

HOUSE RESEARCH

Bill Summary

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Overview

This bill makes reimbursement by medical assistance for specified surgical procedures contingent on participation in a patient-centered decision-making process.

Section

- 1 Patient-centered decision making.** Adds § 62U.11. (a) By January 1, 2010, requires the commissioners of human services and finance to require active participation in a patient-centered decision-making process before reimbursement is paid, either under fee-for-service or by a health plan company under contract, for a surgical procedure for specified conditions. Requires a list of the procedures to be published in the State Register by October 1, 2010, and to be biennially reviewed, with any additions published in the State Register.

(b) Defines “patient-centered decision-making process” as a process that involves directed interaction with the patient to assist the patient in arriving at an informed, objective decision. Allows the interaction to be conducted by a health care provider or through electronic use of decision aids.
- 2 Patient-centered decision making.** Amends § 256B.76, by adding subd. 7. Beginning January 1, 2010, prohibits payment for a surgical procedure for any condition identified under § 62U.11, either on a fee-for-service basis or by a health plan under contract with the commissioner, until the patient or the patient’s parent or legal guardian has participated in a patient-centered decision-making process. States that “patient-centered decision-making process” has the meaning provided in § 62U.11.