TOP MMA PRIORITIES
Where things stand midway through the session

**PRIORITY: Physician-led team-based care**
The MMA supports a collaborative practice framework among physicians and other health care providers. Advanced Practice Registered Nurses (APRNs) are pushing for more independence (for example, allowing them prescribing authority). Collaboration is crucial to ensure that patients receive the best care possible by the right practitioner. We support physician-led team-based care.

**Status:** This legislation continues to move through House and Senate committees and will be laid over for possible inclusion in an omnibus bill later in the session.

**PRIORITY: Battling prescription opioid misuse**
The MMA supports strengthening the Minnesota Prescription Monitoring Program so that alerts are sent to prescribers on patients who may be “doctor shopping.” The MMA also supports “911 Good Samaritan + Naloxone” legislation that is designed to reduce the number of opioid overdose deaths by providing immunity to those who call 911 in good faith to save a life and increasing public access to the antidote naloxone. The law would allow first responders to carry naloxone and make the drug available through community-based agencies that work with intravenous drug users.

**Status:** The naloxone portion of the bill is moving forward. However, some law enforcement officials have questioned the 911 Good Samaritan part.

**PRIORITY: Regulating e-cigarettes**
The MMA supports prohibiting the use of e-cigarettes in public indoor spaces such as workplaces and bars by expanding the Freedom to Breathe Act. The MMA is also looking at additional regulations for retailers such as requiring tobacco sellers to obtain a license to sell e-cigarettes and place the product behind their counters. Requiring ingredient disclosure on the product’s packaging is another option being considered.

**Status:** This legislation is moving through House and Senate committees. The Senate bill contains one key provision that the House bill does not—adding e-cigarettes to the state’s Freedom to Breathe indoor air quality laws. The House bill contained the same language upon introduction, but it was stripped in the face of opposition from e-cigarette retailers. The House bill does, however, include a provision that would ban the use of e-cigarettes in all state-owned buildings.

**PRIORITY: Prohibiting use of tanning beds by minors**
The MMA supports legislation to prohibit the use of indoor tanning devices by minors, require a warning notice be provided to each consumer, update posted warning signs and create a licensing fee for tanning facilities to pay for enforcement.

**Status:** This appears to be moving quite quickly and was scheduled for a House vote in March. The bill received support from the tanning industry, which has historically opposed the bill.
**PRIORITY: Restoring the newborn screening program**
The MMA is urging the Legislature to restore the state’s newborn screening program to its prior nation-leading status by removing the arbitrary retention periods for test samples and data established in 2012.

**Status:** The bill continues to move through both House and Senate committees.

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**PRIORITY: Expediting the provider tax phase-out**
In 2011, legislators voted for the phase-out and eventual repeal of the provider tax (December 31, 2019). The 2 percent tax has driven up the cost of health care and falls more heavily on sick and low-income Minnesotans. The MMA will continue to lobby to ensure the repeal and will oppose any efforts to use the Health Care Access Fund, which is funded by the tax, for any new purposes.

**Status:** The MMA has heard rumblings that some legislators might try to use these funds for other projects, but nothing concrete has progressed.

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**PRIORITY: Cost and quality data for hospitals and clinics**
The MMA supports eliminating Provider Peer Grouping (PPG) and focusing more attention on the all-payer claims database (APCD) as the tool for creating public comparisons of the cost and quality of care provided by hospitals and clinics.

**Status:** Legislation to indefinitely suspend PPG and designate new uses for the state’s APCD continues to move quickly through committees.

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**PRIORITY: Aligning clinical data sharing**
The MMA supports legislation that would bring the Minnesota Health Records Act into alignment with HIPAA, the existing federal standards governing the sharing of health information. Enhanced information sharing is crucial to the functioning of accountable care organizations, health care homes and total cost of care arrangements. Appropriately shared clinical data will increase the quality of patient care and decrease costs.

**Status:** It is not likely that this bill will get a hearing.