



2023 Legislative Session in Review

MMA comes out with big wins during fast-paced session

The MMA had a very successful session at the Capitol this year with four of its five top priorities becoming law. In addition, we passed other key items for Minnesota's physicians and patients, and defeated some proposals that would have impacted how medicine is practiced in the state.

At his swearing-in ceremony on Jan. 2, Gov. Tim Walz previewed the session saying, "Minnesotans spoke clearly this last election, and they expect all of us to get things done. The era of gridlock in St. Paul is over."

And that's pretty much what occurred. The DFL-controlled Legislature, working with a \$17 billion budget surplus, was very productive—protecting Minnesotans' reproductive rights, expanding access to affordable health coverage, enacting firearm safety measures, passing paid family and medical leave, and adopting a state budget for the next two years.

Here's a review of the session, including reports on MMA priorities as well as other healthcare-related legislation:

MMA's priority issues at the Legislature

ISSUE	RESULT
<i>Ensure patient treatment preferences are followed and respected (POLST)</i>	Passed The MMA supported legislation to develop a statewide electronic registry for Provider Orders for Life Sustaining Treatment forms.
<i>Improving patient safety through open and honest communication (CANDOR)</i>	Passed The MMA supported legislation that: (1) improves patient safety by encouraging open and honest communication with a patient and their family following an adverse event and (2) protects those communications, and any documents created for resolving an adverse event, from discovery in any lawsuits.
<i>Increase access to care through expanded telehealth coverage</i>	Passed The MMA advocated for the continued coverage of audio-only telehealth services to ensure that all individuals have access to high-quality healthcare. This coverage will continue for two more years. The MMA supports continued coverage of these services for all Minnesotans.
<i>Support recuperative care for those experiencing homelessness</i>	Passed The MMA supported expanding Medical Assistance (MA) to include coverage for recuperative care. This allows Minnesotans experiencing homelessness to receive needed short-term care in their recovery following hospitalization.
<i>Stop insurers from forcing patients to switch medications mid-year</i>	Did not pass The MMA pushed for legislation to prohibit insurers and pharmacy benefit managers (PBMs) from forcing a patient to change to a new drug in the middle of a contract year.

Other healthcare legislative issues

ISSUE

RESULT

<i>Adult-use recreational cannabis</i>	<p>Background: Beginning Aug. 1, 2023, Minnesotans aged 21 and older will be able to use recreational cannabis. The law establishes regulations for the sale and marketing of the product and establishes a new tax of 10%. Warning labels are required to inform of the risks for use before age 25 and the drug's effect on brain development. Retail sales are not expected until 2024.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Neutral</p>
<i>All Payer Claims Database (APCD) update</i>	<p>Background: This legislation updates the state's APCD to ensure the collection of non-claims-based payments such as quality payments, infrastructure investments, care coordination and other patient support services.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Center for Health Care Affordability</i>	<p>Background: What started as the Healthcare Affordability Commission, with the authority to set and enforce healthcare spending limits, became the new Center for Health Care Affordability in the Health Department, with the purpose of future healthcare planning.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Neutral</p>
<i>Conversion therapy ban</i>	<p>Background: This legislation bans the practice of trying to change a minor's sexual preference. The practice, also known as "conversion therapy," has been debunked by medical organizations as lacking scientific credibility and clinical usefulness.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Extreme risk protection orders—"red flag" laws</i>	<p>Background: Law enforcement is now authorized to temporarily remove firearms from a person who has been determined to be a harm to themselves or others by receiving an Extreme Risk Protection Order from a judge.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>

ISSUE

RESULT

<i>Family planning grants</i>	<p>Background: Renamed as Sexual and Reproductive Health Services Grants, these grants received \$1.156 million per year to increase access to sexual and reproductive health services for people who experience barriers, whether geographic, cultural, financial, or other, in access to such services.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Gender-affirming care</i>	<p>Background: This legislation makes it clear that gender-affirming care for minors is legal in Minnesota and that physicians and patients cannot be prosecuted for providing these services for a patient from a state where services have been banned or limited.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Grants to reduce violence against healthcare workers</i>	<p>Background: This legislation allocates \$4.4 million for grants to increase safety measures in healthcare settings. The funds will also establish or expand programs to train staff in healthcare settings on de-escalation and positive support services. The grants cannot exceed \$50,000 per facility.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Increased investments into early childhood services</i>	<p>Background: The Legislature approved \$1.17 billion for early childhood initiatives, such as childcare, and early education programs. This is an increase in public investments into these programs.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>LARC reimbursement</i>	<p>Background: Medical Assistance (MA) will now cover the insertion of a long-acting reversible contraceptive (LARC) immediately post-partum. Previously, a patient would have to return one to two weeks after delivery for a LARC to be covered.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>

Other healthcare legislative issues

ISSUE	RESULT
<i>Mandatory reporting of lost/stolen firearms</i>	<p>Background: This would have required all gun owners to report to law enforcement if their gun was lost or stolen. This bill passed the House but not the Senate.</p> <p>Legislative Action: Did not pass</p> <p>MMA Position: Supported</p>
<i>Opioid Prescribing Improvement Program changes</i>	<p>Background: The Department of Human Services Opioid Prescribing Improvement Program can sanction prescribers who prescribe large doses of opioids. This has resulted in patients with chronic pain being forced to taper off their prescription drugs, even if it is not in their best interest. Because the program has made it difficult for chronic pain patients to find physicians to treat them, the Legislature voted to sunset the program no later than December 31, 2024.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Oversight of mergers/acquisitions</i>	<p>Background: Legislation provides increased authority for the attorney general (AG) to review healthcare mergers and acquisitions and intervene if it is determined that the transaction will result in over-consolidation that harms patients. The MMA worked to limit the scope of the AG's authority to entities with annual revenues greater than \$80 million (it was \$10 million as introduced). For entities with revenues between \$10 million and \$80 million, there are additional data reporting requirements to the Department of Health.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Neutral</p>

ISSUE	RESULT
<i>Prior authorization</i>	<p>Background: Legislation would have required all insurers to report annually to the Departments of Commerce and Health: how often they use prior authorization (PA), how often PAs are approved, and how often they are denied. This legislation directed the department to use this data to develop recommendations to reduce the administrative burden of PA and focus its use only on areas where there is significant over-utilization.</p> <p>Legislative Action: Did not pass</p> <p>MMA Position: Supported</p>
<i>Public option</i>	<p>Background: MinnesotaCare will be expanded to allow all Minnesotans to purchase MinnesotaCare through MNSure as a "public option" to commercial insurance. The MMA worked to ensure that additional actuarial analysis is completed, and that reimbursement rates are at a level that will ensure provider access and sustainability before implementing a buy-in program in 2027.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
<i>Reproductive healthcare access</i>	<p>Background: Several bills passed to ensure access to reproductive care, which was a top priority of the DFL-controlled Legislature. One clarifies the right to reproductive services in Minnesota, another repeals outdated restrictions from law, and a third clarifies that a physician or patient cannot be prosecuted for delivering the services to a woman from a state that outlaws abortions services.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>



Other healthcare legislative issues

ISSUE

RESULT

Restrictive covenants ban	<p>Background: For all employment contracts signed on or after July 1, 2023, the use of a restrictive covenant, or a “non-compete clause,” is prohibited. This applies to all employment contracts, except those that include trade secrets. This also applies to physicians who have employment contracts but does not void contracts signed before the effective date.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
Rural clinical, workforce training and primary care residency grants	<p>Background: Funding is provided for a new rural primary care residency program, additional rural clinical training rotations, and increases in loan forgiveness for the healthcare workforce.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>
Safe storage of firearms and ammunition storage	<p>Background: This would have required firearm owners to store their guns, unloaded and in a locked safe or with a locking device. This passed the House, but not the Senate.</p> <p>Legislative Action: Did not pass</p> <p>MMA Position: Supported</p>
Universal background checks	<p>Background: This expands laws that require a criminal background check prior to the purchase of a firearm to include private sales and gun shows. These two areas were exempt from current law.</p> <p>Legislative Action: Passed</p> <p>MMA Position: Supported</p>



How does an issue become an MMA priority?

The MMA Board of Trustees determines MMA legislative priorities based on the input from our physician members through their participation in committees, task forces, forums, the Policy Council, The Pulse, member events, surveys and online discussions. MMA policies serve as the foundation for our legislative, regulatory and administrative advocacy efforts during the legislative session and throughout the year.

To get involved in MMA legislative and grassroots efforts, contact our legislative team or someone from our member relations team.

The MMA legislative team



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