

SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION

S.F. No. 2627

(SENATE AUTHORS: NEWTON)

DATE
03/21/2019

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OFFICIAL STATUS

Introduction and first reading
 Referred to Commerce and Consumer Protection Finance and Policy

- 1.1 A bill for an act
- 1.2 relating to health insurance; requiring providers to charge enrollees the negotiated
- 1.3 provider payment plus 20 percent for denied services; proposing coding for new
- 1.4 law in Minnesota Statutes, chapter 62Q.
- 1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
- 1.6 Section 1. **[62Q.495] PAYMENT FOR DENIED COVERED SERVICES.**
- 1.7 (a) If a health plan company denies coverage for a health care service that is a covered
- 1.8 benefit under an enrollee's health plan for procedural reasons, including but not limited to
- 1.9 failure to receive prior authorization, the provider may not charge the enrollee for the denied
- 1.10 service more than the negotiated provider payment amount plus 20 percent.
- 1.11 (b) Any amount paid by the enrollee to a provider in accordance with paragraph (a) shall
- 1.12 be counted toward any applicable deductible amount for which the enrollee is responsible
- 1.13 under the enrollee's health plan.
- 1.14 (c) Nothing in this section requires a health plan company to pay for services provided
- 1.15 by an out-of-network provider unless required under the terms of the enrollee's health plan,
- 1.16 or to provide coverage for services not covered under the enrollee's health plan.
- 1.17 (d) For purposes of this section, "negotiated provider payment" means the payment the
- 1.18 provider agrees to accept under the provider contract entered into by the provider and the
- 1.19 health plan company for health care services provided by the provider to an enrollee covered
- 1.20 by the health plan.