

COMMON SENSE SOLUTIONS FOR BETTER AND MORE AFFORDABLE CARE FOR ALL MINNESOTANS

Almost every Minnesotan struggles with the cost of health care in a system that favors powerful prescription drug manufacturers and insurance companies over Minnesota families.

This package provides common sense ways to reduce the cost of prescription drugs, eliminate surprise billing, improve care for children, and reduce waste in Minnesota's health care system.

Reducing the Cost of Prescription Drugs

With the cost of prescription drugs continuing to rise, one in four Americans report difficulties affording their prescriptions. This package includes reforms designed to reduce the cost of prescription drugs and provide greater transparency for consumers who are too often at the whims of powerful and profitable prescription drug companies.

Prescriber Education and Independence Program

*Establishes an evidence-based prescription drug education program for physicians, pharmacists, and other health care professionals authorized to prescribe and dispense prescription drugs in Minnesota. This program will help prescribers to understand medications available to patients outside the influence of profit-driven pharmaceutical companies. **HF2692 (Liebling)/SF2946 (Franzen)***

Prescription Price Transparency

*Prescription drug companies spend millions in advertising and reap billions in profits, but the public doesn't know how much it actually costs these companies to bring medications to market. Each manufacturer of a prescription drug available in Minnesota, with a cost of \$1,000 or more annually or per course of treatment, must file an annual report with MDH outlining the costs associated with each qualifying drug, including the cost of total marketing and advertising costs. **HF2526 (Mullery)/SF2942 (Franzen)***

Increased Fraud Investigations

To further crack down on Medicaid fraud and abuse, the proposal increases funding for the Office of Inspector General (OIG), the entity charged with auditing the programs and operations of the Minnesota Department of Human Services.

*With increased funding the OIG will be able to: add 8 fraud investigators to investigate MA fraud and abuse, with each newly added investigator recovering approximately \$250,000 in fraudulent MA activity each year. **HF3061 (Loeffler)/SF3101 (Jensen)***

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Transparency in Billing

Price, cost and confusing reimbursement policies makes it difficult for consumers to understand the true cost of health care. Improving out-of-pocket cost transparency for consumers can improve health literacy, make consumers savvier purchasers, and lower health care costs over the long-term.

Prohibit Surprise Billing

*Prohibits out of network providers from billing in excess of the allowed in-network amount for services/treatments performed at an in-network hospital or facility. This would apply to all state regulated health plans. **HF2725 (Halverson)***

Price Disclosure

*Upon request, health care providers are required to provide an estimate of the consumer's out of pocket costs for services specified by the consumer. The final cost of those services could not be more than 10% above the estimated costs, except for emergency services provided during the course of treatment. **HF2768 (Atkins)***

Better Care for Kids

Investing in early, quality care for children has positive ripple effects in our health care system. With early intervention and appropriate streamlined treatment, we can improve health, avoid emergency treatments and produce long-term savings in our health care system.

Funding for additional school social workers

*Minnesota lags other states in social workers. This proposal funds additional school social workers, enabling schools to identify kids who need care before they reach the point of crisis and require emergency medical services. **HF2724 (Halverson)***

Increased funding for school-linked mental health grants

*Provides \$1.5 million annual increase for school-linked mental health grants in current biennium; \$3 million increase to the base in next biennium. School-linked mental health grants allow licensed mental health professionals to provide behavioral and mental health services to children in public schools and cover the costs of care not typically covered by a child's health insurance. **HF2731 (Davnie)/SF3294 (Wiklund)***