Welcome to the MN-ACP Minnesota legislative update for February and thank you for your interest and advocacy for health issues in our state.

We expect action on several bills we are monitoring this week as noted below and are making action/advocacy requests of you. Also listed below are the 2019 Legislative priorities identified by the MN-ACP Health and Public Policy Committee.

- **Tobacco 21 hearings** ([HF331](#)) will be held on February 26th and *include e-cigarettes in statewide Clean Indoor Air Act* ([HF349](#)) ACTION REQUESTED: Calls and email to all members of the House Commerce Committee asking them to VOTE YES on HF331 and HF349. The Senate committee will hear ([SF463](#)) ACTION REQUESTED: Calls and emails to all members of the Senate HHS Finance and Policy Committee asking them to VOTE YES on SF463.

- **Gun violence provisions** to be heard in the House Public Safety Committee at 7pm, Wednesday February 27th in Capitol Room 120 [HF8 (Pinto)](#) This bill deals with firearm transfer and criminal background checks required. The *Red Flag law* [HF9 (Richardson)](#) deals with Firearms; law enforcement and family members enable to petition a court to prohibit people from possessing firearms if they pose a significant danger to themselves or others by possessing a firearm. ACTION REQUESTED: Calls or emails to all members of the House Public Safety and Criminal Justice Committee asking them to VOTE YES on HF8 and HF9.

- **Legislation to align Minnesota's health records law more closely with the patient privacy protections afforded by HIPAA** cleared its first committee stop in the House on February 20. HF 831 passed out of the Health and Human Services Policy Committee with broad bipartisan support and was referred to the Judiciary and Civil Law Committee. The legislation is authored by Rep. Laurie Halvorson (DFL - Eagan). The Senate companion ([SF 1575](#)) authored by Sen. Eric Pratt (R - Prior Lake), was introduced on February 21 and has not yet been heard by a committee. The Minnesota Health Records Act (MHRA), which predates HIPAA, requires explicit,
patient consent to transfer records between a patient's health care providers.

- Governor Walz’s budget proposal includes creating "OneCare," a public option for health insurance, where a plan with a benefit set similar to MinnesotaCare could be purchased on the MNSure exchange by Minnesotans who buy health insurance on the individual market. This would be considered a Platinum plan because of the low deductibles and co-insurance. While the proposal uses funding from the Health Care Access Fund to begin operations, ongoing operations would be entirely supported by premiums. However, this would not start until 2023. He would replace the current reinsurance plan with a 20% subsidy of insurance premiums for those buying insurance through MNSure who don’t qualify for Federal tax credits. In addition, Walz supports continuing the provider tax. The tax is currently set to be repealed at the end of 2019, so legislative action to cancel the repeal would need to be passed in the House and in the Senate this session, which will be challenging.

2019 MN-ACP Legislative Priorities:

**Improve Public Health**

- Reduce gun injuries and deaths in Minnesota
- Support local and state legislative efforts to pass Tobacco-21 ordinances and to reduce access for e-cigarettes to those under 18 years of age.
- Support appropriate and effective legislative/regulatory interventions in the opioid crisis, ensuring that these do not include overzealous restrictions/burdens on clinicians and patients
- Reduce suicide deaths in Minnesota and increase access to mental health resources statewide

**Improve Patient Affordability and Health/Behavioral Health Access**

- Support continued Medicaid and MinnesotaCare coverage and oppose cuts (to benefits, eligibility, or provider payments)
- Support continued funding of Medicaid and MinnesotaCare that ensures access to health care for all those eligible for these programs
- Support solutions for affordable health insurance for those who buy health insurance in the individual market but who do not qualify for federal
subsidies. This could be a new reinsurance program or a MinnesotaCare buy-in if providers receive Medicare payment rates.

Support Minnesota Physicians’ Ability to Practice

- Support electronic exchange of health information including modifications in Minnesota data privacy law to facilitate greater utility of the MN Health Information Exchange

- Prior authorization reform to reduce the burden on providers who are trying to prescribe the clinically most appropriate medications for patients.

Please feel free to contact our MN-ACP MN Health and Public Policy co-chairs Sally Berryman, MD FACP and Mark Liebow, MD MPH FACP at Minnesota.acp@gmail.com with any questions.