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REVISOR

IVES H. F. No. 3413

State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

03/08/2018

Authored by McDonald The bill was read for the first time and referred to the Committee on Commerce and Regulatory Reform

1.1	A bill for an act
1.2 1.3 1.4 1.5	relating to health care; requiring uniform rates for primary care services provided by primary care providers located within a geographic rating area or service area; amending Minnesota Statutes 2016, section 256B.69, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 62Q.
1.6	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.7	Section 1. [62Q.679] PRIMARY CARE PAYMENT RATES.
1.8	Subdivision 1. Payment rate equalization. (a) A health plan company offering a group
1.9	health plan or individual health plan shall reimburse all in-network primary care providers
1.10	located within the same geographic rating area at the same payment rate for each primary
1.11	care service covered by the health plan. The payment rate may be different for in-network
1.12	primary care providers located in a different geographic rating area, but must be the same
1.13	for providers located within each geographic rating area.
1.14	(b) The health plan company may negotiate payment rates with each primary care
1.15	provider, but is prohibited from paying any provider a rate that is different than the highest
1.16	negotiated rate.
1.17	(c) The health plan company may require the primary care provider to meet reasonable
1.18	data, utilization review, referral criteria, and quality reassurance requirements on the same
1.19	basis as other in-network providers.
1.20	Subd. 2. Definitions. (a) For purposes of this section, the following terms have the
1.21	meanings given.
1.22	(b) "Primary care provider" means: (1) a physician licensed under chapter 147; (2) an
1.23	advanced practice registered nurse licensed under chapter 148, who specializes in the practice

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Section 1.

- 18-5476
- 2.1 <u>of family medicine, general internal medicine, obstetrics, and gynecology or general</u>
- 2.2 pediatrics; or (3) a health clinic that specializes in the areas specified in clause (2) and
- 2.3 <u>utilizes a primary care team that includes physicians, physician assistants, or advanced</u>
- 2.4 practice registered nurses.
- 2.5 (c) "Geographic rating areas" means the nine state-specific geographic rating areas
- 2.6 <u>established for purposes of insurance rate pricing within the state.</u>
- 2.7 EFFECTIVE DATE. This section is effective January 1, 2019, and applies to any health
 2.8 plan issued or renewed on or after that date.
- 2.9 Sec. 2. Minnesota Statutes 2016, section 256B.69, is amended by adding a subdivision to
 2.10 read:
- 2.11 Subd. 51. Primary care payment rates. The commissioner shall ensure that managed
- 2.12 care organizations contracting with the commissioner under this section or section 256L.12
- 2.13 comply with section 62Q.679. For purposes of this subdivision and compliance with section
- 2.14 <u>62Q.679</u>, payment rates shall be the same for primary care providers located within each
- 2.15 service area the managed care organization contracts with the commissioner to provide
- 2.16 <u>health coverage to enrollees.</u>
- 2.17 **EFFECTIVE DATE.** This section is effective January 1, 2019.