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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

H. F. No. 421

01/23/2017 Authored by Schultz and Nelson
The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to health care; seeking federal approval to offer an alternative open
1.3 enrollment period within the individual health market and MinnesotaCare.
1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. ALTERNATIVE OPEN ENROLLMENT PERIOD FOR INDIVIDUAL
1.6 HEALTH PLANS.

1.7 (a) Notwithstanding Minnesota Statutes, section 62K.15, the commissioner of commerce
1.8 shall seek federal approval to permit Minnesota residents who are covered by a qualified
1.9 health plan through MNsure or an individual health plan issued by a health carrier to enroll
1.10 in a new individual health plan or renew their current individual health plan either through
1.11 MNsure or outside MNsure 12 months after the initial individual health plan issuance date.
1.12 This enrollment process shall replace the annual open enrollment required under the
1.13 Affordable Care Act.

1.14 (b) The enrollment period described in paragraph (a) shall be limited to a specific period
1.15 of time. Special open enrollment periods as defined under the Affordable Care Act shall
1.16 continue to apply.

1.17 (c) Notwithstanding Minnesota Statutes, section 62A.02, subdivision 2, paragraph (c),
1.18 rates for health plans in the individual market to be offered outside MNsure and qualified
1.19 health plans to be offered through MNsure for coverage beginning on January 1 of each
1.20 calendar year shall be approved and made public 30 days prior to the date the approved rate
1.21 is to be applied to any individual health plan or qualified health plan issued or renewed
1.22 within that calendar year for a period of 12 months.

2.1 (d) The commissioner of human services shall seek federal approval to modify the
2.2 redetermination of eligibility requirements under Minnesota Statutes, section 256L.05,
2.3 subdivision 3a, requiring eligibility redetermination for MinnesotaCare enrollees every 12
2.4 months with the 12-month period beginning the month after the month the application was
2.5 approved.

2.6 (e) The commissioners of commerce and human services shall inform the chairs and
2.7 ranking minority members of the legislative committees with jurisdiction over commerce
2.8 and health care when federal approval has been granted or denied. If federal approval is
2.9 granted, the commissioners shall also submit draft legislation implementing the approved
2.10 changes.