

Meeting Minutes: Health Care Workforce & Education Committee

DATE: NOVEMBER 6, 2024

Attendance

Committee Members

- Brad Benson—M Health-Fairview
- Susan Culican –University of Minnesota
- David Dahlen – Mayo Clinic
- Miranda Gilmore – Fraser Integrated Healthcare
- Robert Miner – Allina Health/Abbott Northwestern
- Christine Mueller –University of Minnesota
- Peter Nalin – University of Minnesota Medical School, Duluth campus
- Michelle Noltimier—HealthPartners Institute
- Sheila Riggs – University of Minnesota
- Thomas Satre – Vice Chair – CentraCare Health
- Troy Taubenheim – Chair - Metro Minnesota Council on GME
- Linda Welage—University of Minnesota

Members Not in Attendance:

- Roger Dearth—Mayo Clinic
- Kelly Frisch— HealthPartners
- Badrinath Konety—Allina
- Kimberly Lakhan—College of St. Scholastica
- Nate Mussell —Fairview
- Meghan Walsh –Hennepin County Medical Center

State of Minnesota Staff

- Kelsey Besse, Susan Castellano, Teri Fritsma, Nitika Moibi, Zora Radosevich, Diane Reger, Melissa Stevens, Madison Weirick - MDH
- Susan Hammersten - DHS

Agenda

- Welcome: Troy Taubenheim, Chair
- GME Funding Update: Susan Hammersten
- Office of Rural Health & Primary Care (ORHPC) Programs/Grant: MDH Staff
 - Site-based Clinical Training (SBCT) – Zora Radosevich
 - Medical Education & Research Cost (MERC) – Diane Reger
- Health Care Workforce Advisory Council Discussion: Nitika Moibi, MDH
- Health Care Workforce & Education Committee Discussion: Zora Radosevich, MDH
- Setting 2025 Meetings: Troy Taubenheim, Chair

Next meeting

Date: February 5, 2025

Time: 1 to 3 pm

Location: Web-based teleconference

Agenda items: Submit proposed agenda items to health.merc@state.mn.us or committee chair.

Meeting notes

Welcome: Troy Taubenheim, Chair

The meeting was called to order.

GME Funding Update: Susan Hammersten, DHS

The MERC factors were added to the Medicaid FFS rates on October 16, 2024. DHS will reprocess all of the inpatient hospital claims back to January 1, 2024, to correct those payments. The reprocessing will take place the week of November 11, so that hospitals will have corrected payment amounts prior to the close of the calendar year.

Feedback was provided regarding:

- DHS found an error in the mathematical order of operations used between Disproportionate Share Hospital (DSH) payments and the MERC factor. DHS is working on this and will reconcile down to the penny.
- Sheila Riggs asked how the affiliated sites will receive their payments. Susan said that DHS worked with the hospital systems to determine how hospitals wanted to handle payments to affiliated sites. DHS then provide the hospital a breakdown of the funding.

Moving into the next rate schedule, Susan will use the MERC calculations provided by Diane Reger in setting the rates for the next two-year period that will begin on July 1, 2027. The MERC formula determines the amounts that will be paid, and the rates are set by DHS based on these calculations. She noted that the rates will decrease in the next period since they will be paid out over a two-year period, unlike the current rates that had payments condensed into a shorter payment cycle.

ORHPC Programs/Grants: MDH Staff

Site Based Clinical Training Grant: Zora Radosevich

The application for the Site-Based Clinical Training Grant was incorporated into the MERC portal. Funding for this cycle includes \$5,550,000. For this grant cycle, priorities are: 1) rural primary care and 2) oral health, whether the training occurred in rural or urban sites. Rural was defined as counties outside the seven (7) metropolitan counties. Primary care status was determined by utilizing teaching institutions' program designation through the MERC application. Additional information can be found at: [Site-Based Clinical Training Grant Program](#)

Reports for funding distributed in the previous grant cycle can be found at:

2024 Grants by Clinical [Training Site \(Excel\)](#)

2024 Grants by [Sponsoring Institution \(Excel\)](#)

Medical Education and Research Cost (MERC): Diane Reger

Last week, MDH received 2,181 applications for clinical training that took place in FY2023. A total of 27 Minnesota Sponsoring Institutions, 322 accredited teaching programs, and 484 clinical training sites applied. The applications are under review. It's currently estimated that Step 2 will open on November 15th to 399 clinical training sites meeting the minimum of 0.10 FTE trainees across all teaching programs. Sites with fewer than 0.10 FTE trainees account for a total of just over 5 FTEs spread across 85 different training sites. Numbers may change as the review process continues.

Applicants can access the criteria, deadlines, and instructions for expenditure reporting on the MERC [website](#). These application materials also contain an Excel worksheet for preparing/collecting the expenditures that will be entered the application portal.

Diane shared examples of the grant portal's training site application screen and the expenditure messages that will appear on the Training Site Application screen once expenditure reporting opens.

- Expenditures Not Submitted
 - Applicant must submit an expenditure report or withdraw from the MERC grant by 4:30 pm (CT) on December 15, 2024.
- Expenditures Not Requested
 - Below FTE Minimum ****Site is not eligible for the MERC grant.****
 - Applying for Site-Based Clinical Training (SBCT) Only.

By December 15th, MERC applicants should have one of the following expenditure messages:

- Expenditures Submitted
 - Expenditure report has been submitted.
- Withdrew MERC Application
 - Applicant withdrew from the MERC grant.
- Expenditures Not Requested

MERC staff will also be working with DHS to:

- Gather CY2023 MA/PMAP reimbursements for the grant formula.
- Determine grant pool eligibility for applicants affiliated with a hospital system.

Troy asked how the current application counts compare to the previous cycle. Diane provided the figures and noted that they were very similar.

Health Care Workforce Advisory Council Discussion: Nitika Moibi, MDH

Nitika provided the website to access the Health Care Workforce Advisory Council Request for Feedback. The website provides background below, outlines the proposal, and has a form seeking feedback.

The [Minnesota Legislature, in 2024 session laws, Chapter 127, Article 66, Section 22](#), directed the Minnesota Department of Health to recommend legislative language to create a Health Care Workforce Advisory Council in consultation with the University of Minnesota and the Minnesota State HealthForce Center of Excellence.

The planning team strongly agreed on the need to engage with stakeholders and get feedback on the proposed legislative language for the council. Please review the draft language and provide your feedback below.

MDH has been meeting with representatives from the University of Minnesota and the Minnesota State HealthForce Center of Excellence since September to discuss options for the scope, purpose, membership and vision for this council. We have also consulted with other states that have similar councils and with national experts on the duties and composition of an effective workforce council.

MDH will be submitting a final report to the legislature in February 2025 that will include legislative language to create the Health Care Workforce Advisory Council with recommendations to address the following items:

- (1) membership of the advisory council;
- (2) funding sources and estimated costs for the advisory council;
- (3) existing sources of workforce data for the advisory council to perform its duties;
- (4) necessity for and options to obtain new data for the advisory council to perform its duties;

- (5) additional duties of the advisory council;
- (6) proposed legislation to establish the advisory council;
- (7) similar health workforce advisory councils in other states; and
- (8) advisory council reporting requirements.

Health Care Workforce & Education Committee Discussion: Zora Radosevich, MDH

Zora shared a list of the current membership. She thanked Troy Taubenheim, committee chair, for leading the committee beyond his original term as the advisory committee discussions were forming. Dr. Thomas Satre, vice chair, will be the incoming committee chair in 2025. Current committee members interested in becoming or nominating a new the vice chair can submit feedback to health.merc@state.mn.us. MDH will review the nominations and together with the committee chair, make a recommendation to the committee for approval at the February meeting. MDH and the committee chair will also determine if a committee review of the bylaws is needed to determine recommended changes. Zora indicated that this committee's role may change as the advisory committee evolves. Troy Taubenheim commented that MERC and GME funding discussions should continue if the workforce discussion is absorbed by the advisory committee. Zora agreed.

Setting 2025 Meetings: Troy Taubenheim, Chair

Web Based Teleconference 1 – 3 pm: February 5, May 14, August 6, and November 5, 2025.

Submit agenda items to committee chair or health.merc@state.mn.us.

Agenda will be posted on the committee [website](#) under Meeting Materials approximately one week before the scheduled meeting.

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