01/03/17 **REVISOR** SGS/IL 17-1207 as introduced

SENATE STATE OF MINNESOTA NINETIETH SESSION

A bill for an act

relating to health; providing a premium subsidy for eligible individuals for calendar

S.F. No. 60

(SENATE AUTHORS: LOUREY, Hayden, Rest, and Wiklund)

DATE 01/09/2017

1.1

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year 2017; appropriating money.

OFFICIAL STATUS

Introduction and first reading
Referred to Commerce and Consumer Protection Finance and Policy

1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. PREMIUM SUBSIDY.
1.6	The commissioner of management and budget shall establish and administer a premium
1.7	subsidy for eligible individuals to help to pay for health insurance premiums.
1.8	Sec. 2. DEFINITIONS.
1.9	Subdivision 1. Scope. For purposes of this act, the terms in this section have the meanings
1.10	given.
1.11	Subd. 2. Eligible individual. "Eligible individual" means a Minnesota resident who is
1.12	not receiving a premium tax credit under Code of Federal Regulations and is not receiving
1.13	public program coverage under Minnesota Statutes, section 256B.055 or 256L.04.
1.14	Subd. 3. Gross premium. "Gross premium" means the amount billed for a health plan
1.15	purchased by an eligible individual prior to receiving a state premium subsidy, as defined
1.16	in subdivision 5, in a calendar year.
1.17	Subd. 4. Net premium. "Net premium" means the gross premium less the subsidy
1.18	defined in subdivision 5.
1.19	Subd. 5. Premium subsidy. "Premium subsidy":
1.20	(1) is a payment made on behalf of eligible individuals under this state program, for the
1.21	promotion of general welfare, and is not compensation for any services;

Sec. 2. 1

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(2) is equal to 25 percent of the monthly gross premium otherwise paid by or on behalf
the eligible individual that covers the eligible individual and eligible individual's spouse
d dependents; and
(3) is excluded from any calculation used to determine eligibility for any Department
Human Services program.
Subd. 6. Health carrier. "Health carrier" has the meaning given in Minnesota Statutes,
etion 62A.011, subdivision 2.
Subd. 7. Commissioner. "Commissioner" means the commissioner of management and
dget.
Subd. 8. Individual market. "Individual market" means the market for health insurance
verage offered to individuals other than in connection with a group health plan as defined
Minnesota Statutes, section 62A.011, subdivision 5.
Sec. 3. PAYMENT TO HEALTH CARRIERS ON BEHALF OF ELIGIBLE
DIVIDUALS.
Payments to health carriers are based on the premium subsidy available to eligible
dividuals in the individual market, regardless of the cost of coverage purchased. Health
rriers seeking reimbursement from the state must submit an invoice and supporting
Cormation to the commissioner in a form prescribed by the commissioner in order to be
gible for payment. Payments are made on behalf of eligible individuals effectuating
verage for calendar year 2017 and for the months in that year that the net premium amount
s been received by the health carriers for that individual. Total state payments to health
rriers are to be made within the scope of the available appropriation in section 4.
Sec. 4. AUDIT.
The Department of Commerce shall conduct audits of the health carriers' supporting
ta, as prescribed by the commissioner, to determine whether payments align with criteria
ablished in sections 2 and 3. The Department of Human Services shall provide data as
cessary to the Department of Commerce to complete the audit. All data collected for that
rpose will be held as confidential and nonpublic. The commissioner shall withhold or
arge back payments to the health carriers to the extent they do not align with the criteria

Sec. 4. 2

3.1 Sec. 5. GROSS PREMIUM EXEMPTIONS.

The gross premium is not exempt under Minnesota Statutes, section 297I.15 or 62V.05,

subdivision 2.

Sec. 6. APPROPRIATIONS.

(a) \$311,645,000 in fiscal year 2017 is appropriated to Minnesota Management and

- Budget from the health care access fund for purposes of making payments defined in section

 3.7 3. The commissioner shall prorate payments to the health carriers if necessary so as not to

 exceed the appropriation available. The appropriation is onetime and is available through

 June 30, 2018.
- 3.10 (b) \$300,000 in fiscal year 2017 is appropriated from the health care access fund to the

 3.11 Department of Commerce for purposes of section 4 and to facilitate payments to health

 3.12 carriers. The appropriation is available until expended.
- 3.13 Sec. 7. EFFECTIVE DATE.
- Sections 1 to 6 are effective the day following final enactment.

Sec. 7. 3