HF1379 - 1A - Nonopioid Directives Authorized

Chief Author: Dave Baker

Commitee: Health Finance And Policy
Date Completed: 3/18/2025 10:22:08 AM

Lead Agency: Health Dept

Other Agencies: Emergency Medical Services Office

State Fiscal Impact	Yes	No
Expenditures	х	
Fee/Departmental Earnings		Х
Tax Revenue		Х
Information Technology		Х
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)				um	Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Health Dept						
General Fund		-	10			-
State Total		_	_	_	_	
General Fund		-	10	-	-	-
	Total	-	10	-	-	-
	Biennial Total			10		-

Full Time Equivalent Positions (FTE)		Biennium		Biennium	
	FY2025	FY2026	FY2027	FY2028	FY2029
Health Dept					
General Fund	-	-	-	-	-
Т	otal -		-	-	-

Lead LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature:Shannon ZilaDate:3/18/2025 10:22:08 AMPhone:651-296-6053Email:shannon.zila@lbo.mn.gov

State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

^{*}Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2			Biennium		Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Health Dept						
General Fund		-	10	-	-	-
	Total	-	10	-	-	-
	Bier	nnial Total		10		-
1 - Expenditures, Absorbed Costs*, Tr	ansfers Out*					
Health Dept						
General Fund	,	-	10	-	-	_
	Total	-	10	-	-	-
	Bier	nnial Total		10		-
2 - Revenues, Transfers In*						
Health Dept						
General Fund		-	-	-	-	-
	Total	-	-	-	-	-
	Bier	nnial Total		-		-

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Expenditures	х	
Fee/Departmental Earnings		Х
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State Cost (Savings)			Biennium		Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
General Fund	_	-	10	-	-	-
	Total	-	10	-	-	-
	Biennial Total			10		-

Full Time Equivalent Positions (FTE)		Bienniun		nnium Bien	
	FY2025	FY2026	FY2027	FY2028	FY2029
General Fund	-	-	-	-	-
То	tal -	-	_	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature:Shannon ZilaDate:3/18/2025 10:21:51 AMPhone:651-296-6053Email:shannon.zila@lbo.mn.gov

State Cost (Savings) Calculation Details

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State Cost (Savings) = 1-2			Bienni	um	Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
General Fund		-	10	-	-	-
	Total	-	10	-	-	-
	Bier	nnial Total		10		-
1 - Expenditures, Absorbed Costs*, Trar	nsfers Out*	_		_		
General Fund		-	10	-	-	-
	Total	-	10	-	-	-
	Bier	nnial Total		10		-
2 - Revenues, Transfers In*						
General Fund		-	-	-	-	-
	Total	-	-	-	-	-
	Bier	nnial Total		-		-

Bill Description

This bill establishes the availability and use of a nonopioid directive that a patient, or a patient's advocate, may submit to their medical providers(s) and that must be maintained by the provider(s) as part of the patient's health care record. A directive must include one or more instructions that the patient must not be administered an opioid by a health professional or be offered a prescription for an opioid by a prescriber. The patient, or their advocate, may revoke the nonopioid directive by providing written notice to the provider(s), and the providers need to note the revocation in the patient's health care record.

The commissioner of health is responsible for developing a standard nonopioid directive form and must include instructions on the nonopioid directive form for how to revoke a nonopioid directive and other information the commissioner deems relevant. The commissioner must post the form on the Department of Health website.

Assumptions

The department assumes the form will be approximately one to two pages in length based on a similar directive implemented in Michigan, and it will require legal review to assure compliance with Minnesota law. The document will be publicly available as a PDF fillable form. Development of the form will be a one-time activity requiring 0.05 FTE Health Educator 3 to create the content, manage legal review, manage translation services, ensure accessibility, post forms on the department web site, and develop one-time outreach communications. MDH also assumes a one-time cost of \$1,500 for translation services. These estimates are based on program experience developing other public-facing materials.

The department will provide internal services to translate the form into three languages to support communities highly impacted by substance use disorder (Spanish, Somali, and Hmong).

The department assumes occasional, de minimus costs associated with maintaining the form. The department assumes it will conduct only minimal initial outreach to the public and health care providers about the availability of the form through already existing program activities.

Expenditure and/or Revenue Formula

Program Implementation						
Expenditure (Actual Dollars)	Amount		FY 2026	FY 2027	FY 2028	FY 2029

Full-time Equivalent (FTE) Staff		New or Maintained?	FTE	FTE	FTE	FTE
Health Educator 3	167,287	Maintained	0.05			
	FTE		0.05	0.00	0.00	0.00
	Subtotal		8,364	0	0	0
Information Technology:						
	Subtotal		0	0	0	0
Other Operating Costs:						
Translation services			1,500			
	Subtotal		1,500	0	0	0
Total Expenditures	Total		9,864	0	0	0
Fiscal Tracking (Thousands)	Dollars in		FY 2026	FY 2027	FY 2028	FY 2029
1000 - General Fund (GF)						
Health Improvement BACT 01			10	0	0	0
Program Implementation			10	0	0	0

Long-Term Fiscal Considerations

Local Fiscal Impact

References/Sources

Michigan common law 333.9145, https://www.legislature.mi.gov/Laws/MCL?objectName=mcl-333-9145

Michigan Substance Use Disorder web site (scroll down to "additional resources" for links to nonopioid directive forms), https://www.michigan.gov/opioids/find-help

Agency Contact:

Agency Fiscal Note Coordinator Signature: Brendan Wright Date: 3/18/2025 7:33:43 AM

Phone: 651-443-1415 Email: brendan.wright@state.mn.us

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Commitee: Health Finance And Policy
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Agency: Emergency Medical Services Office

State Fiscal Impact	Yes	No
Expenditures	х	
Fee/Departmental Earnings		Х
Tax Revenue		Х
Information Technology		Х
Local Fiscal Impact		X

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State Cost (Savings)		Biennium		Biennium	
Dollars in Thousands	FY2025	FY2026	FY2027	FY2028	FY2029
Tota	i -	-	-	-	-
В	Biennial Total				-

Full Time Equivalent Positions (FTE)		Biennium		Biennium	
	FY2025	FY2026	FY2027	FY2028	FY2029
Total	-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature:Steve McDanielDate:3/14/2025 3:11:11 PMPhone:651-284-6437Email:3/14/2025 3:11:11 PM

State Cost (Savings) Calculation Details

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State Cost (Savings) = 1-2		Biennium		Biennium		
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
	Total	-	-	-	-	-
	Bier	nnial Total		-		-
1 - Expenditures, Absorbed Costs*, Transf	ers Out*					
	Total	-	-	-	-	-
	Bier	nnial Total		-		-
2 - Revenues, Transfers In*						
	Total	-	-	-	-	-
	Bier	nial Total		-		-

Bill Description

This bill creates a process by which patients can declare their desire to not be administered opioids in the course of their medical treatment, with limited exceptions for emergent conditions. Additionally, the bill provides protections from criminal prosecution, civil liability, or professional disciplinary action if a covered individual withholds in good faith, opioids from a patient who has signed a directive who has signed a directive.

Assumptions

Proposed form and updates to that form to be handled primarily by the Minnesota Department of Health.

Expenditure and/or Revenue Formula

2 hours of staff time from the Deputy Director of Medical Services at \$100 per hour totaling \$200 for the purposes of preparing and issuing guidance to EMS medical directors informing them of the new program

This cost will be absorbed by the agency.

Long-Term Fiscal Considerations

None

Local Fiscal Impact

None

References/Sources

Agency Contact: Dylan Ferguson (651-201-2806)

Agency Fiscal Note Coordinator Signature: Dylan Ferguson **Date:** 3/14/2025 1:11:19 PM

Phone: 651-201-2806 Email: dylan.ferguson@state.mn.us