counties support ongoing, direct federal support to local governments in purchasing new equipment, supporting the staffing and operations of elections, and investing in infrastructure to respond to increasing cybersecurity threats. Federal funding should be direct to counties and local government.

Farm Bill Reauthorization NEW

AMC supports reauthorization and updates to all chapters of the Farm Bill, which expires in September 2023. The Farm Bill helps Minnesota counties make critical investments in infrastructure, economic development, nutrition, and conservation. Preserving these programs is vital to the strength of our local and state economy.

Mississippi River Restoration and Resilience Initiative

As the headwaters state of the nation’s most famous river, Minnesota values its unique position and role as a steward and protector of the Mississippi River natural resources area. As such, AMC supports the Mississippi River Restoration and Resilience Initiative (MRRRI), which will create a new, non-regulatory, geographic grant program to provide federal planning and funding supports to enhance river restoration, resilience projects and program activities in the Mississippi River states. AMC believes the passage of the MRRRI will complement ongoing state and local efforts by providing additional federal resources to ensure this vital resource is available for future generations.

Preemption

AMC firmly believes in the importance of local control and community-driven decision making. State and national efforts to “preempt” local governments from making critical decisions or policy changes for their constituents are contrary to the principles of federalism and directly impact community sustainability.
**Payments in Lieu of Taxes (PILT) / Secure Rural Schools (SRS)**

A considerable percentage of land in Minnesota is owned by the federal government, as such, AMC shares the priority of NACo to support restoring the full mandatory funding for the Payments in Lieu of Taxes (PILT) program, which compensates counties for tax-exempt federal land within their boundaries. AMC and NACo also support extending the Secure Rural Schools (SRS) program as a transitional funding mechanism until the federal government fully implements a sustainable long-term forest management program with adequate revenue sharing for forest counties and schools.

**Public Health Workforce Loan Repayment**

The COVID-19 pandemic exposed gaps in Minnesota’s public health workforce. Since 2008, local health departments across the United States have lost more than 20% of their workforce, which is equivalent to more than 50,000 jobs. A significant increase in investment in the public health workforce is needed and should include efforts to establish a public health student loan repayment program. AMC supports efforts to provide loan forgiveness for eligible individuals who work in a local, state, or tribal public health department for three consecutive years and offer up to $35,000 in repayment assistance for each year of service. Loan repayment will be key in recruiting a robust new public health workforce in the years to come.

**Rural Healthcare**

Counties play a critical role in providing healthcare services to citizens across the entire state of Minnesota, including those that live in more rural parts of the state. In some rural Minnesota counties, there are very limited options that exist for healthcare plans and a lack of access to care. AMC supports federal efforts to broaden healthcare access and options throughout the entire state of Minnesota. Policy and funding reforms should provide cost containment while enhancing quality care choices and grant the maximum amount of decision-making authority and flexibility as possible to the local level.

**Support for Individuals & Families**

Counties are on the front line in maintaining the safety net for those unable to work and encouraging the achievement of self-sufficiency for those who can. AMC supports increasing federal funding for and alignment among programs that assist those most in need and encourages the maximum amount of efficiency and flexibility possible at the local level. Key federal programs that assist counties in tackling poverty include the Social Services Block Grant, the Community Services Block Grant, the Workforce Innovation and Opportunity Act, the Supplemental Nutrition Assistance Program, and Temporary Assistance for Needy Families.

**Telemedicine Flexibility**

As a result of the COVID-19 pandemic, local public health and human services agencies started delivering services in new ways, including via telemedicine (both phone and video). This change allowed for increased flexibility, creating opportunities for counties to better meet clients’ needs. For example, one of the federal level requirements for Women, Infants, and Children (WIC) programming is that visits be conducted in-person. During the COVID-19 pandemic, waivers were put in place at the federal level to allow visits to happen via phone or video. However, this waiver expires 90 days after the end of the federal declaration of emergency. Allowing televisits for WIC enabled local public health to reach more clients in need, increased efficiency of staff by allowing them to see more clients and spend less time traveling, and has reduced barriers for clients. Although local public health has largely returned to in-person visits, permanent changes would provide flexibility, efficiencies, and client convenience in how services are delivered.

**Waters of the US (WOTUS)**

Minnesota counties work diligently to provide for the health, well-being, and safety of our citizens including through water management and protection efforts. Waters of the United States (WOTUS) is once again being reexamined and updates are in process. AMC urges Congress and the Administration to rewrite this rule in consultation and collaboration with state and local governments. As partners in protecting America’s water resources, it is essential that local governments have a clear understanding of any changes to the definition of WOTUS.

For more information, please contact: Kari Oldfield-Tabbert, AMC Public Health Policy Analyst and Federal Liaison, at 651-789-4354 or koldfield@mncounties.org.