



2.1 ~~(d) A provider or its representative must not charge a fee to provide copies of records~~  
2.2 ~~requested by a patient or the patient's authorized representative if the request for copies~~  
2.3 ~~of records is for purposes of appealing a denial of Social Security disability income or~~  
2.4 ~~Social Security disability benefits under title II or title XVI of the Social Security Act. For~~  
2.5 ~~the purpose of further appeals, a patient may receive no more than two medical record~~  
2.6 ~~updates without charge, but only for medical record information previously not provided.~~  
2.7 ~~For purposes of this paragraph, a patient's authorized representative does not include units~~  
2.8 ~~of state government engaged in the adjudication of Social Security disability claims.~~

2.9 Sec. 2. Minnesota Statutes 2010, section 144.293, subdivision 2, is amended to read:

2.10 Subd. 2. **Patient consent to release of records.** A provider, or a person who  
2.11 receives health records from a provider, may not release a patient's health records to a  
2.12 person without:

2.13 (1) a signed and dated consent from the patient or the patient's legally authorized  
2.14 representative authorizing the release;

2.15 (2) specific authorization in law; or

2.16 (3) in the case of a medical emergency, a representation from a provider that holds a  
2.17 signed and dated consent from the patient authorizing the release.

2.18 Sec. 3. **[144.586] PATIENT SAFETY SURVEY.**

2.19 Hospitals licensed under section 144.55 must submit necessary information to the  
2.20 Leapfrog Group patient safety survey on an annual basis in order to publicly report patient  
2.21 safety information and track the progress of each hospital to improve quality, safety,  
2.22 and efficiency of care delivery.

2.23 Sec. 4. **TRANSFER OF HEALTH ECONOMICS PROGRAM.**

2.24 Subdivision 1. **Transfer.** The duties and activities of the health economics program  
2.25 at the Minnesota Department of Health conducted pursuant to Minnesota Statutes, chapter  
2.26 62J, are transferred to the commissioner of commerce.

2.27 Subd. 2. **Effect of transfer.** Minnesota Statutes, section 15.039, applies to the  
2.28 transfer required in subdivision 1.

2.29 Subd. 3. **Commissioner of commerce.** During the 2013 legislative session, the  
2.30 commissioner of commerce, in consultation with the revisor of statutes, shall submit to  
2.31 the legislature a bill making all statutory changes required by the reorganization under  
2.32 subdivision 1.

3.1           Subd. 4. **Effective date.** The transfer required in subdivision 1 is effective July  
3.2 1, 2012.

3.3           Sec. 5. **STUDY OF FOR-PROFIT HEALTH MAINTENANCE**  
3.4 **ORGANIZATIONS.**

3.5           The commissioner of health shall contract with an entity with expertise in health  
3.6 economics and health care delivery and quality to study the efficiency, costs, service  
3.7 quality, and enrollee satisfaction of for-profit health maintenance organizations, relative to  
3.8 not-for-profit health maintenance organizations operating in Minnesota and other states.  
3.9 The study findings must address whether the state could: (1) reduce medical assistance  
3.10 and MinnesotaCare costs and costs of providing coverage to state employees; and (2)  
3.11 maintain or improve the quality of care provided to state health care program enrollees and  
3.12 state employees if for-profit health maintenance organizations were allowed to operate in  
3.13 the state. The commissioner shall require the entity under contract to report study findings  
3.14 to the commissioner and the legislature by January 15, 2013.