Overview

This bill makes policy changes to various statutes governing Health Department operations and programs, including regulation of health occupations, administration of the Health Care Administrative Simplification Act, grants for family planning, and distribution of material and child health block grants.

Section 1 modifies a health insurance coverage provision. Sections 2 to 8 modify provisions of the Health Care Administrative Simplification Act. Sections 9 and 10 sunset the Consumer Advisory Board and make a conforming change. Sections 11 to 14 amend sections governing distribution of maternal and child health block grant funds. Section 15 restricts the entities that can receive state family planning funds. Sections 16 to 18 make changes to the regulation of speech-language pathologists and audiologists. Sections 19 to 22 amend provisions on the regulation of unlicensed mental health practitioners. Sections 23 to 33 modify sections on the regulation of alcohol and drug counselors. Sections 34 to 44 make changes to provisions regulating hearing instrument dispensers. Section 45 is the repealer.

1. **Major medical coverage.** Amends § 62E.04, subd. 4. Under current law, insurers may sell health coverage that does not meet the definition of a "qualified plan," provided that they offer the purchaser a qualified plan. This section eliminates that requirement when the unqualified plan has a lifetime benefit limit of at least $1,000,000. (Qualified plans are required to have at least a $500,000 lifetime limit.)


4. **Uniform billing form HCFA 1450.** Amends § 62J.52, subd. 1. Requires institutional and noninstitutional home health services that are not billed using an electronic billing format to be billed using the uniform billing form HCFA 1450. Adds, to the list of services to be billed using
the uniform billing form HCFA 1450, waivered services and home health services such as home health intravenous therapy providers, waivered services, personal care attendants, and hospice services (under current law, these services are billed using the uniform billing form HCFA 1500).

5 **Uniform billing form HCFA 1500.** Amends § 62J.52, subd. 2. Strikes, from the list of services billed using the uniform billing form HCFA 1500, home health intravenous therapy services, services from personal care attendants, waivered services, hospice, and other home health services (this bill would require these services to be billed using the HCFA 1450 form).

6 **State and federal health care programs.** Amends § 62J.52, subd. 5. A new paragraph (e) requires personal care attendant and waivered services billed fee-for-service to programs administered by DHS to either the HCFA 1450 form or 1500 form, as designated by DHS. Strikes language authorizing state and federal health care programs administered by DHS to use forms designated by DHS for child and teen checkup services.

7 **Standards for Minnesota uniform health care reimbursement documents.** Adds § 62J.581. Requires uniform remittance advice reports and uniform explanation of benefits documents to be provided to health care providers and health care patients when claims are adjudicated, and specifies the forms of these documents. These documents must be used for all health care services provided in Minnesota, except services not paid on an individual claims basis.

   **Subds. 1 and 2. Minnesota uniform remittance advice report, Minnesota uniform explanation of benefits document.** Requires all group purchasers and payers to provide uniform remittance advice reports to health care providers when claims are adjudicated, and requires health care patients to receive uniform explanation of benefits documents when claims are adjudicated.

   **Subd. 3. Scope.** Provides that the formats of the uniform remittance advice report and the uniform explanation of benefits document apply to all health care services provided in Minnesota, regardless of the location of the payer, except that services not paid for on an individual claims basis are not included.

   **Subd. 4. Specifications.** Establishes specifications for the uniform remittance advice report and the uniform explanation of benefits document.

   **Subd. 5. Effective date.** Requires these uniform reports and documents to be used beginning 12 months after the standards for the electronic remittance advice transaction become effective under federal HIPAA law.

8 **Minnesota health care identification card.** Amends § 62J.60, subd. 1. Exempts certain types of health insurance coverage from the requirement that all individuals with health insurance coverage be issued health insurance identification cards.

9 **Consumer advisory board.** Amends § 62J.75. Moves up the sunset date of the consumer advisory board from June 30, 2001 to June 30, 1999. (This board was established in 1997 to advise the commissioners of health and commerce and the legislature on health care consumer protection issues.)

10 **Disclosure of executive compensation.** Amends § 62J.64. Directs health plan companies to file information on health plan company executive compensation with the commissioner of commerce, rather than with the consumer advisory board which is being sunsetted.

11 **Duties.** Amends § 145.881, subd. 2. Directs the maternal and child health advisory task force to biennially review the variables used to distribute maternal and child health block grant money to community health boards and make recommendations for changes to the commissioner.

12 **Allocation to community health boards.** Adds subd. 4a to § 145.882. Establishes a new formula to be used to allocate federal maternal and child health block grant money to community
health boards, and to allocate state money appropriated to community health boards (the existing allocation formula is being repealed).

13 **Use of block grant money.** Amends § 145.882, subd. 7. Amends language specifying the purposes for which maternal and child health block grant money may be used by community health boards, allowing block grant money to be used for programs that address the frequency and severity of child and adolescent health problems. Strikes language allowing block grant money to be used for purposes other than those listed, and language requiring projects that received funding before the creation of the block grant program to continue to receive allocations at a certain level unless circumstances have changed. Gives community health boards discretion to determine whether to continue to fund the programs.

14 **Additional requirements for community boards of health.** Amends § 145.885, subd. 2. Changes a cross-reference.

15 **Family planning funds recipients restricted.** Adds § 145.9253. Prohibits the commissioner of health from allocating state funds that are appropriated for family planning services, or for which family planning services are a permitted use, to entities that are organizations or affiliates of organizations that provide, promote, or directly refer for abortions. Specifies that nondirective pregnancy counseling does not disqualify an entity from receiving these funds.

16 **Speech-language pathologists and audiologists.** Amends § 148.511. Makes registration mandatory for all people who engage in the practice of speech-language pathology or audiology and who meet the requirements for registration. Changes a cross-reference.

17 **Supervised clinical training required.** Amends § 148.515. Modifies the supervised clinical training requirements for speech-language pathologists and audiologists by making changes to the hour requirements for training in various subjects and adding subjects to the training requirements.

18 **Temporary registration.** Adds subd. 4 to § 148.517. Establishes a temporary registration for speech-language pathologists and audiologists, and requirements for temporary registration. Makes temporary registrations valid for 90 days, and allows them to be renewed once for good cause.

19 **Unlicensed mental health practitioner or practitioner.** Amends § 148B.60, subd. 3. Amends the definition of unlicensed mental health practitioner to exclude American Indian medicine men and women, licensed attorneys, probation officers, school counselors employed by a school district, registered occupational therapists, and occupational therapy assistants from the definition.

20 **Prohibited conduct.** Amends § 148B.68, subd. 1. Adds bartering for services with a client to the list of conduct that is prohibited for unlicensed mental health practitioners.

21 **Release to obtain nonpublic data.** Adds subd. 7 to § 148B.69. Requires unlicensed mental health practitioners who are being investigated by the office of mental health practice to authorize the commissioner to obtain criminal conviction data and information about violations of statutes and rules from state and federal agencies and departments. After obtaining the authorization, requires state and federal agencies and departments that have data on the individual being investigated to give the commissioner access to the requested data.

22 **Scope.** Amends § 148B.71, subd. 1. Specifies that unlicensed mental health practitioners who provide services in a program licensed by the commissioner of health or the commissioner of human services need not provide the mental health client bill of rights to clients (current law only exempts unlicensed mental health practitioners practicing in government facilities).

23 **Alcohol and drug counselor.** Amends § 148C.01, subd. 2. Expands the protected titles for licensed alcohol and drug counselors, to include "any initials" that indicate the title alcohol and
drug counselor.

24 **Accredited school or educational program.** Amends § 148C.01, subd. 7. Modifies the definition of "accredited school or educational program" that an applicant for licensure as an alcohol and drug counselor must have completed to be eligible for licensure.

25 **Core functions.** Amends § 148C.01, subd. 9. Modifies the definition of "assessment" in the core functions in which an alcohol and drug counselor engages.

26 **Practice of alcohol and drug counseling.** Amends § 148C.01, subd. 10. Adds "gaining cultural competence through ongoing training and education" to the definition of the practice of alcohol and drug counseling.

27 **Psychometrically valid and reliable.** Adds subd. 18 to § 148C.01. Defines "psychometrically valid and reliable" for the chapter on alcohol and drug counselor licensure.

28 **General.** Amends § 148C.03, subd. 1. In a subdivision establishing duties of the commissioner related to licensure of alcohol and drug counselors, allows the commissioner to contract with an entity designated by the commissioner for the administration of a licensing examination, and strikes language requiring the examination to be approved by the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse. Requires the examinations to be psychometrically valid and reliable, and requires the oral examinations to be based on a written case presentation.

29 **Temporary practice requirements.** Adds subd. 6 to § 148C.04. Allows individuals to temporarily practice alcohol and drug counseling before being licensed, and specifies the requirements that must be met to allow temporary practice. Allows a person's temporary practice status to be extended, and prohibits a person practicing under temporary practice from holding oneself out as licensed. Limits the settings in which a person licensed under this subdivision may practice, and establishes additional requirements.

30 **Effect and suspension of temporary practice.** Adds subd. 7 to § 148C.04. Specifies that allowing a person to engage in temporary practice under subdivision 6 does not create a right of approval for licensure as a drug and alcohol counselor. Allows the commissioner to suspend or restrict a person's temporary practice status.

31 **Qualifications.** Amends § 148C.06, subd. 1. Amends the qualifications for licensure as a drug and alcohol counselor during a transitional period, to allow an applicant for licensure to be licensed if the applicant:

- graduates from an accredited education program in alcohol and drug counselor studies and passes written and oral examinations; or
- has 2,080 hours of supervised alcohol and drug counselor experience, 270 hours of training, and 300 hours of alcohol and drug counselor internship, and completes specified examination requirements.

Also strikes language allowing applicants to be licensed if they meet special licensing criteria.

32 **Grounds.** Amends § 148C.09, subd. 1. Modifies grounds for disciplinary action for alcohol and drug counselors to establish a two-year lookback period for disciplinary actions related to past or present overuse of alcohol and improper drug use.

33 **Background investigation.** Amends § 148C.09, subd. 1a. Allows the commissioner of health to contract with the commissioner of human services to obtain criminal history data on applicants for licensure as drug and alcohol counselors, when performing background checks on applicants as part of the licensure process.

34 **Supervision.** Amends § 153A.13, subd. 9. Modifies the definition of supervision for the chapter certifying hearing instrument dispensers, to qualify that supervision need not be on-site
observation of activities.

35 **Direct supervision or directly supervised.** Adds subd. 10 to § 153A.13. Defines "direct supervision or directly supervised" for the chapter certifying hearing instrument dispensers.

36 **Indirect supervision or indirectly supervised.** Adds subd. 11 to § 153A.13. Defines "indirect supervision or indirectly supervised" for the chapter certifying hearing instrument dispensers.

37 **Application for certificate.** Amends § 153A.14, subd. 1. Requires applicants for certification as hearing instrument dispensers to be 21 years old, rather than 18 as in current law.

38 **Exemption from written examination requirement.** Amends § 153A.14, subd. 2a. Exempts people who have satisfied the requirements for registration as an audiologist from the written examination requirements for hearing instrument dispenser certification (current law exempts people who have completed the audiologist registration requirements from all hearing instrument dispenser examination requirements). This has the effect of requiring people qualified to be registered audiologists to complete the practical examination for hearing instrument dispensing.

39 **Certification by examination.** Amends § 153A.14, subd. 2h. Prohibits applicants for certification as a hearing instrument dispenser from taking any part of the certification examination more than three times per two-year period.

40 **Dispensing of hearing instruments without certificate.** Amends § 153A.14, subd. 4. Specifies that a person who has applied for certification as a hearing instrument dispenser, has dispensed hearing instruments in another jurisdiction, and follows the required procedures for certification by reciprocity is not dispensing hearing instruments without a certificate and is not engaging in gross misdemeanor activity.

41 **Trainees.** Amends § 153A.14, subd. 4a. Prohibits a certified hearing instrument dispenser from directly supervising more than one trainee at a time. Requires trainees to be directly supervised until they have passed the required practical examination. After passing the practical examination, allows trainees to dispense under indirect supervision. Strikes language that requires a specific number of hours of on-site observation by the trainee's supervisor.

42 **Reciprocity.** Adds subd. 4c to § 153A.14. Allows a person who has applied for certification as a hearing instrument dispenser and has dispensed hearing instruments in another jurisdiction to dispense as a trainee under indirect supervision if the person meets the requirements for practicing as a trainee, swears to not be the subject of any current or past disciplinary actions, swears to not be disqualified from certification, and provides a copy of a current credential from another jurisdiction. If the person fails to pass the practical examination when it is next offered, requires the person to stop dispensing under this subdivision.

43 **Expiration of trainee period.** Adds subd. 4d to § 153A.14. Makes the trainee period automatically expire two months after the trainee passes the required written and practical examinations.

44 **Prohibited acts.** Amends § 153A.15, subd. 1. Prohibits hearing instrument dispensers from dispensing a hearing instrument to a person age 18 or younger unless an audiologist evaluates the person's hearing and need for a hearing aid. Renumber the remaining clauses listing prohibited acts.

45 **Repealer.** Repeals the following: 145.882, subdivisions 3 and 4 (allocations of the maternal and child health block grants, and the distribution formula); and 148C.04, subd. 5 (additional requirements for licensure for alcohol and drug counselors).