SENATE
STATE OF MINNESOTA
NINETIETH SESSION

S.F. No. 3703

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DATE	D-PG	OFFICIAL STATUS
03/21/2018	6871	Introduction and first reading Referred to Health and Human Services Finance and Policy

A bill for an act

relating to health care; requiring care coordination before a child with a complex medical condition is discharged from a hospital; amending Minnesota Statutes 2016, section 144.586, by adding a subdivision.

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

Section 1. Minnesota Statutes 2016, section 144.586, is amended by adding a subdivision to read:

Subd. 3. **Care coordination.** (a) This subdivision applies to hospital discharges involving a child with a high-cost medical or chronic condition who needs post-hospital continuing aftercare, including but not limited to home health care services, post-hospital extended care services, or outpatient services for follow-up or ancillary care, or is at risk of recurrent hospitalization or emergency room services due to a medical or chronic condition.

(b) In addition to complying with the discharge planning requirements in subdivision 2, the hospital must ensure that the following conditions and arrangements are met before discharging any patient as described in paragraph (a):

(1) the patient's primary care provider and health carrier or managed care organization if the patient is enrolled in medical assistance must be notified of the patient's date of discharge and a copy of the patient's discharge plan and aftercare needs must be provided, including any necessary medical information release forms;

(2) the appropriate arrangements for home health care or post-hospital extended care services must be made and the initial services as indicated on the discharge plan must be scheduled; and

(3) if the patient is eligible for care coordination services through a health plan or health certified medical home, connections are made with the appropriate care coordinator.