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## State of Minnesota

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## **HOUSE OF REPRESENTATIVES**

EIGHTY-SIXTH SESSION House File No. 3405

March 4, 2010

Authored by Eken, Sailer and Otremba

The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight March 15, 2010

Committee Recommendation and Adoption of Report:

To Pass

Read Second Time

1.1	A bill for an act
1.2	relating to human services; modifying the commissioner's duties related to the
1.3	state medical review team; amending Minnesota Statutes 2009 Supplement,
1.4	section 256.01, subdivision 29.
1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.6	Section 1. Minnesota Statutes 2009 Supplement, section 256.01, subdivision 29,
1.7	is amended to read:
1.8	Subd. 29. State medical review team. (a) To ensure the timely processing of
1.9	determinations of disability by the commissioner's state medical review team under
1.10	sections 256B.055, subdivision 7, paragraph (b), 256B.057, subdivision 9, paragraph
1.11	(j), and 256B.055, subdivision 12, the commissioner shall review all medical evidence
1.12	submitted by county agencies with a referral and seek additional information from
1.13	providers, applicants, and enrollees to support the determination of disability where
1.14	necessary. Disability shall be determined according to the rules of title XVI and title
1.15	XIX of the Social Security Act and pertinent rules and policies of the Social Security
1.16	Administration.
1.17	(b) Prior to a denial or withdrawal of a requested determination of disability due
1.18	to insufficient evidence, the commissioner shall (1) ensure that the missing evidence is
1.19	necessary and appropriate to a determination of disability, and (2) assist applicants and

enrollees to obtain the evidence, including, but not limited to, medical examinations

(c) The commissioner shall provide the chairs of the legislative committees with

jurisdiction over health and human services finance and budget the following information

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Section 1.

and electronic medical records.

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on the activities of the state medical review team by February 1<del>, 2010, and annually thereafter</del> of each year:

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- (1) the number of applications to the state medical review team that were denied, approved, or withdrawn;
  - (2) the average length of time from receipt of the application to a decision;
- (3) the number of appeals and, appeal results, and the length of time taken from the date the person involved requested an appeal for a written decision to be made on each appeal;
- (4) for applicants, their age, health coverage at the time of application, hospitalization history within three months of application, and whether an application for Social Security or Supplemental Security Income benefits is pending; and
- (5) specific information on the medical certification, licensure, or other credentials of the person or persons performing the medical review determinations and length of time in that position.
- (d) Any appeal made under section 256.045, subdivision 3, of a disability determination made by the state medical review team must be decided according to the timelines under section 256.0451, subdivision 22, paragraph (a). If a written decision is not issued within the timelines under section 256.0451, subdivision 22, paragraph (a), the appeal must be immediately reviewed by the chief appeals referee.

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Section 1.