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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-SIXTH
SESSION

HOUSE FILE No. **1778**

March 16, 2009

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The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

A bill for an act

relating to human services; requiring prepaid health plans and county-based purchasing plans serving state health care program enrollees to offer contracts to health care providers subject to the MinnesotaCare tax; amending Minnesota Statutes 2008, sections 256B.69, by adding a subdivision; 256B.692, by adding a subdivision.

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

Section 1. Minnesota Statutes 2008, section 256B.69, is amended by adding a subdivision to read:

Subd. 5k. **Provider contracts.** A prepaid health plan providing covered health services for eligible persons under this chapter, chapter 256D, and chapter 256L shall, as a condition of contract with the commissioner, offer provider contracts to all health care providers subject to the MinnesotaCare taxes imposed under section 295.52, subdivisions 1, 1a, and 2, if the payment rate for covered services is at least the same rate per unit of service paid to other entities under contract for the same or similar services. A prepaid health plan may require the health care provider offered a contract under this subdivision to meet all data submittal, utilization review, and quality assurance requirements on the same basis as other entities under contract.

EFFECTIVE DATE. This section is effective January 1, 2010.

Sec. 2. Minnesota Statutes 2008, section 256B.692, is amended by adding a subdivision to read:

Subd. 11. **Provider contracts.** A county-based purchasing plan providing covered health services for eligible persons under this chapter, chapter 256D, and chapter 256L shall, as a condition of contract with the commissioner, offer provider contracts to all

2.1 health care providers subject to the MinnesotaCare taxes imposed under section 295.52,
2.2 subdivisions 1, 1a, and 2. The payment rate for covered services must be at least the same
2.3 rate per unit of service paid to other entities under contract for the same or similar services.
2.4 A county-based purchasing plan may require the health care provider offered a contract
2.5 under this subdivision to meet all data submittal, utilization review, and quality assurance
2.6 requirements on the same basis as other entities under contract.

2.7 **EFFECTIVE DATE.** This section is effective January 1, 2010.