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State of Minnesota  
HOUSE OF REPRESENTATIVES

EIGHTY-FIFTH  
SESSION

HOUSE FILE No. 2003

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

1.1 A bill for an act  
1.2 relating to health; establishing a Diagnostic Imaging Services Advisory  
1.3 Committee and a moratorium on preauthorization programs.

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

1.5 Section 1. **MORATORIUM ON NOTIFICATION PROGRAMS FOR**  
1.6 **DIAGNOSTIC IMAGING SERVICES.**

1.7 Health plan companies are prohibited from requiring prior authorization, notification,  
1.8 or consultation, including through existing programs, for diagnostic imaging services,  
1.9 including but not limited to computed tomography (CT), magnetic resonance imaging  
1.10 (MRI), positron emission tomography (PET), magnetic resonance angiography (MRA),  
1.11 and nuclear cardiology, until December 15, 2008. This section refers to health plan  
1.12 companies as defined in Minnesota Statutes, section 62Q.01.

1.13 **EFFECTIVE DATE.** This section is effective the day following final enactment.

1.14 Sec. 2. **DIAGNOSTIC IMAGING SERVICES ADVISORY COMMITTEE;**  
1.15 **ESTABLISHMENT.**

1.16 (a) The commissioner of health shall establish a Diagnostic Imaging Services  
1.17 Advisory Committee to perform the following duties:

1.18 (1) gather and analyze data using minimally intrusive efforts to understand the  
1.19 factors driving utilization of diagnostic imaging services, including computed tomography  
1.20 (CT), magnetic resonance imaging (MRI), positron emission tomography (PET),  
1.21 magnetic resonance angiography (MRA), and nuclear cardiology, in the state relative to  
1.22 evidence-based guidelines; and

2.1 (2) develop recommendations, based on the data collected, on how to improve  
2.2 the delivery of evidence-based diagnostic imaging services. In developing these  
2.3 recommendations, the advisory committee shall consider the impacts on patient care,  
2.4 premium costs, and administrative simplicity.

2.5 (b) The members of the Diagnostic Imaging Services Advisory Committee shall  
2.6 include the commissioners of health and human services or commissioners' designees  
2.7 and the following:

2.8 (1) three physicians representing speciality and geographic diversity, appointed by  
2.9 the Minnesota Medical Association;

2.10 (2) two hospital representatives, one from a metropolitan hospital and one from a  
2.11 rural hospital, appointed by the Minnesota Hospital Association;

2.12 (3) three health plan company representatives appointed by the Minnesota Council  
2.13 of Health Plans;

2.14 (4) two representatives appointed by the Institute for Clinical System Improvement;  
2.15 and

2.16 (5) one clinic manager appointed by the Minnesota Medical Group Management  
2.17 Association.

2.18 (c) The Diagnostic Imaging Services Advisory Committee shall convene no later  
2.19 than September 1, 2007. The advisory committee is governed under Minnesota Statutes,  
2.20 section 15.059, except that members shall not receive a per diem and may only be  
2.21 reimbursed for expenses.

2.22 (d) The commissioner of health shall make a report to the legislature by July 1, 2008,  
2.23 on findings and recommendations of the advisory committee.

2.24 **EFFECTIVE DATE.** This section is effective August 1, 2007.