

1.1 moves to amend H.F. No. (17-1460) as follows:

1.2 Page 3, after line 14, insert:

1.3 "Sec. 4. **DEFINITIONS.**

1.4 Subdivision 1. **Scope.** For purposes of this section and section 5, the following terms
1.5 have the meanings given, unless the context clearly indicates otherwise.

1.6 Subd. 2. **Commissioner.** "Commissioner" means the commissioner of Minnesota
1.7 Management and Budget.

1.8 Subd. 3. **Eligible individual.** "Eligible individual" means an individual who:

1.9 (1) is a resident of Minnesota;

1.10 (2) purchased qualified health coverage for calendar year 2017;

1.11 (3) meets the income eligibility requirements under section 3, subdivision 3;

1.12 (4) is not receiving a premium assistance credit under section 36B of the Internal Revenue
1.13 Code for calendar year 2017; and

1.14 (5) is approved by the commissioner as qualifying for premium assistance.

1.15 Subd. 4. **Health plan.** "Health plan" has the meaning provided in Minnesota Statutes,
1.16 section 62A.011, subdivision 3.

1.17 Subd. 5. **Health plan company.** "Health plan company" means a health carrier, as
1.18 defined in Minnesota Statutes, section 62A.011, subdivision 2, that provides qualified health
1.19 coverage in the individual market through MNsure or outside of MNsure to Minnesota
1.20 resident individuals in 2017.

1.21 Subd. 6. **Individual market.** "Individual market" means the individual market as defined
1.22 in Minnesota Statutes, section 62A.011, subdivision 5.

2.1 Subd. 7. **Internal Revenue Code.** "Internal Revenue Code" means the Internal Revenue
2.2 Code as amended through December 31, 2016.

2.3 Subd. 8. **Modified adjusted gross income.** "Modified adjusted gross income" means
2.4 the modified adjusted gross income for taxable year 2016, as defined in section 36B(d)(2)(B)
2.5 of the Internal Revenue Code.

2.6 Subd. 9. **Premium assistance.** "Premium assistance," "assistance amount," or "assistance"
2.7 means the amount allowed to an eligible individual as determined by the commissioner
2.8 under section 3 as a percentage of the qualified premium.

2.9 Subd. 10. **Program.** "Program" means the premium assistance program established
2.10 under section 1.

2.11 Subd. 11. **Qualified health coverage.** "Qualified health coverage" means health coverage
2.12 provided under a qualified health plan, as defined in Minnesota Statutes, section 62V.02,
2.13 subdivision 11, or provided under a health plan that meets the standards of a qualified health
2.14 plan except that it is not purchased through MNsure, and is:

2.15 (1) offered to individuals in the individual market;

2.16 (2) not a grandfathered health plan, as defined in section 36B of the Internal Revenue
2.17 Code; and

2.18 (3) provided by a health plan company through MNsure or outside of MNsure.

2.19 Subd. 12. **Qualified premium.** "Qualified premium" means the premium for qualified
2.20 health coverage purchased by an eligible individual.

2.21 **EFFECTIVE DATE.** This section is effective the day following final enactment.

2.22 Sec. 5. **PREMIUM ASSISTANCE AMOUNT.**

2.23 Subdivision 1. **Applications by individuals; notification of eligibility.** (a) An eligible
2.24 individual may apply to the commissioner to receive premium assistance under this section
2.25 at any time after purchase of qualified health coverage, but no later than January 31, 2018.
2.26 The commissioner shall prescribe the manner and form for applications, including requiring
2.27 any information the commissioner considers necessary or useful in determining whether an
2.28 applicant is eligible and the assistance amount allowed to the individual under this section.
2.29 The application must include a Tennessee warning as provided in Minnesota Statutes,
2.30 section 13.04, subdivision 2. The commissioner shall make application forms available on
2.31 the agency's Web site.

3.1 (b) The commissioner shall notify applicants of their eligibility status under the program,
3.2 including, for applicants determined to be eligible, their premium assistance amount.

3.3 Subd. 2. **Health plan companies.** (a) Through June 30, 2018, each health plan company
3.4 shall provide to the commissioner, by the first of each month and any other times the
3.5 commissioner requires, an effectuated coverage list with the following information for each
3.6 individual for whom it provides qualified health coverage:

3.7 (1) name, address, and age of each individual covered by the health plan, and any other
3.8 identifying information that the commissioner determines appropriate to administer the
3.9 program;

3.10 (2) the qualified premium for the coverage;

3.11 (3) whether the coverage is individual or family coverage; and

3.12 (4) whether the individual is receiving advance payment of the credit under section 36B
3.13 of the Internal Revenue Code.

3.14 (b) A health plan company must notify the commissioner of coverage terminations of
3.15 eligible individuals within ten business days.

3.16 (c) Each health plan company shall make the application forms developed by the
3.17 commissioner under subdivision 1 available on the company's Web site, and shall include
3.18 application forms with premium notices for individual health coverage.

3.19 Subd. 3. **Contracting.** The commissioner may contract with a third-party administrator
3.20 to determine eligibility for and administer premium assistance under this section.

3.21 Subd. 4. **Verification.** The commissioner shall verify that persons applying for premium
3.22 assistance are residents of Minnesota. The commissioner may access information from the
3.23 Department of Employment and Economic Development and the Minnesota Department
3.24 of Revenue when verifying residency.

3.25 Subd. 5. **Data practices.** (a) Information that a health plan company provides to the
3.26 commissioner under subdivision 2 is private data on individuals as defined in Minnesota
3.27 Statutes, section 13.02, subdivision 12.

3.28 (b) Notwithstanding the commissioner's retention schedule, the commissioner must
3.29 destroy data provided under subdivision 2 on June 30, 2018.

3.30 **EFFECTIVE DATE.** This section is effective the day following final enactment."

3.31 Renummer the sections in sequence and correct the internal references

4.1 Amend the title accordingly