NINETY-SECOND SESSION

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State of Minnesota

HOUSE OF REPRESENTATIVES

н. г. №. 447

01/28/2021 Authored by Acomb, Edelson, Youakim, Bernardy and Klevorn
The bill was read for the first time and referred to the Committee on Commerce Finance and Policy
03/01/2021 Adoption of Report: Re-referred to the Committee on Health Finance and Policy
03/10/2021 Adoption of Report: Re-referred to the Committee on State Government Finance and Elections
03/22/2021 Adoption of Report: Amended and re-referred to the Committee on Health Finance and Policy

 adding a subdivision. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA: Section 1. Minnesota Statutes 2020, section 62A.30, is amended by adding a subdivision to read: Subd. 5. Mammogram; diagnostic services and testing. (a) If a health care provider 	1.2 1.3	relating to health insurance; requiring no-cost diagnostic services and testing following a mammogram; amending Minnesota Statutes 2020, section 62A.30, by
Section 1. Minnesota Statutes 2020, section 62A.30, is amended by adding a subdivision to read: Subd. 5. Mammogram; diagnostic services and testing. (a) If a health care provider determines an enrollee requires additional diagnostic services or testing after a mammogram a health plan must provide coverage for the additional diagnostic services or testing with no cost sharing, including co-pay, deductible, or coinsurance. (b) This subdivision does not apply to Medical Assistance under chapter 256B and		
to read: Subd. 5. Mammogram; diagnostic services and testing. (a) If a health care provider determines an enrollee requires additional diagnostic services or testing after a mammogram a health plan must provide coverage for the additional diagnostic services or testing with no cost sharing, including co-pay, deductible, or coinsurance. (b) This subdivision does not apply to Medical Assistance under chapter 256B and	1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
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determines an enrollee requires additional diagnostic services or testing after a mammogram a health plan must provide coverage for the additional diagnostic services or testing with no cost sharing, including co-pay, deductible, or coinsurance. (b) This subdivision does not apply to Medical Assistance under chapter 256B and	1.7	to read:
 a health plan must provide coverage for the additional diagnostic services or testing with no cost sharing, including co-pay, deductible, or coinsurance. (b) This subdivision does not apply to Medical Assistance under chapter 256B and 	1.8	Subd. 5. Mammogram; diagnostic services and testing. (a) If a health care provider
no cost sharing, including co-pay, deductible, or coinsurance. (b) This subdivision does not apply to Medical Assistance under chapter 256B and	1.9	determines an enrollee requires additional diagnostic services or testing after a mammogram,
(b) This subdivision does not apply to Medical Assistance under chapter 256B and	1.10	a health plan must provide coverage for the additional diagnostic services or testing with
<u>. </u>	1.11	no cost sharing, including co-pay, deductible, or coinsurance.
1.13 <u>MinnesotaCare under chapter 256L.</u>	1.12	(b) This subdivision does not apply to Medical Assistance under chapter 256B and
	1.13	MinnesotaCare under chapter 256L.

EFFECTIVE DATE. This section is effective January 1, 2022, and applies to health

A bill for an act

Section 1.

plans offered, issued, or sold on or after that date.