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REVISOR

State of Minnesota

HOUSE OF REPRESENTATIVES н. г. №. 4205 NINETIETH SESSION

03/22/2018

Authored by Schomacker The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1	A bill for an act
1.2 1.3	relating to human services; applying the dental services withhold to the medical assistance fee-for-service program; proposing coding for new law in Minnesota
1.4	Statutes, chapter 256B.
1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.6	Section 1. [256B.7611] MEDICAL ASSISTANCE FEE-FOR-SERVICE DENTAL
1.7	WITHHOLD.
1.8	Subdivision 1. Return of withhold based on performance. The commissioner of
1.9	management and budget shall withhold from the medical assistance funding made available
1.10	to the commissioner of human services for each calendar year an amount equal to ten percent
1.11	of medical assistance fee-for-service expenditures on dental services for the fiscal year
1.12	ending the previous June 30. This amount, or a portion as calculated under this section,
1.13	shall be returned no sooner than July 1 and no later than July 31 of the subsequent fiscal
1.14	year, only if, in the judgment of the commissioner, the performance targets in subdivisions
1.15	3 and 4 are achieved.
1.16	Subd. 2. Withhold return scoring. (a) The withheld funds shall be returned to the
1.17	commissioner for performance during calendar year 2019 based on the following point
1.18	assignment:
1.19	(1) service utilization:
1.20	(i) age stratification one through 20 years, 65 points; or
1.21	(ii) age stratification 21 through 64 years, 35 points; and
1.22	(2) provider network service mix, restorative versus preventive, zero points.

Section 1.

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2.1	(b) The percentage of withheld funds to be returned shall be calculated by summing all
2.2	earned points, dividing the sum by 100, and converting to a percentage. This percentage is
2.3	referred to as the withhold score.
2.4	Subd. 3. Performance target; service utilization. (a) The commissioner must
2.5	demonstrate an annual increase in its rate of providing at least one annual dental visit. The
2.6	age stratification one through 20 years and the age stratification 21 through 64 years must
2.7	be equal to or greater than an absolute ten percent increase over the baseline of calendar
2.8	year 2017. For calendar year 2019, if the measurement rate is equal to or greater than the
2.9	absolute ten percent first annual growth target rate, all assigned points shall be awarded.
2.10	Partial points will be awarded if at least a five percent or greater improvement is achieved
2.11	on a sliding scale.
2.12	(b) Points shall be based on the commissioner demonstrating an annual increase in visits
2.13	according to this schedule:
2.14	(1) first annual growth target is ten percent;
2.15	(2) second annual growth target is five percent; and
2.16	(3) third annual growth target is three percent.
2.17	(c) If the ten percent increase is not achieved in the first year, then the deficit will be
2.18	added to the second year goal.
2.19	Subd. 4. Performance target; provider network service mix. The commissioner of
2.20	human services shall work with dental providers that serve enrollees with both preventative
2.21	and restorative dental services. For calendar year 2019, no points shall be awarded. The
2.22	commissioner of human services shall develop a measure specification for this performance
2.23	target to be used for calendar year 2020.
2.24	Subd. 5. Implementation methodology. The commissioner of management and budget
2.25	shall implement this section using the procedures specified in and developed under the
2.26	Department of Human Services model contract for prepaid medical assistance and
2.27	MinnesotaCare, January 1, 2018. The performance targets under this section for calendar
2.28	year 2020 and subsequent calendar years shall be those established for the dental withhold
2.29	in the prepaid medical assistance and MinnesotaCare contract for the respective calendar
2.30	year.
2.31	EFFECTIVE DATE. This section is effective January 1, 2019.

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