

## Minnesota-ACP Health Policy and Legislative Update April 20, 2020

Action at the Capitol has slowed to a crawl, as lawmakers have closely adhered to the six-foot social distancing requirement. Legislators have been casting votes in small numbers as leadership work to keep individuals from congregating, and all committee hearings are being held via video conferencing. Thank you to members for their advocacy efforts and to our legislative monitor Eric Dick for these updates.

### MN-ACP State Legislative News in Brief

- Legislation to expand access to affordable insulin for low-income, uninsured, underinsured, and Minnesotans with high drug expenses became law after a debate stretching back to the 2019 legislative session. Under the new law, which is effective July 1, both emergency insulin and longer-term access is given to eligible individuals. The bill builds upon existing insulin manufacturer's patient assistance programs, and passed both the House and Senate by wide, bipartisan margins.
- The COVID-19 pandemic continued to dominate the discussion at the Capitol in recent weeks, as legislators search for ways to mitigate the impact of the outbreak. In recent days legislators have passed an additional relief package, including coverage for COVID-19 testing for low-income and uninsured Minnesotans. Political pressure to end the 'stay at home' order has been building at the Legislature, with House Republicans unsuccessfully seeking to end the peacetime emergency declaration.
- Members with comments on *strategies to deal with elective surgeries/procedures when the pandemic subsides*, please [email](#)

### 1. Improve Public Health

- **Growing Pressure on Gov. Walz to Ease Restrictions-** House Republicans launched two efforts to end the Gov. Walz's declaration of a peacetime emergency during a heated debate on the House floor on April 14. State statute gives the governor wide latitude to issue executive orders to quickly move state government to act, though the same law allows the Legislature to rescind the orders. Both motions failed, and the emergency declaration remains in place. In addition to the pressure from legislative Republicans, the state's Chamber of Commerce has called upon Gov. Walz to begin the process of "reopening" the state. Walz has repeatedly stated his hope to end the declaration as soon as it is safe to do so. He and the Minnesota Department of Health (MDH) have consistently stated that they will relax the executive orders, including both the 'stay at home' order and restrictions on elective surgeries and procedures when the pandemic subsides. Walz has noted that he and MDH are closely monitoring a number of factors as they consider changes to the executive actions, notably the ability to conduct much greater testing for the coronavirus and serologic testing, trends in transmission, and an effective tracing of infected individuals.

- **Additional COVID Measures passed**- The House and Senate quickly passed by a wide bipartisan margin a fourth COVID-19 relief package. The bill contains dozens of provisions intended to provide support for a range of industries, including health care, transportation, the judiciary, and others. Of note, the [bill](#) requires coverage of COVID-19-related testing for both those individuals without insurance and those covered by Medical Assistance and MinnesotaCare. The law also adds to the definition of telehealth services provided over the telephone. These services are not required to be covered and paid at the same level as they would be if it were an in-person visit. Finally, the bill allows respiratory therapists delivering care via telemedicine to be reimbursed. This provision does not alter a respiratory therapist's scope of practice or requirement to work under the direction of a licensed physician. In addition, the bill appropriates an additional \$1.2 million to Second Harvest Heartland, a nonprofit that provides food for low-income Minnesotans.

## 2. Improve Patient Affordability and Health

- **Insulin Relief Package Signed into Law**--A multi-year effort to provide relief for individuals with diabetes who struggle to afford insulin passed by a wide bipartisan margin and was signed into law by Gov. Tim Walz on April 14. The bill has long been sought by insulin advocates, an effort led by individuals with diabetes and their families. The new law is named the "Alec Smith Insulin Affordability Act" after a young man who perished after trying to ration insulin given its high expense. [The legislation](#) establishes two separate programs to make insulin available to low-income individuals and those with high drug expenses. The first program establishes an emergency insulin program for individuals facing urgent needs, while a second program makes affordable insulin available for a full year. Eligible individuals must be Minnesota residents, uninsured and/or not eligible for MinnesotaCare or Medical Assistance, and those with high drug costs. The bill caps the cost of a month of emergency insulin at \$35, while the monthly cost of the longer-term program is capped at \$50. The bill had been the source of significant debate and controversy going back to the 2019 session. An effort to pass legislation last session failed in the closing days of the session as the House and Senate disagreed upon the funding mechanism for the program. Notably, the law uses pharmacies or mail-order delivery to eligible patients. Earlier versions of the Senate bill used physician's offices as distribution points, a component that the MMA and other physician groups argued would be impractical and burdensome, as many clinics are not set up to safely store and dispense insulin.
- **Coverage for Individuals in Clinical Trials Subject of Senate Bill**--Legislation to ensure Medical Assistance and MinnesotaCare coverage of health care services " incidental to, associated with, or resulting from the use of investigational drugs, biological products, or devices" for individuals who are part of clinical trials passed the Minnesota State Senate on a unanimous 67-0 vote on April 16. The intent of the legislation is to ensure that such individuals can continue to be covered for ancillary health care services when they are participating in clinical trials. [The bill SF 3125](#), is authored by Sen. Carla Nelson (R – Rochester), while the House bill is authored by Rep. Alice Mann, MD, (DFL – Lakeville). The House bill has cleared the committee path and awaits action on

the House floor. American Cancer Society has led the effort to pass the coverage, and they've been joined by physicians' groups and many patient advocacy groups.

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