

Dear Chair Benson, Chair Liebling, and members of the Health and Human Services Conference Committee:

The American Cancer Society Cancer Action Network (ACS CAN) is committed to reducing the pain and suffering from cancer in Minnesota and across the country. It is with these goals in mind that we provide the following comments on both the Senate and House Health and Human Services omnibus budget bills (SF2360/HF2128).

1. ACS CAN supports copay-only prescription drug benefit language included in HF2128 (Article 5, Section 7).

This language would require individual and small-market insurers to make a subset of plans available for purchase that include a pre-deductible, copay-only prescription drug benefit. The highest possible copay for these plans would be set at one-twelfth of the individual maximum out-of-pocket per plan year. For cancer patients, such a coverage option would mean an end to paying thousands of dollars in deductibles and coinsurance at the start of every plan year – helping spread their expenses through the year. Patients can face high cost-sharing requirements for their medications. Co-insurance, instead of set co-payments, can make it challenging for patients to understand how much they will have to pay for their drugs. Copayonly plans can help patients better understand how much their medications will cost and plan accordingly.

2. ACS CAN supports telehealth provisions found in both the House and Senate Bills (House Article 8, Senate Article 8).

Telehealth has long been an important care delivery method for improving access in underserved communities – particularly rural areas, areas with physician shortages, areas with limited access to primary care services, and areas with transportation barriers. Telehealth reduce gaps in access to services and care, including access to primary care and specialized providers when in-person visits are not a safe or feasible option. Telehealth can and should be used to increase patient access to care to ensure that all patients can continue to safely access appropriate telehealth services during and after the COVID-19 public health emergency. ACS CAN thanks the Senate and House for including telehealth provisions in their bills.

3. ACS CAN supports continued funding for the Statewide Health Improvement Partnership.

We would request continued funding for the Statewide Health Improvement Partnership (SHIP) at \$35 million per biennium and are concerned with the \$10 million cut proposed in the Senate bill. Chronic diseases, like cancer, cost Minnesota more than \$22 billion a year. SHIP funds programs to help reduce health care costs and prevent cancer to creating more opportunities for Minnesotans to focus on health eating, physical activity, and tobacco-free living.

4. ACS CAN would request that conferees consider including funding for the Minnesota Palliative Care Advisory Council.

Please consider including SF2400 (Housley)/HF 2517 (Reyer), which would fund the Palliative Care Advisory Council at \$88,000 for the next biennium. Palliative care is specialized medical care for people with serious illnesses that is focused on providing patients with relief from the symptoms, pain, and stress of a serious

illness. It helps both the patient and family and is appropriate at any age and any stage and has been shown to improve patient outcomes and lower healthcare costs. The Palliative Care Advisory Council was established in 2017 with strong bipartisan support. Since its creation, the Palliative Care Advisory Council has examined the state of palliative care in Minnesota, studied pediatric palliative care, and has issued several reports with recommendations to increase access to palliative care to the legislature.

Thank you for your continued leadership on issues important in the fight against cancer and for your consideration of these comments. We appreciate all the work done to put together the House and Senate positions and look forward to working with you to create a final health and human services package that will support Minnesota's fight against cancer.

Sincerely,

Emily Myatt

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