

## MN-ACP Legislative Update in brief

April 19, 2023

Thank you to members for their advocacy efforts and to our legislative monitor Chad Fahning for this update.

State lawmakers returned to St. Paul and with five weeks remaining in the legislative session. According to the budget targets announced March, the Legislature intends to dedicate a bulk of the surplus to items related to children, families, and education, including a paid family and medical leave program, and free school breakfasts and lunches for Minnesota students. Walz also touted what he called the largest tax cuts in the state's history, referencing the \$3 billion set aside for tax cuts and credits. The tax plan is being worked on this week. Republicans in the legislature voiced concern with the outlined budget targets. Several big-ticket items relating to firearms, cannabis, and abortion could also see movement in the final weeks of session.

### MN-ACP's legislative Priorities:

1. **Improve Public Health**
2. **Improve Patient Healthcare Affordability and Health/Behavioral Health Access**
3. **Support Minnesota Physicians' Ability to Practice**
4. **Promote Primary Care**

### Improve Public Health

- **Firearm-related bills** - *Members in key districts have been asked to contact their Senator to provide education on the impact of firearms on suicide in MN.* [SF2909](#) / [HF2890](#) Firearm safety measures are included in both judiciary omnibus bills. Specifically, language to expand background checks for firearm sales/transfers and implement extreme risk protection orders, or "red flag laws," are included in both bills. The House bill includes safe storage requirements and mandated reporting of lost or stolen firearms. Firearm universal criminal background checks and Firearm extreme risk protection orders are in both the House and Senate judiciary omnibus bills. Firearm safe storage and Mandatory reporting of lost or stolen firearms are in the House Judiciary omnibus bill but did not meet the committee deadline in the Senate.
- **The health omnibus bills ([SF2995](#)/[HF2930](#))** –These bills will be heard in the respective House and Senate finance committees this week. After the committee has heard an omnibus bill, it will be sent to the floor for a vote. Assuming it passes, the bill will be sent to a conference committee to hash out the differences between the House and Senate versions before returning to chambers for a final floor vote. The bill would ultimately need to be signed by the governor to become law. Components of this bill include: **Mid-year formulary change** limits prohibiting insurers and pharmacy benefit managers from forcing a patient to change drugs during the middle of a patient's contract year (included in the Senate health and human services omnibus bill, but not in any House omnibus bills); **Communication and Optimal Resolution (CANDOR)** to improve patient safety through open and honest communication following an adverse event and protecting CANDOR discussions from lawsuit discovery; **POLST registry** establishes a work

group to study and recommend a statewide registry for Provider Orders for Life-Sustaining Treatment (POLST) is in both the House and Senate health and human services omnibus bills; **Audio-only telehealth extension** to continue coverage of audio-only telehealth until July 1, 2025, and to continue the study of audio-only telehealth services for one year (in both the House and Senate health and human services omnibus bills); **Recuperative care** extends MA coverage for recuperative care services for enrollees experiencing homelessness and is included in both the House and Senate health and human services omnibus bill. **LARC** reimbursement provides Medical Assistance (MA) coverage and reimbursement of postpartum use of long-acting reversible contraception (LARC) immediately following a delivery and is in both the House and Senate health and human services omnibus bills as well as increased MA reimbursement for **Family planning services**. **Dr. Ryan Kelly** provided testimony regarding the House Health and Human Services bill. MN-ACP provided written testimony in support of specific provisions of the Health and Human Services bills.

- **Housing grants** are included in the children and families omnibus bill intended to address homelessness as a social driver of health, including funds for emergency shelter facilities and the safe harbor shelter and housing grants with a total of \$1 billion was targeted to address homelessness.

#### **Improve Healthcare Affordability/ Behavioral Health Access**

- **“Public Option” Proposal Receives Hearings in House and Senate**- These bills ([HF 96/SF49](#)) create an option for Minnesotans to buy into MinnesotaCare with a buy-in amount based on income. The bill eliminates all cost-sharing for Medical Assistance (MA) and MinnesotaCare coverages, and providing subsidies to purchase gold-level products for those earning below 250% of the poverty level. The implementation dates vary between proposals (2026 or 2027). The bill also expands MinnesotaCare eligibility to undocumented Minnesotans and includes a study to provide direction on moving to a single payer health care system in Minnesota.

#### **Support Minnesota Physicians’ Ability to Practice**

- **Healthcare worker safety grants**: This language provides grants to healthcare entities to improve worker safety. This language is in both the House and Senate health and human services omnibus bills.
- **Abortion protections for providers and their patients**: This is also known as the “Reproductive Freedom Defense Act (RFDA).” It prevents state courts or officials from complying with extraditions, arrests or subpoenas related to out-of-state patients who receive care in Minnesota and provides protections for physicians facing an abortion-related lawsuit against them in another state. This bill has passed the Minnesota House and is moving toward final action in the Senate.

#### **Promote Primary Care**

- **Rural and primary care workforce grants**: This involves Increased funding to address the healthcare workforce shortages in underserved areas through loan forgiveness, clinical training

grants, and primary care residency training programs. It is contained in the House health and human services omnibus bill. The Senate omnibus bill did not include the entire Governor's recommendation.

- **All-Payer Claims Database (APCD)** to ensure the state is collecting the complete picture of healthcare spending by including payment data that is not included in an insurance claim. It also requires the Commissioner of Health to study the amount of healthcare spending directed at primary care services. This language is in both the House and Senate health and human services omnibus bills.

**Other:**

The bill legalizing adult-use cannabis has been trekking its way through multiple committees for months now and could still go to a floor vote before the May 22 adjournment deadline. The effort would legalize recreational use for anyone older than 21 and includes limitations on marketing for children and use at schools and behind the wheel. It also requires that revenue be dedicated to addiction treatment programs. The legislation includes a label requirement outlining the effects the drug could have on brain development up to the age of 25.

Thank you for your interest in Health Policy and advocacy. Please feel free to contact Dr. Sally Berryman, MN-ACP Health Policy Chairperson at [minnesota.acp@gmail.com](mailto:minnesota.acp@gmail.com) with any questions or concerns.