

SENATE  
STATE OF MINNESOTA  
NINETY-THIRD SESSION

S.F. No. 2210

(SENATE AUTHORS: WIKLUND and Mann)

| DATE       | D-PG | OFFICIAL STATUS   |
|------------|------|---|
| 02/27/2023 | 1144 | Introduction and first reading<br>Referred to Health and Human Services<br>See SF2995 |

1.1A bill for an act

1.2relating to health; changing health care capital expenditure notification and

1.3reporting; amending Minnesota Statutes 2022, section 62J.17, subdivision 5a.

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

1.5Section 1. Minnesota Statutes 2022, section 62J.17, subdivision 5a, is amended to read:

1.6Subd. 5a. **Retrospective review.** (a) The commissioner shall retrospectively review

1.7each major spending commitment and ~~notify the provider of the results of the review. The~~

1.8~~commissioner shall~~ determine whether the major spending commitment was appropriate.

1.9In making the determination, the commissioner may consider the following criteria: the

1.10major spending commitment's impact on the cost, access, and quality of health care; the

1.11clinical effectiveness and cost-effectiveness of the major spending commitment; and the

1.12alternatives available to the provider. If the major expenditure is determined to not be

1.13appropriate, the commissioner shall notify the provider.

1.14(b) The commissioner may not prevent or prohibit a major spending commitment subject

1.15to retrospective review. However, if the provider fails the retrospective review, any major

1.16spending commitments by that provider for the five-year period following the commissioner's

1.17decision are subject to prospective review under subdivision 6a.