March 4, 2026

Chair Matt Klein, MD
Senate Commerce and Consumer Protection Committee
Submitted Electronically

Senator Melissa Wiklund
Chief Author, SF 1101
Submitted Electronically

Dear Chair Klein, Senator Wiklund, and Members of the Senate Commerce Committee,

On behalf of The ALS Association, I am writing to express our strong support for **SF1101 – Coverage for Augmentative and Alternative Communication (AAC) Systems and Assistive Technology (AT)**. This legislation is an important step toward ensuring that Minnesotans living with amyotrophic lateral sclerosis (ALS) have equitable access to the communication and computer-access tools they need to maintain autonomy, safety, and connection throughout the course of their disease.

Last year, **The ALS Association served 572 people in Minnesota**—each of whom faces the progressive loss of muscle function, speech, and, ultimately, the ability to interact independently with the world around them. As communication becomes more challenging, AAC and AT tools become lifelines. Currently, 307 unique Minnesotans with ALS are using some form of AAC or AT, including speech-generating devices, smart-home equipment, adaptive switches, and microphones that are on loan from the ALS Association. Many more have acquired their own devices.

While **most insurance plans cover one speech-generating AAC device every five years,** that coverage is **limited only to the primary communication device.** A typical device—such as a dedicated Tobii speech-generating system—costs approximately **$20,000** and is essential once a person loses the ability to speak.

However, **insurance does not typically cover the assistive technology that allows a person to use that device or access a computer**, such as eye-tracking accessories, environmental control units, an adaptive mouse, or other access tools. As ALS progresses, these access technologies are not optional—they are required for a person to use their covered AAC device at all. Without them, the device may sit unused.

This gap in coverage leaves families facing significant financial strain, often at a time of rapidly escalating caregiving and medical expenses. SF1101 appropriately addresses this inequity by ensuring that Minnesotans with complex communication needs—particularly those with degenerative conditions like ALS—have access to both AAC and the corresponding AT necessary for functional communication and independence.

We urge the committee to pass SF1101. By doing so, Minnesota will help ensure that people with ALS can continue to communicate with loved ones, engage with caregivers, participate in decisions about their care, and maintain dignity throughout their illness.

Thank you for your leadership and partnership in improving the lives of Minnesotans living with ALS.

Sincerely,

Clark Hansen

Managing Director of Advocacy

The ALS Association