



March 5, 2024

Senator Matt Klein

Chair of the Committee on Commerce and Consumer Protection

Re: SF 3532 — Morrison: Prior authorization and coverage of health services requirements modification; ground for disciplinary action against physicians modification; commissioner of commerce and legislature report requirements; classifying data.

Senate Commerce and Consumer Protection Committee members,

The City of Minneapolis is dedicated to reducing the harm caused by chemical dependency and improving the health of our families, communities, and state and that starts with fighting for timely access to substance use disorder (SUD) treatment.

Over the past five years, Minneapolis has seen a significant increase in fatal opioid overdoses, from 83 in 2017 to 231 in 2002, a 178% increase. While Minneapolis, represents 7% of MN's population, it accounted for over twenty percent of MN's fatal opioid-related overdoses in 2022. In 2021, there were over 1,200 inpatient and outpatient hospital visits connected to opioids among Minneapolis residents.

The City of Minneapolis Health Department supports HF3578/SF3532 to establish new regulatory rules around the complex process of prior authorization. We have heard from our community that the process as it currently exists impacts timely access to substance use disorder treatment. This is a critical pain point because during the window of time from when someone decides to engage in treatment and when they are admitted to treatment is an especially tentative and vulnerable time for people.

We are specifically supportive of provisions of the bill that prohibit prior authorization for medication to treat a substance use disorder, outpatient mental health treatment, or outpatient substance use disorder treatment, and treatment delivered through neonatal abstinence programs operated by pediatric pain or palliative care subspecialists.

Prior authorization processes often delay patient care and SUD treatment. SUD treatment frequently involves urgent care needs due to the acute nature of addiction. Prior authorization requirements can delay or impede timely access to critical treatment, exacerbating health risks and potential overdoses.

We know that early intervention and continuous care in treating SUD is crucial. Prior authorization adds unnecessary administrative hurdles, interfering with the implementation of evidence-informed treatment protocols and best practices.

Reforms to prior authorization processes in Minnesota will streamline administrative tasks for providers, reduce delays in care, and improve patient access to timely and appropriate treatments, ultimately enhancing the overall quality of healthcare delivery. The City is happy to support the provider community in streamlining this process and thank you for authoring this important legislation.

If we can be of help or if you have questions, please don't hesitate to contact me.

Sincerely,

Heidi Ritchie

Heidi Ritchie, MAL, BSN, RN, PHN

Deputy Commissioner of Health

City of Minneapolis - Health Department