"GET COVERED"HOSPITAL SCREENING BILL

HOUSE FILE 4063 (Reyer) | SENATE FILE 4166 (Wiklund)

The Problem

No one chooses to go into debt to obtain necessary medical care for themselves or their children, but the consequences can be financially devastating. People with unpaid medical bills often deplete their savings and resort to credit cards or other high interest means of paying off medical debt.

MEDICAL DEBT:



Leads to Poorer Health

Medical debt deters people from seeking medical care.



Increases Financial Stress

Credit scores are impacted, which leads to long-term financial challenges.



Creates Other Challenges

People are forced to forego other necessities like food, rent, or heat.

Bill Summary

This bill requires hospitals to screen uninsured patients for eligibility for:

- Medical Assistance (M.A.)
- Emergency Medical Assistance (E.M.A.)
- MinnesotaCare

- Advanced Premium Tax Credits
- Free or discounted care (also known as "Charity Care")

Hospitals may use the Hospital Presumed Eligibility determination process or other similar screening and must assist patients with a full application or refer them to a Navigator service if they appear to be eligible for any of the above.

Our Goal

To reduce medical debt and increase payments to medical providers by ensuring that patients are:

- Informed whether they qualify for public programs or financial assistance to help cover medical bills
- Offered assistance completing a full application if they are eligible

"State data shows that half of Minnesotans without insurance probably could get help, whether federal help in paying premiums or state public programs. So we can do better."

- Jim Schowalter, Minnesota Commissioner of Management and Budget, 2018



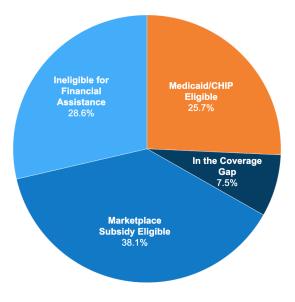
Did you know?

Some people with medical debt in collections would have qualified for assistance at the time they received medical care, but they didn't know they were eligible. Once the debt is on a credit card, sold to a collection agency, or affects their credit report, it is generally too late to qualify for assistance.

Many people struggle with medical debt:

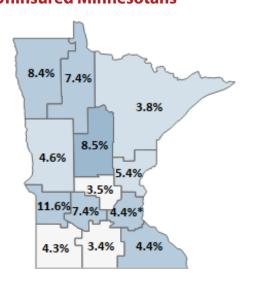
- In 2018, nearly 750,000 Minnesotans had medical bills in collections, equal to 17% of adults.²
- In 2019, over two-thirds of medical claims referred to the state for collection were for patients with household income below \$40,000.3

Distribution of the 27.4 Million Nonelderly Uninsured Population by Eligibility Status, 2020



"A Closer Look at the Remaining Uninsured Population Eligible for Medicaid and CHIP." Kaiser Family Foundation. November 8, 2021.

Geographic Distribution of Uninsured Minnesotans



"Health Insurance Coverage in Minnesota: An Update." *Minnesota Department of Health*. March 10, 2021.

Characteristics of Minnesotans without Health Insurance⁴

More likely to:

- Have lower incomes
- Be People of Color or American Indians
- Have high school education or less
- Be aged 18 to 34
- Be born outside the United States

Equally likely to be employed, but:

- More likely to have a temporary or seasonal job
- More likely to work for an employer with 100 or fewer employees



- 1. Howatt, Glenn. "Number of Minnesotans without health insurance grows by 18,000." Star Tribune. September 12, 2018.
- $2. Financial Capability Study: 2018 \ Full Data \ Tables \ by State. \ Accessed March 14, 2022, at \ https://www.usfinancialcapability.org/downloads.php$
- $3.\,Minnesota\,Department\,of\,Revenue.\,Data\,request\,by\,Minnesota\,Asset\,Building\,Coalition.\,February\,3,\,2022.$
- $4. \, Gildemeister, Stefan. \, ''Health \, Insurance \, Coverage \, in \, Minnesota: An \, Update. \, '' \, \textit{Minnesota Department of Health}. \, March \, 10, 2021.$