03/16/09 REVISOR SS/DI 09-3181

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State of Minnesota

HOUSE OF REPRESENTATIVES

A bill for an act

relating to human services; requiring the commissioner of human services

to collect and report information on managed care plan and county-based

EIGHTY-SIXTH SESSION

House File No. 1988

March 23, 2009

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Authored by Murphy, E.; Bunn; Loeffler; Liebling; Ruud and others

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

| 1.4 | purchasing plan provider reimbursement rates; requiring a report; amending Minnesota Statutes 2008, section 256B.69, subdivision 9b. |
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| 1.6 | BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA: |
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| 1.7 | Section 1. Minnesota Statutes 2008, section 256B.69, subdivision 9b, is amended to |
| 1.8 | read: |
| 1.9 | Subd. 9b. Reporting provider payment rates. (a) According to guidelines |
| 1.10 | developed by the commissioner, in consultation with health care providers, managed care |
| 1.11 | plans, and county-based purchasing plans, each managed care plan and county-based |
| 1.12 | purchasing plan must annually provide to the commissioner, at the commissioner's request |
| 1.13 | detailed or aggregate information on reimbursement rates paid by the managed care plan |
| 1.14 | under this section or the county-based purchasing plan under section 256B.692 to provide |
| 1.15 | types and vendors for administrative services under contract with the plan. |
| 1.16 | (b) Each managed care plan and county-based purchasing plan must annually |
| 1.17 | provide to the commissioner, in the form and manner specified by the commissioner: |
| 1.18 | (1) aggregate provider payment data, categorized by subspecialty and primary |
| 1.19 | care; and |
| 1.20 | (2) evidence that increases in payments made to the plan under this section are |
| 1.21 | passed through to health care providers, including information on the proportion of the |
| 1.22 | increases paid to providers, categorized by subspecialty and primary care. |
| 1.23 | Data provided to the commissioner under this subdivision must allow the |
| 1.24 | commissioner to conduct the analyses required under paragraph (d). |

Section 1.

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| 03/10/02 | KE VISOK | 33/121 | 07-3101 |

| (b) (c) Data provided to the | commissioner | under this | subdivision | are nonpublic |
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| public data as defined in section 13 | 3.02. | | | |

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| (d) The commissioner shall analyze data provided under this subdivision by |
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| procedure code, provider type, provider size, and geographic location of the provider. The |
| commissioner shall also array aggregate provider reimbursement rates across all plans by |
| subspecialty and primary care category. The commissioner shall report this information to |
| the legislature annually, beginning December 15, 2010, and each December 15 thereafter. |
| The commissioner shall also make this information available on the agency's Web site to |
| managed care and county-based purchasing plans, health care providers, and the public. |

Section 1. 2