

March 21, 2023

Dear Members of the House Health Finance and Policy Committee,

On behalf of the Minnesota Chamber of Commerce and the 6,300 employers and more than 500,000 employees we represent, I am writing to provide input on HF 1771 (Bierman), requiring insurance coverage of psychiatric collaborative care model.

Employer-sponsored health insurance is an increasingly important benefit, both in terms of retention and attraction of talent and in terms of keeping employees healthy and productive at work. Three-fourths of our members who offer insurance to their employees report that they will be required to make significant changes to their benefit offerings – including dropping coverage altogether – if costs continue to rise at their current rate.

Minnesota requires coverage of roughly 60 benefits as part of fully-insured individual and group health insurance products sold in the state. By some estimates, Minnesota ranks in the top five states with the most mandates. All of these coverage mandates were passed by the Legislature to help Minnesotans access coverage for certain health care procedures or treatments. Like the proposals included in the bills under consideration by the committee today, they all help someone. But it is also true that they all come with a cost.

Seventy percent of our members who offer health insurance coverage to their employees purchase coverage in the fully-insured market. It is these small and mid-sized employers and their employees who bear the full cost of Minnesota's extensive coverage mandates.

It is often difficult, however, for legislators to weigh concerns about cost against the hoped for benefit from proposals like HF 1771. We are pleased that a process now exists for the Department of Commerce to review newly proposed health insurance requirements like this. As part of this new process, the Department has provided the Legislature with reports analyzing several bills that included proposals for new health insurance coverage and benefit requirements. And while we would note the Department's findings that nearly all of the proposals reviewed thus far would lead to some increase in premium costs for those in the fully insured market – and would urge continued caution in adding more costs to what is already an extremely expensive product – it is reassuring to see the law working and that these reports allow legislators and stakeholders to draw their own conclusions about the value of each proposal.

We are concerned, however, that no such review has been completed for HF 1771. We believe this bill should be reviewed by the Department of Commerce as part of the mandated health benefit proposal process. As was noted above, this will ensure legislators have access to reliable data and information about the cost/benefit tradeoffs associated with the proposal.

Thank you for the opportunity to provide this feedback.

Sincerely,

Bentley Graves

Director

Health Care & Transportation Policy