02/05/09 REVISOR SGS/KS 09-1910

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## State of Minnesota

## **HOUSE OF REPRESENTATIVES**

A bill for an act

relating to insurance; requiring health plans to cover formulary-based wound

## EIGHTY-SIXTH SESSION

House File No. 730

February 12, 2009

1.1

1.2

Authored by Thao; Juhnke; Hayden; Murphy, E.; Abeler and others
The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

1.3	care; proposing coding for new law in Minnesota Statutes, chapter 62Q.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. [62Q.59] FORMULARY-BASED WOUND CARE.
1.6	Subdivision 1. Wound care. Effective January 1, 2010, a health plan must cover,
1.7	and reimburse at 100 percent of billed charges, formulary-based wound care provided to
1.8	a resident of a nursing facility licensed under sections 144A.02 to 144A.10, or to an
1.9	individual residing in the individual's home or a community-based setting, if:
1.10	(1) the wound care is prescribed by a physician under bundled medical codes for the
1.11	episode of care, in compliance with a wound care formulary that incorporates:
1.12	(i) health care provider training;
1.13	(ii) new wound diagnostic, treatment, and prevention technologies;
1.14	(iii) Web-based software for resident and patient measurement, monitoring, and
1.15	reporting; and
1.16	(iv) wound prevention and treatment guidelines for adaptation of formulary elements
1.17	to all types of wounds;
1.18	(2) documentation of patient compliance is provided; and
1.19	(3) documentation is provided that use of the wound formulary resulted in an
1.20	improvement of 50 percent or more above a clinical baseline for the patient, and cost
1.21	savings for care provided to the patient of at least 25 percent, relative to the projected cost
1.22	of wound care in hospital, wound clinic, and specialty clinic settings.
1.23	Subd. 2. Application. This section applies to health plans offered, sold, issued,
1.24	or renewed on or after January 1, 2010.

Section 1.