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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-FIFTH SESSION

HOUSE FILE NO. 111

January 16, 2007
Authored by Loeffler, Thissen, Atkins, Ruud, Kahn and others
The bill was read for the first time and referred to the Committee on Health and Human Services
January 25, 2007
Committee Recommendation and Adoption of Report:
To Pass
Read Second Time
February 26, 2007
By motion, re-referred to the Committee on Commerce and Labor

A bill for an act

relating to health; promoting preventive health care by requiring high deductible health plans used with a health savings account to cover preventive care with no deductible as permitted by federal law; amending Minnesota Statutes 2006, section 62Q.65.

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

Section 1. Minnesota Statutes 2006, section 62Q.65, is amended to read:

62Q.65 ACCESS TO PROVIDER DISCOUNTS AND PREVENTIVE CARE.

Subdivision 1. **Requirement.** A high deductible health plan must, when used in connection with a medical savings account or health savings account~~,~~:

(1) provide the enrollee access to any discounted provider fees for services covered by the high deductible health plan, regardless of whether the enrollee has satisfied the deductible for the high deductible health plan; and

(2) cover preventive care without a deductible, co-payment, or other patient cost-sharing to the extent permitted for high deductible health plans under federal law.

Subd. 2. **Definitions.** For purposes of this section, the following terms have the meanings given:

(1) "high deductible health plan" has the meaning given under the Internal Revenue Code of 1986, section 220(c)(2), with respect to a medical savings account; and the meaning given under Internal Revenue Code of 1986, section 223(c)(2), with respect to a health savings account;

(2) "medical savings account" has the meaning given under the Internal Revenue Code of 1986, section 220(d)(1);

2.1 (3) "discounted provider fees" means fees contained in a provider agreement entered
2.2 into by the issuer of the high deductible health plan, or an affiliate of the issuer, for use
2.3 in connection with the high deductible health plan; ~~and~~
2.4 (4) "health savings account" has the meaning given under the Internal Revenue
2.5 Code of 1986, section 223(d); and
2.6 (5) "preventive care" has the meaning given under Internal Revenue code, section
2.7 223(c)(2)(C), and federal regulations adopted related to that provision.

2.8 **EFFECTIVE DATE.** This section is effective January 1, 2008, and applies to high
2.9 deductible health plans offered, sold, issued, or renewed on or after that date.