

HOUSE RESEARCH

Bill Summary

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Authors: Liebling and others

Subject: County-based Purchasing and Managed Care Plans

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Overview

This bill requires the commissioner of human services to assign prepaid MA enrollees who do not choose a managed care plan to a county-based purchasing plan, and requires the commissioner to approve a single-plan county-based purchasing proposal. The bill also requires competitive reprocurement every five years.

Section

- 1** **Limitation of choice.** Amends § 256B.69, subd. 4. Requires the commissioner of human services to assign prepaid medical assistance program enrollees who do not choose a specific managed care plan to the county-based purchasing plan in Olmstead, Winona, Houston, Fillmore, and Mower counties. States that the section is effective upon federal approval.
- 2** **Sole-source or single-plan managed care contract.** Amends Laws 2005, First Special Session chapter 4, article 8, section 84, as further amended. The amendment to paragraph (a) requires the commissioner to continue single plan county-based purchasing until December 31, 2011 . The amendment to paragraph (b) requires the commissioner of human services to approve a county-based purchasing health plan proposal submitted on behalf of Winona, Houston, Fillmore, and Mower counties for MA, MinnesotaCare, GAMC, and other state prepaid health care programs, if implementation does not limit an enrollee's choice of provider or access to services, and if all other requirements related to health plan purchasing are met.

A new paragraph (c) requires the commissioner to reopen all counties for competitive

Section

reprocurement every five years, beginning in 2011.

The amendment to paragraph (d) strikes an outdated reporting requirement.