## 4685.3300 PERIODIC FILINGS.

Subpart 1. [Repealed, 14 SR 901]

Subp. 1a. **Final form.** Copies of all contracts, contract forms or documents and their amendments which are required to be filed with the commissioner according to Minnesota Statutes, section 62D.08, subdivision 1, must be submitted in final typewritten form. However, minor legible handwritten changes to the typewritten form may be accepted.

Subp. 2. [Repealed, 14 SR 901]

Subp. 2a. **Insufficient information.** A filing shall be disapproved if supporting information is necessary to determine whether the filed material meets all standards in this chapter or Minnesota Statutes, chapter 62D, and supporting information does not accompany the filing, or the supporting information is not adequate.

In the disapproval letter, the commissioner shall specify the supporting information required, and the health maintenance organization may refile the additional information as an amended filing according to the provisions of subpart 7.

Subp. 3. Filing of contract. The filing of any contracts or evidences of coverage under Minnesota Statutes, section 62D.07 or 62D.08, subdivision 1, shall be accompanied by sufficient evidence on cost of services on which copayments are being imposed to allow the commissioner of health to determine the impact and reasonableness of the copayment provisions.

If a health maintenance organization imposes a copayment which is a flat fee based upon the charges for a category of similar services for Medicare, individual, or group plans according to part 4685.0801, the health maintenance organization must include the information required according to part 4685.0801, subpart 4.

Subp. 4. [Repealed, 14 SR 901]

Subp. 4a. **Form identification.** Each contract, contract form or document and their amendments, filed for approval must contain the health maintenance organization's name, address, and telephone number and must be identified by a unique form number in the lower left hand corner on the first page of the form. If applicable, the health maintenance organization shall identify the filing as either a group or individual contract or evidence of coverage.

Subp. 5. [Repealed, 14 SR 901]

Subp. 5a. **Duplicate copies.** Each contract form or document and its amendments filed with the commissioner must be submitted in duplicate with a cover letter indicating the name and telephone number of the contact person for the health maintenance organization, and the address to which the commissioner's decision shall be mailed.

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Subp. 6. **Approval or disapproval.** One copy of each contract form or document and its amendments, filed with the commissioner must be stamped approved or disapproved and returned to the health maintenance organization within 30 days after the commissioner's receipt of the filing. If disapproved, the specific reason for denial shall be stated in writing by the commissioner or authorized representative.

Subp. 7. Amended filings. A filing that has been disapproved may be amended and refiled with the commissioner without a filing fee, provided the health maintenance organization submits the amended filing to the commissioner within 30 days after the health maintenance organization receives notice of disapproval. An amended filing shall only address the issues that were the subject of the disapproval. When refiling an amended filing, the health maintenance organization shall use the same identification number that was used on the original filing.

When the health maintenance organization files an amended filing, it shall submit two copies of the amended filing. One copy must be stamped approved or disapproved and returned to the health maintenance organization within 30 days after the commissioner's receipt of the amended filing under subpart 7.

Subp. 8. Endorsements. When filing an endorsement, amendment, or rider, the health maintenance organization shall indicate the form number or numbers with which the endorsement, amendment, or rider will be used.

Subp. 9. Service area expansion. The filing of a request to expand a service area must be accompanied by sufficient supporting documentation including the following:

A. a detailed map with the proposed service area outlined;

B. provider locations charted on the map;

C. a description of driving distances, using major transportation routes, from the borders of the proposed service area to the participating providers;

D. a description of the providers' hours of operation;

E. evidence that the physicians have admitting privileges at the hospitals that enrollees in the new service area will use;

F. a list of providers in the new service area with the name, address, and specialty of every provider;

G. evidence of contractual arrangements with providers. Acceptable evidence is a copy of the signature page of the provider contract, or a sworn affidavit that states that the providers are under contract with the health maintenance organization; and

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H. any other information relating to documentation of service area, facility, and personnel availability and accessibility to allow a determination of compliance with part 4685.1010.

Subp. 10. **Marked up copies.** Any filing that amends or replaces a previously approved filing shall be accompanied by a copy of the previously approved filing with any changes, additions, or deletions noted.

Subp. 11. [Repealed, 31 SR 35]

Statutory Authority: MS s 62D.05; 62D.08; 62D.182; 62D.20

History: 14 SR 901; 16 SR 2478; 17 SR 2858; 31 SR 35

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