

SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION

S.F. No. 1946

(SENATE AUTHORS: KUPEC and Abeler)

| DATE | D-PG | OFFICIAL STATUS |
|------------|-------|---|
| 02/27/2025 | 564 | Introduction and first reading |
| | | Referred to Commerce and Consumer Protection |
| 03/09/2026 | 6551a | Comm report: To pass as amended and re-refer to Health and Human Services |

1.1 A bill for an act

1.2 relating to health insurance; requiring health plans to provide coverage for

1.3 nonopioid and nonpharmacologic pain management; proposing coding for new

1.4 law in Minnesota Statutes, chapter 62Q.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. **62Q.474] TREATMENT AND MANAGEMENT OF PAIN.**

1.7 Subdivision 1. **Requirement.** (a) A health plan must provide coverage for alternatives

1.8 to the prescription of opioids to treat and manage pain, including nonopioid prescription

1.9 drugs.

1.10 (b) A health plan must provide coverage for a minimum of two alternative prescription

1.11 drugs approved by the federal Food and Drug Administration to treat and manage pain that

1.12 are not Schedule I, II, or III controlled substances, if approved alternative prescription drugs

1.13 are available.

1.14 Subd. 2. **Prohibition.** (a) A health plan is prohibited from providing preferential coverage

1.15 for and access to opioids.

1.16 (b) A health plan is prohibited from establishing utilization controls, including but not

1.17 limited to prior authorization or step therapy requirements, for clinically appropriate

1.18 nonopioid prescription drugs approved by the federal Food and Drug Administration to

1.19 treat and manage pain that are more restrictive or extensive than the least restrictive or

1.20 extensive utilization controls applicable to any clinically appropriate opioid drug.

1.21 Subd. 3. **Educational materials.** A health plan company must annually distribute

1.22 educational materials to in-network health care providers and enrollees regarding access to

2.1 the pain treatment and management options described in subdivision 1 and must make the
2.2 educational materials and information publicly available on the health plan company's
2.3 website.

2.4 **EFFECTIVE DATE.** This section is effective January 1, 2027, and applies to health
2.5 plans offered, issued, or renewed on or after that date.