

**SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION**

S.F. No. 1313

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DATE	D-PG	OFFICIAL STATUS
02/14/2019	401	Introduction and first reading
		Referred to Human Services Reform Finance and Policy
03/04/2019	641	Withdrawn and re-referred to Health and Human Services Finance and Policy

1.1 A bill for an act

1.2 relating to health; establishing any willing provider for mental health services;

1.3 appropriating money; proposing coding for new law in Minnesota Statutes, chapter

1.4 62K.

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

1.6 Section 1. **[62K.16] ANY WILLING PROVIDER FOR MENTAL HEALTH**

1.7 **SERVICES.**

1.8 Subdivision 1. **Legislative intent.** Given the growing suicide rate in Minnesota and the

1.9 inability of health carriers or preferred provider organizations to maintain adequate networks

1.10 for mental health services, the legislature finds it is necessary to open provider networks to

1.11 any willing mental health provider in order to respond to this crisis.

1.12 Subd. 2. **Provider network.** (a) A health carrier or preferred provider organization must

1.13 open their provider network to all licensed mental health providers who agree to accept the

1.14 terms and conditions that are offered by the health carrier, so long as the same terms and

1.15 conditions are offered to all network providers.

1.16 (b) The health carrier may require the mental health provider to meet reasonable referral

1.17 requests, utilization review, and quality assurance requirements on the same basis as other

1.18 network providers.

1.19 (c) The health carrier shall not impose a co-payment, fee, or other cost-sharing

1.20 requirement for selecting or designating a network provider or impose other conditions that

1.21 may limit an enrollee's ability to utilize any provider with the health carrier's provider

1.22 network. The health carrier may impose cost-sharing requirements, fees, conditions, or

2.1 limits upon an enrollee's selection or designation if the requirements, fees, conditions, or
 2.2 limits apply to all the providers within the health plan's network.

2.3 (d) Nothing in this section requires a provider to contract with a health carrier or accept
 2.4 a specific payment rate for services provided.

2.5 (e) Nothing in this section shall be construed to require a health carrier to provide
 2.6 coverage for a health care service or treatment that is not covered under the enrollee's health
 2.7 plan.

2.8 Subd. 3. **Expiration.** This section expires December 31, 2023.

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

2.10 Sec. 2. **APPROPRIATION; TRAINING.**

2.11 \$..... in fiscal year 2020 is appropriated to the commissioner of health to provide training
 2.12 in evidence-based therapeutic frameworks for suicide assessment and treatment of suicide
 2.13 risk to primary care providers, mental health providers, and other emergency service
 2.14 providers.