This bill allows the commissioner of human services to delay the implementation of county-based purchasing until federal waiver authority and approval has been granted. The bill requires counties to submit a final proposal within 60 days of receiving notice that this authority and approval has been granted, and to begin enrollment within six months of this submittal. The bill also requires the commissioner to make certain data available to county boards, to adopt rules that are specific to county administrative, accounting, and reporting systems, and to present reports to the legislature.

Section
1 **County authority.** Amends § 256B.69, subd. 3a. Allows the commissioner of human services to grant a delay in the implementation of county-based purchasing until federal waiver authority and approval has been granted. (Current law allows a 9-month delay until October 1, 1999.)

2 **Provision of data to county boards.** Amends § 256B.69, by adding subd.3b. Requires the commissioner to make available to all county boards, on an ongoing basis, information and data necessary for county boards to make recommendations to the commissioner related to the prepaid medical assistance program and to effectively administer county-based purchasing. States that this information includes, but is not limited to, county-specific, individual-level fee-for-service and prepaid health plan claims.

3 **Duties of the commissioner of health.** Amends § 256B.692, subd. 2. Specifies that the county board is the governing body of a county-based purchasing program, and the joint powers board the governing body in a multicounty arrangement. Clarifies that counties must satisfy the commissioner of health that they will meet the consumer protection and fiscal solvency requirements applicable to HMOs or community integrated service networks. Requires the commissioner to adopt administrative and financial reporting requirements for county-based purchasing related to specified sections of statute that are specific to county administrative, accounting, and reporting systems. Requires the state auditor to audit a county-based purchasing program as part of the annual audit of county records.
**County proposals.** Amends § 256B.692, subd. 5. Requires county boards to submit final proposals for county-based purchasing within 60 days of receiving notice that federal waiver approval and authority has been granted. The final proposal must begin enrollment no later than six months after the submittal date.

**Report on rate setting and risk adjustment.** Requires the commissioner of human services to report to the legislature by January 15, 2000, on the rate setting process for state prepaid programs, rate setting and risk adjustment methods in other states, and the results of the application of risk adjustment on a trial basis in Minnesota. Specifies other requirements for the report.

**Report on the prepaid medical assistance program.** Requires the commissioner of human services to present recommendations to the legislature by December 15, 1999, on specified issues related to counties and state health care programs.