



The clock is ticking a little faster now that it's week 7 at the Minnesota Legislature. Of course, we're still working and watching MNA issues that deserve funding in the final budget, but a few other bills now threaten to take up lawmakers' attention and the brief time in the session.

MNA has submitted a letter of opposition to Rep. Kathy Lohmer's bill to defund Planned Parenthood clinics ([HF 3467](#)). The Stillwater Republican wants to eliminate state funding for providers that offer reproductive health services, but those providers are also the only nearby clinics for healthcare for other women's health needs. It would result in a loss of comprehensive healthcare for thousands of Minnesotans. As of now, it's not included in the final House Health and Human Services bill, but it may come up for a vote all by itself on the House floor. If it does, this will rob lawmakers of needed time to pass final bonding projects.

Likewise, the "Unfair Right to Work" bill is still alive as sponsored by Rep. Steve Draskowski. The Mazeppa Republican wants Wisconsin-style limits on unions that would limit public employees' bargaining rights and stop dues collections. This harmful proposal threatens not only to take up valuable time but also to stall the already agreed upon contracts for state workers. The bill was moved to the House Ways and Means committee. Still up in the air whether it will move for a vote on the House floor on it's one or as part of a larger omnibus bill. Please send your representative and senator a message that Minnesota families don't need an unfair, unnecessary and unsafe Right to Work law. [Click here](#).

House Republicans have rolled the Health and Human Services Finance Bill ([HF 3467](#)) with funding bills for other big departments, Public Safety and State Government services. It will require a new bill number, which we'll pass along when we get it.

Senator Tony Lourey has put together a different package in that chamber. The Kerrick Democrat has included budget increases for the mental health facilities in Anoka, St. Peter, and Community Behavioral Health Hospitals (CCBHs). The numbers aren't as high as Governor Dayton proposed, which would increase staffing for comprehensive care for patients. Mankato Senator Kathy Sheran added an amendment to track the effects staffing could have with incidents of violence and patient outcomes.

Another difference in the Senate version of funding is putting Minnesota on the road to the possibility of expanding MinnesotaCare to more lower-income families, continuing Medical Assistance eligibility to families and kids, and allowing anyone to purchase MinnesotaCare who wants it (the "public option" bill). These are all issues MNA has supported.

What's still not included anywhere is funding to keep the Willmar hospital open or continuing the provider tax. This 2 percent tax on providers funds healthcare coverage for low-income families, but it's set to expire in 4 years.

