

4765.0030 DUTIES OF PROVIDERS THAT OFFER STATE-DESIGNATED BASKETS OF CARE.**Subpart 1. Uniform pricing.**

A. Beginning January 1, 2010, a health care provider or group of providers that has established a price for a state-designated basket of care must not vary the payment amount that the provider accepts as full payment for that basket based upon:

- (1) the identity of the payer;
- (2) a contractual relationship with a payer;
- (3) the identity of the patient; or
- (4) whether the patient has coverage through a group purchaser.

B. This subpart applies only to state-designated baskets of care provided in Minnesota to Minnesota residents or to non-Minnesota residents who obtain health insurance through a Minnesota employer.

C. This subpart does not:

- (1) apply to services paid for by Medicare, state public health care programs through fee-for-service or prepaid arrangements, workers' compensation, or no-fault automobile insurance; or
- (2) affect the right of a provider to provide charity care or care for a reduced price due to financial hardship of the patient or due to the patient being a relative or friend of the provider.

Subp. 2. **Registration and reports to commissioner.** A provider or group of providers that offers a state-designated basket of care must register with the commissioner or the commissioner's designee. The registration must include the uniform price for each basket that the provider or group of providers offers, and the name, address, telephone number, and email address of a contact person for each basket. The provider or group of providers must submit this information at least annually or whenever the uniform price changes, whichever occurs first.

Subp. 3. **Baskets of care offered.** A provider or group of providers may offer one or more baskets of care listed in part 4765.0020, subpart 4.

Subp. 4. **Quality reporting.** A provider or group of providers that offers a state-designated basket of care must submit to the commissioner or the commissioner's designee the quality measures as described in appendices A to H of the State-Designated Baskets of Care: Appendices to Minnesota Administrative Rules, Chapter 4765, in part 4765.0040, for each basket that it offers. Quality measures must be calculated only for those patients who participate in a basket. Quality measures submitted under this subpart

must not include individually identifiable health information on the individuals accessing health care services through the baskets of care. Quality measures must be submitted on the same schedule in chapter 4654, unless otherwise required by appendices A to H.

Statutory Authority: *MS s 62U.05; 62U.06*

History: *34 SR 1259*

Published Electronically: *March 26, 2010*