

## HEALTH CARE ACCESS COMMISSION

### MINUTES

Chair Thomas Huntley began the Health Care Access Commission meeting at 10:20 a.m. on Wednesday, January 9, 2008, in Room 10 of the State Office Building. A quorum was not present.

The secretary noted the roll:

Members Present:

Sen. Berglin, Co-Chair  
Sen. Lourey  
Sen. Marty

Rep. Huntley, Co-Chair  
Rep. Abeler  
Rep. Gottwalt  
Rep. Loeffler  
Rep. Thissen

Members Absent:

Sen. Koering  
Sen. Rosen

Other Members Present:

Sen. Lynch  
Rep. Murphy, E.  
Sen. Sheran

Chair Huntley read the **1st Recommendation** for consideration before turning the floor over to Co-chair Berglin:

The Minnesota Department of Health should submit recommendations on issues involving scope of practice and licensure for pharmacist integration, advance practice nurses, and others as needed to the Legislative Commission on Health Care Access

Co-chair Berglin stated that staff will draft what the commission has agreed to through today and will provide a draft to members hopefully by week's end or before Tuesday's meeting so members will have time to review and prepare changes or questions by Tuesday. She also stated that the Insurance Exchange information will not be available until the end of January or early February 2008; therefore the commission will meet then and address the Insurance Exchange topic as an addendum at that time.

Co-chair Berglin introduced her new committee clerk, Erik Didrikson, a University of Minnesota student and former intern who is filling in for Shannon Anderson, Committee Administrator, in her absence. Mr. Didrikson was asked to make a few comments to the members and audience which he did.

Co-chair Berglin moved adoption of Recommendation #1 with the words "as needed" moved and inserted after the word "recommendation". Discussion occurred and Chair Huntley suggested staff could work on possible language.

A quorum was present.

Co-chair Berglin renewed her motion to adopt Recommendation #1, as amended. The motion prevailed.

**Recommendation #2:**

The Health Care Access Fund should be reserved only for health care related purposes.

Senator Lynch had an amendment. Co-chair Berglin moved to adopt Recommendation #2, amended to read:

The Health Care Access Fund should be reserved only for health care purposes that are not the responsibility of the general fund.

The motion prevailed.

**Recommendation #3:**

The Legislature should take a global view of the health care system when recommending changes in order to increase funding flexibility between different health care sectors, avoid unintended consequences, assess the total impact of changes, and reduce cost shifting.

Co-chair Berglin moved adoption of Recommendation #3 and the motion prevailed.

**Recommendation #4:**

The Health Care Access Commission should work to identify gaps and deficiencies in the health care system and make recommendations on how to create a more individual-centered, seamless health care continuum that allows a smooth transition between providers and services and avoids unnecessary fragmentation.

Co-chair Berglin moved adoption of Recommendation #4. Discussion followed and Co-chair Berglin renewed her motion to adopt Recommendation #4, which prevailed.

**Recommendation #5:**

Savings in the long-term care system that can be achieved by providing early intervention services to prevent chronic illnesses later in life should be taken into consideration when calculating long-term care costs.

Co-chair Berglin moved adoption of Recommendation #5. Discussion followed and Representative Thissen moved to add: "The Departments of Human Services and Finance should recommend changes to the budgeting process for fiscal notes to account for the interaction between basic health care and long term care.

Co-chair Berglin renewed her motion to adopt Recommendation #5 with the added language and the motion prevailed.

**Recommendation #6:**

The Employer Sponsored Insurance coverage definition should be amended to include a percentage of income cap of 6% for the employee's share.

Co-chair Berglin notes that this recommendation was laid over from the last meeting and there still is no fiscal note. This provision relates to expansion of MinnesotaCare. Discussion occurred and Co-chair Berglin moved to lay over Recommendation #6. Members then could bring proposals with them to the next meeting.

**Recommendation #7:**

The Legislature shall establish incremental goals to achieve universal coverage by 2011. Failure to meet such goals would trigger a requirement that all citizens obtain and retain affordable health insurance coverage.

Such a requirement would include:

- o An affordability standard (as already recommended)
- o Income-related premium subsidies (as already recommended)
- o Guaranteed issue/renewal in the small group and individual market
- o Assistance to individuals and small employers in purchasing health care (as already recommended)
- o Risk sharing mechanisms that adjust for high risk populations
- o A minimum benefit set to meet the requirement
- o Enforcement mechanisms

Co-chair Berglin moved adoption of Recommendation #7 without the benchmarks and to revisit the issue of benchmarks when they become available. Discussion occurred. Chair Huntley instructed staff to work on language.

Co-chair Berglin moved to lay over Recommendation #7 until we get the benchmarks. More discussion occurred.

Co-chair Berglin renewed her motion to lay over Recommendation #7 until a future meeting.

**Recommendation #8:**

The Legislature and Legislative Commission on Health Care Access shall continue to study the option of a single payer system for Minnesota.

Discussion occurred. Co-chair Berglin moved adoption of Recommendation #8 and the motion prevailed.

Before adjournment, there was discussion about whether Senator Sheran's work group would be willing to continue their work and she indicated she they would.

Co-chair Berglin encouraged members to put in writing any suggestions they may have relating to the Minnesota Safety Net Coalition Health Care Policy Recommendations which were in members' packets (see attached PDF).

The meeting adjourned at 11:40 a.m.