



Draft
FY2007 FEDERAL AGENDA
for the
CITY OF MINNEAPOLIS, MINNESOTA

This memorandum outlines areas of Federal government in which the City of Minneapolis has a particular interest or local concern. The Office of Intergovernmental Affairs within the City of Minneapolis welcomes any questions on the on these or other issues pending before Congress.

Thank you for helping to build a better Minnesota.

If you have any questions or need additional information, please don't hesitate to contact:

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Programs

Community Development Block Grant (CDBG)

Cities throughout the country have used a combination of financial resources to conduct their community development activities. A major financial resource has been the federal community development block grant (CDBG) administered by the Department of Housing and Urban Development (HUD). For nearly thirty years CDBG has supported such activities as new housing development, the rehabilitation of existing units, employment training, small business creation, infrastructure improvements and cleanup of contaminated sites.

The City of Minneapolis has also used its annual appropriation of approximately \$16.0 million to improve housing, stimulate job growth, improve public infrastructure, provide public health services and school readiness programs. The federal funds have matched and leveraged other public and private funds. The reduction in CDBG could, for example, hinder the city's efforts in program year 2005 to assist 200 persons to obtain private sector jobs, develop 150 multi-family housing units, acquire and demolish 110 vacant and boarded housing units, provide loans for capital improvements to 25 child care facilities, reduce lead hazards in 70 housing units and provide youth employment training to 300 youth age 14 to 21.

The city strongly supports the continuation of the CDBG program and its administration by HUD. The city urges Congress to fund CDBG at no less the \$4.7 billion in fiscal year (FY) 2007 and of the total at least \$4.350 billion should be for formula grants. The funding request would fund the program at its FY 2004 level and restore the \$200.0 million cut made in FY 2005.

Housing Programs

In addition to the CDBG program, the city of Minneapolis supports the continuation of HUD's housing programs. The city has been able to assist in the development of housing for low and moderate income persons through such programs as HOPE VI and HOME. The city also supports the continuation of the housing voucher program as well as programs to assist the homeless.

Public Housing Authority

The city also supports full funding for the Public Housing Authorities across the nation. The Minneapolis Public Housing Authority (MPHA) is the state's largest public housing authority. MPHA manages and maintains 4,856 units in forty high rise buildings, 731 single family homes and 184 town homes. In addition, it administers 4,000 Section 8 vouchers and has maintained a 99%-100% occupancy rate in its properties. In 2004, federal funding provided 85% of MPHA's funding or just over \$89 million.



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MPHA has designated nine apartment complexes with nearly 1,600 residents for senior citizens. In addition, it provides assisted living programs for frail and elderly and using funds from the it's Home Ownership Made Easy (HOME) program assisted families to move from Section 8 assistance to their own homes. The authority's "Moving Home" program was the first in the nation to provide Section 8 families with the education and counseling they will need to purchase and maintain their own homes.

Public Safety Programs: National Fire Academy

The Minneapolis Fire Department has benefited from the research and training provided by the national Fire Academy. City personnel have attended training programs offered by the academy and the city supports continued federal funding of this resource.

Universal Health Care

The City supports legislation that will ensure that all residents have access to health care. Congress should develop legislation that provides a health care program that is available regardless of a person's economic standing and includes preventative, emergency and mental health services.

Telecommunications Law Revisions

The Congress is interested in telecommunications law revisions. House and Senate committees with jurisdiction for the issue have conducted or have scheduled hearings. The House Energy and Commerce Committee has conducted hearings on bills and working drafts while the Senate Commerce, Science and Transportation Committee has set a series of hearings for the first three months of 2006.

The House committee released a working draft in early November and held a hearing on the bill later that month. As a result of concerns raised by national organizations including the National league of Cities and the US Conference of Mayors the committee decided to continue its work and conduct further hearings in 2006. The committee chair had hoped to move the bill through a subcommittee in December 2006. The major concerns of the national organization include but are not limited to franchising authority; requiring channels for public education, public safety; and providing for universal and affordable access to communications services.

Key policy issues are the type of franchise agreement - national or local – for the new broadband video services being offered by telephone companies and the definition of broadband video services.

During 2006 both the House and Senate could adopt a bill amending the federal communications law. In framing amendments Congress should:



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- continue to permit local government to facilitate or offer advanced communications services to their citizens through local franchise agreements
- preserve local authority to manage public rights of way for the benefit of everyone.
- Reaffirm local government's to provide public safety services over the communications system
- Recognize local roles in promoting universal access to a full range of communications services.

Medicaid (called Medical Assistance in MN)

Medical Assistance (MA) provides health care coverage for low income children under the age of 21, parents or relative caregivers of dependant children, pregnant women, people who are 65 or older and persons with disabilities. Minnesota's joint federal/state-funded Medicaid program covers 366,000 low-income senior citizens, children, families, and people with disabilities. Families, children and pregnant women make up the largest MA group (68 percent), but account for the least expenditures (22 percent). People who are elderly or disabled make up the smallest group (32 percent) but represent the majority of expenditures (78 percent). In addition to MA, the state offers other publicly funded health care programs such as MinnesotaCare and General Assistance Medical Care. More Minneapolis residents are enrolled in MA as opposed to enrollment in any other state funded health care program.

FFY 2007 Request: The City opposes cuts to Medicaid and to policy changes that would reduce services to low-income Minneapolis residents. An example of a harmful policy change is the current proposal to disallow using MA funds to help very vulnerable Medicaid clients navigate their healthcare and basic life needs through targeted case management. In Minnesota, targeted case management is used to coordinate services for foster children, people with developmental disabilities and people with mental illness. For example this includes helping families with an emotionally disturbed child connect with and organize health, school, and correctional services in ways that allow the child to remain at home and avoid institutionalization. Minnesota's infrastructure for serving adults with mental illness would also be severely cut. This proposal would cost Minnesota \$121M each year.

Streetcars

The 2005 Congress approved modifications to the federal transit new starts program related to smaller transit projects. The "small starts" program provides federal funding for transit projects that have a total cost of less than \$250.0 million. The program is aimed at assisting such transit projects as street cars and bus rapid transit. The Federal Transit Administration (FTA) estimates that the small starts program could begin funding within the next few years.

The City of Minneapolis has begun a developing a ten year transportation plan. As part of the plan the city is examining the role of street cars in the city's transportation system. Street cars could reduce congestion and provide links to the regions developing rail system.

The city supports the small starts program and urges Congress to continue its funding and ensure that the program guidelines provide for the intended program flexibility and responsiveness.



PROJECTS AND GRANTS

Planetarium

The new Minneapolis Central Library, opening in 2006, will host the Minnesota Planetarium & Space Discovery Center. The Library and Planetarium will serve as important cultural and educational resources and constitute a major component of ongoing downtown revitalization. The five story domed structure will be a stunning landmark, at Hennepin and Third, visible from the Hennepin Avenue Bridge and Gateway Park.

The Minnesota Planetarium and Space Discovery Center will feature a fiber-optic star projector that will stimulate a day and night sky and an Observatory that will connect visitors to remote telescopes and orbiting satellite. For example a school group can view Saturn live via satellite link to a telescope located in Europe. The Planetarium will also host traveling national exhibits and have an outreach program that will bring cutting –edge- astronomy education to cities throughout the state. The Planetarium will coordinate its programs with the University of Minnesota.

The Planetarium will hopefully inspire young minds. In 1961 a young Minnesotan attended the opening of the former Planetarium and later reflected on his visit with the following :

“On February 4, 1961, I attended the opening day of the Minnesota Planetarium as a 10 year old boy. That first journey to the stars had a profound impact on me, sparking a lifelong interest in space and a career as an astronomer and NASA astronaut. I believe planetariums are more powerful today, because light pollution has spread so far beyond our urban centers that most children and even many adults have never witnessed the majesty of the night sky. This is a terrible loss” (George “Pinky Nelson, NASA astronaut).

The Planetarium has received a \$22.0 million capital bonding grant from the Minnesota Legislature and has initiated a private fund raising drive. Federal funding would assist in completing the project on time. Possible federal sources include but are not limited to the Department of Education, NASA, and the Department of Defense.

FY 2007 request: \$4.0 million for construction.

Regional Water System Interconnect

Twenty metropolitan area cities and the Twin cities International Airport receive drinking water from either the Minneapolis or St. Paul water systems. The cities are located in four counties have a combined population of 1.0 million or % of the seven county metropolitan area’s total population. The Minneapolis system supplies water to ----- cities while St. Paul serves ----- cities. The Minneapolis and St. Paul systems are not interconnected.

The proposed interconnection will cost approximately \$34.0 million and will provide a backup system if one is off line due to such occurrences as a natural disaster, or security problem. The



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Minnesota Department of Health has requested \$10.0 million from the 2006 Minnesota capital bonding bill for the project.

FY 2007 Request: \$15.0 million for construction of the project.

Upper Mississippi River

The City of Minneapolis along with the Minneapolis Park and Recreation Board has completed a master plan for the upper Mississippi River. The plan presents a bold vision for developing the riverfront into a regional park in north and north east Minneapolis. The plan will provide public access to the river, create a system of riverway streets, enhance the ecological function of the river corridor, link the upper river to the Grand Rounds parkway system, realize the area’s potential for economic development and establish urban design guidelines. When completed the plan will result in 90 acres of new park, 15 miles of bike and recreational trails, 4 miles of restored riverbank, 5.25 miles of parkway and boulevard, 2,500 housing units in new riverfront neighborhoods, and 2,000 net jobs.

FY 2007 Request: for construction of the public infrastructure

Empowerment Zone

Minneapolis was designated one of fifteen “Round II” Empowerment Zones in 1998. This designation allows Minneapolis to use federal tax incentives to spur investment, creating jobs in our most economically distressed neighborhoods. Also, Round II Empowerment Zones traditionally receive federal appropriations to encourage investment in affordable housing stock, job training programs, small business development, and education. The designation has already resulted in \$18.99 million in direct funding, \$100 million in tax incentives and \$130 million in tax-exempt bonding authority. Minneapolis’ Empowerment Zone is 6.7 square miles, including 49,000 residents and 19 of Minneapolis’ 81 neighborhoods.

Federal Funding for the Minneapolis Empowerment Zone

FY 1999	\$3 million
FY 2000	\$3.6 million
FY 2001	\$12.3 million
FY 2002	\$3 million
FY 2003	\$2 million
FY 2004	\$1 million
FY 2005	\$2 million
FY 2006	-- 0 --

Although no funding was appropriated for FY 2006, the city is requesting funding for FY 2007.

For more information about the Minneapolis Empowerment Zone, you may wish to visit <http://www.ci.minneapolis.mn.us/citywork/ez/>.

FY 2007 Request: \$3 million for the Minneapolis Empowerment Zone, and each of the 15 Round II Empowerment Zones.



Homeland Security

The City supports the continuation of the Urban Area Security Initiative (UASI) and the Metropolitan Medical Response System (MMRS) grants. From 1999 through 2005 the city has received \$11.2 million from the two grant programs. UASI funds have been used to secure public buildings, train public safety personnel, purchase equipment and improve communication systems.

The City recommends that UASI and MMRS continue as separate programs.

Emergency Operations Center

The development and implementation of a dedicated Emergency Operations Center (EOC) is vital to the City's ability to provide essential services throughout the metropolitan area during a disaster—be it natural, accidental, or intentional. An inadequate facility hampers and limits the effectiveness of the command structure; during an incident the coordination between various City departments and federal and State agencies is vital. Situated in an ideal location, the Minneapolis Fire Training Campus would provide a secure operations center with enough room to respond to a major incident affecting the area and meet the training needs required to respond to an incident.

FY 2007 Request: \$6 million to build an Emergency Operations Center that would serve the entire metropolitan area.

Airport Noise Mitigation

During 2005, the north-south runway will open at the Minneapolis-St. Paul airport. The new runway and increased aircraft operations will increase the number of residences and businesses exposed to noise. The metropolitan Airports Commission (MAC) has not continued its noise mitigation program out to the 60 DNL. Therefore, the residents of the Minneapolis and four other cities (Richfield, Bloomington, Mendota Heights, Eagan) will not be assisted by MAC at previous levels of mitigation.

FY 2007 Request: The city requests that the Congressional delegation urge the Federal Aviation Administration (FAA) to not approve the Metropolitan Airport Commission's noise compatibility program unless it includes sound insulation of noise impacted areas as incorporated into the 1998 Record of Decision (RoD). Specifically, the FAA should approve a noise compatibility program that will provide a 5 decibel reduction in a residence from the existing noise level as outlined in the Metropolitan Airport Commission's 1996 MSP Noise Mitigation Program. To achieve the reduction such measures as new windows, doors, additional insulation, vent baffles and the addition of central air are needed.

Combined Sewer Overflow (CSO)

CSO's are remnants of the country's early infrastructure. In the past, communities like Minneapolis built sewer systems to collect both storm runoff water and sewage in the same pipe. In 1922, new developments constructed separate storm drain systems and in 1986 the city began an accelerated program of construction to separate the old, combined sewer systems, aided by state and federal funds. These efforts have reached 95% of our system, but the remaining connections in the older parts of the city still cause an overburden of the sanitary sewer system when we have a big rain event. In Minneapolis, an overloaded sanitary system causes overflow of untreated sewage into



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the Mississippi River, and in extreme events causes backup of raw sewage into residents' basements.

FY 2007 Request: The City thanks you for helping to secure \$1,500,000 in FY 2006. To continue this project, we request \$1.25 million to continue combined sewer overflows.

Twin Cities Transportation Projects.

In December 2004 the Metropolitan Council adopted the Regional Transportation Policy Plan. The plan outlines the transportation needs and issues of the region which is expected to add 1.0 million people by 2030.

The plan identifies transportation improvements that will help the region increase mobility and reduce congestion. The Metropolitan Council identified five priority Tier 1 transportation corridors that should be the focus of the region's transportation investments. The corridors include the I-35W bus rapid transit (BRT), the Northwest Busway, the Northstar Commuter Rail, Cedar Avenue BRT and the Central Corridor LRT. When completed the corridors will provide commuters with a transit option that would have dedicated lanes and operate at posted speeds.

The region, in cooperation with the Minnesota Department of Transportation (MnDOT), has been working on the corridors and some of the corridor projects are scheduled for construction within the next year. To complete the projects as scheduled additional funding will be required.

FY 2006 Request: The City of Minneapolis supports continued federal funding for the Tier 1 projects.

Pedestrian Bridge Across Hiawatha: 46th Street Station

The need for the bridge has been identified by several groups. The groups include neighborhood organizations such as the River Lake Greenway Community Group, Longfellow Community Council, and the Standish Ericsson Neighborhood Association. The bridge would allow pedestrians to safely cross Hiawatha Ave, a busy four lane roadway that parallels the Hiawatha LRT line. The bridge would also allow safe access to the 46th Street LRT station. The cost of the bridge is estimated to be in excess of \$1.5 million.

FY 2006 Request: \$500,000 to begin preliminary engineering and planning for the project.

Twin Cities Healthy Start

Twin Cities Healthy Start is a collaborative of local government agencies, community based agencies, and community members committed to establishing a comprehensive and coordinated approach to reducing the disparities in infant mortality throughout Minneapolis and St. Paul among African American and American Indian families. This project is jointly sponsored by the Minneapolis Department of Health and Family Support and St. Paul-Ramsey Department of Public Health. Twin Cities Healthy Start is one of 96 projects nationwide funded by the U.S. Maternal and Child Health Bureau. The Healthy Start Initiative was established to develop community driven strategies directed at addressing the cause of infant mortality and low birth weight among low income populations of color and American Indians.



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Twin Cities Healthy Start contracts with local community clinics and social service agencies to provide supportive services and health education to pregnant and parenting African American and American Indian women in Minneapolis and St. Paul. Our project includes 11 community/planning districts within the Twin Cities area and specifically targets the following communities: Camden, Near North, Northeast, Phillips, and Powderhorn of Minneapolis; and Dayton's Bluff, Hazel Park/Hayden, Northend, Payne/Phalen, Summit/University, and Thomas/Dale planning districts of St. Paul. This project meets the Maternal and Child Health Bureau's eligibility criteria because it experienced, for the period of 1999 – 2001 an African American infant mortality rate of 14.56 deaths per 1,000 births and an American Indian infant mortality rate of 12.80 deaths per 1000 births.

Twin Cities Healthy Start provides the following services:

- coordinates a community consortium with 104 active members serving on five sub committees;
- facilitate ongoing training to approximately 60 professionals annually on prenatal health topics
- facilitate community health education to approximately 150 African American and American Indian families
- Provide case management and supportive services to over 500 women annually through contracts with North Point healthy and Wellness, Division of Indian Work, Open Cities Health Center and American Indian Family Center.

FY 2007 Request: City of Minneapolis received a four year award beginning June 1, 2005 – May 31, 2009. The annual award amount to the City of Minneapolis is \$925,000. Currently there is concern that the added pressures to pay for Hurricane Katrina will result in Healthy Start funding being lower than the \$97,795,000 provided in the House bill. Not only would this threaten funding for the 12 projects that are up for renewal in 2006, but it also could well mean funding cuts for existing grantees should HRSA decide to fund all or most of the projects up in FY 2006 as well as existing grantees.

Funding at any level short of \$104 million may mean that the Healthy Start project in Minneapolis could face reduced funding. As a result, the project would serve fewer at risk mothers and increase costs to metro hospitals as more at risk women seek emergency services or deliver high risk babies that need costly intensive care services. In addition, the Minnesota Legislature has established a goal to reduce the disparities in infant mortality by 50% by 2010 and that without the full Healthy Start investment will have a harder time reaching that goal.

Steps To A Healthier Minneapolis

Steps is an initiative of the US Department of Health and Human Services which aims to help Americans live longer, better and healthier lives by reducing the burden of diabetes, overweight, obesity and asthma by addressing three related risk factors – physical inactivity, poor nutrition, and tobacco use. The Minneapolis Department of Health and Family Support was selected along with the Minnesota Department of Health and the cities of St. Paul, Rochester, and Willmar to receive Steps to a HealthierUS funding. Funding began in October 2004 and is scheduled to continue for five years. Steps activities will occur in four sectors: community, health care settings, schools and



worksites. The communities of Near North and Philips were selected as priority communities for the first two years of the project. Northeast Minneapolis was also selected in a more limited capacity.

FFY 2007 Request: Level funding for the Steps to a Healthier MN program for the next FFY. The Minneapolis Department of Health and Family Support received \$712,500 from the Minnesota Department of Health for Steps for the period Sept. 22, 2005-Sept. 21, 2006.

Lead Prevention and Remediation Resources

The City of Minneapolis and Hennepin County receive funding from HUD for the remediation of homes and buildings that contain lead. In addition, Minneapolis Department of Health and Family Support receives funding for outreach and prevention of lead poisoning for children and pregnant women. The City and County coordinate resources so that Minneapolis families identified through the outreach grant and needing assistance with lead remediation can access these services through Hennepin County's Lead Hazard Control Grant.

FFY 2007 Request: Continued funding for Hennepin County's Lead Hazard Control Grant.

Public Health Emergency Preparedness

As we have learned from the recent disasters wrought by Hurricanes Katrina and Rita, implementation of emergency response will happen at the local level and we need to have resources to prepare and respond. Recent support for public health emergency preparedness planning has helped initiate efforts for local public health to plan but a great deal more needs to be done to catch up to other first responders.

FFY 2007 Request: Maintain funding of "Public Health Preparedness" at the local level through the Public Health Emergency Preparedness grant from the Centers for Disease Control to the State of Minnesota. Through this grant, the Minnesota Department of Health receives \$15 million per year. In addition, we support continued funding from the HRSA funded Bioterrorism Hospital Preparedness Program. Minnesota receives approximately \$20 million annually from HRSA for statewide and local efforts.

Minnesota's Title V Maternal and Child Health (MCH) Block Grant

The Federal Maternal and Child Health Bureau funds the Minnesota Department of Health and local public health agencies to address health concerns of children and adolescents; children and youth with special health care needs; and pregnant women, mothers and infants. On the Federal Level, it is anticipated that this program will receive a \$25 million cut for FFY 2006. As a result, states and local public health agencies will have fewer funds to spend on critical maternal and child health programs. In Minneapolis, we use the MCH Block Grant Funds to support the School Based Clinic Program, and grants to community based organizations like the Neighborhood Health Care Network and Children's Dental Services. In 2006, we will receive a \$58,000 decrease as a result of the Federal budget cut.



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FFY 2007 Request: The City to opposes further cuts to the Maternal and Child Health Block Grant.

Traffic Management Center/Intelligent Transportation System

The City needs to replace, upgrade and enhance its Traffic Management Center and ITS capabilities to minimize congestion, reduce vehicle emissions and fuel consumption, facilitate traveler information, improve security systems, and improved communication links to MnDOT, Hennepin County, City of St. Paul, Metro Transit and the University of Minnesota. The key improvements include central traffic signal computer software and hardware replacements, communication system upgrades, and electromechanical signal controller replacements. This overall program is approximately \$12.5 million.

FY2007 Request: \$6 million to begin this multiphase project.

Gunfire Detection Systems

Local law enforcement agencies have relied on traditional street interdiction to prevent gun violence. This is a dangerous task, it often times puts the safety of the public and police officers at risk. The right technology can decrease this risk. Gunfire detection systems can pinpoint the precise location of gunfire or weapon-fire to police within in seconds, thereby increase weapons related arrests, save lives, and add to the safety of neighborhoods. Year to date Minneapolis Police Department officers have been dispatched to 22% more shots fired calls than last year (Y04/3381 to Y05/4141, Jan-Dec 12).

The Minneapolis Police Department is interested in this technology to improve neighborhood safety. The system uses wireless sensors (approximately 8 sensors per square mile). If a gunshot is fired within the coverage area, notification would be sent to the Minneapolis Emergency Communication Center (MECC) within 3-6 seconds. MECC would be able to quickly dispatch officers to a pinpoint location of the gunfire event. The system can be integrated with existing cameras or with new cameras. It also records a permanent audio record of the gunfire event which can be used to enhance subsequent investigations or in court. It is portable and expandable. Experience from other cities has demonstrated that programs of this type create the impression, if not the reality, that if you discharge a gun in the city you will be caught by the police. The goal is to reduce indiscriminate gunfire, reduce gunshot related injuries and deaths, and to increase arrests associated illegal gun related activities.

The initial implementation will cover a 4 square mile area; optimal coverage would be 10-12 square miles.

FY2007 Request: \$850,000.00

Railroad Safety Zone

A new federal law requires all Federal Railroad Administration trains sound their whistles at intersections unless specific safety equipment is in place. The City would like a change to the law allowing cities to retain their Quiet Zone ordinances keeping trains from blowing their whistles, or federal money to help buy the necessary equipment.