01/22/18 REVISOR SGS/CH 18-5448 as introduced

SENATE STATE OF MINNESOTA NINETIETH SESSION

S.F. No. 2877

(SENATE AUTHORS: HAYDEN and Lourey)

DATE 03/01/2018

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D-PG
Introduction and first

OFFICIAL STATUS

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

A bill for an act

relating to health care coverage; extending the premium subsidy program through

1.3 1.4 1.5 1.6 1.7	2018; terminating the Minnesota premium security plan; appropriating money; amending Laws 2017, chapter 2, article 1, sections 2; 5, as amended; 7, as amended; repealing Minnesota Statutes 2017 Supplement, sections 62E.21; 62E.22; 62E.23; 62E.24; 62E.25; Laws 2017, chapter 13, article 1, sections 1; 7; 8; 9; 10; 11; 12; 13; 14; 15; Laws 2017, First Special Session chapter 6, article 5, section 10.
1.8	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.9	Section 1. Laws 2017, chapter 2, article 1, section 2, as amended by Laws 2017, chapter
1.10	13, article 2, sections 3 and 4; and Laws 2017, First Special Session chapter 6, article 18,
1.11	section 13, is amended to read:
1.12	Sec. 2. PAYMENT TO HEALTH CARRIERS ON BEHALF OF ELIGIBLE
1.13	INDIVIDUALS.
1.14	Subdivision 1. Program established. The commissioner of Minnesota Management
1.15	and Budget, in consultation with the commissioner of commerce and the commissioner of
1.16	human services, shall establish and administer the premium subsidy program authorized by
1.17	this act, to help eligible individuals pay for coverage in the individual market in 2017 and
1.18	<u>2018</u> .
1.19	Subd. 2. Premium subsidy provided. As soon as practicable, but no later than April
1.20	30, 2017 of each calendar year, health carriers shall begin paying a premium subsidy to
1.21	each eligible individual who purchases a health plan in the individual market, for all the
1.22	months for which the net premium is paid. An eligible individual shall pay the net premium

Section 1.

amount to the health carrier.

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Subd. 3. **Payments to health carriers.** (a) The commissioner shall make payments to health carriers on behalf of eligible individuals effectuating coverage for calendar year 2017 or 2018, for the months in that year for which the individual has paid the net premium amount to the health carrier. Payments to health carriers shall be based on the premium subsidy available to eligible individuals in the individual market, regardless of the cost of coverage purchased. The commissioner shall not withhold payments because a health carrier cannot prove an enrollee is an eligible individual.

- (b) Health carriers seeking reimbursement from the commissioner must submit an invoice and supporting information to the commissioner, using a form developed by the commissioner, in order to be eligible for payment. The commissioner shall finalize the form by March 1, 2017.
- (c) Total state payments to health carriers must be made within the limits of the available appropriation. The commissioner shall reimburse health carriers at the full requested amount up to the level of the appropriation. The commissioner, by July 15, 2017 of each calendar year, shall determine whether the available appropriation will be sufficient to provide premium subsidies equal to 25 percent of the gross premium for the period September 1, 2017, through December 31, 2017 of that calendar year. If the commissioner determines that the available appropriation is not sufficient, the commissioner shall reduce the premium subsidy percentage, beginning September 1, 2017, of that calendar year through the remainder of the calendar year, by an amount sufficient to ensure that the total amount of premium subsidies provided for the calendar year does not exceed the available appropriation. The commissioner shall notify health carriers of any reduced premium subsidy percentage within five days of making a determination. Health carriers shall provide enrollees with at least 30 days' notice of any reduction in the premium subsidy percentage.
- (d) The commissioner shall consider health carriers as vendors under Minnesota Statutes, section 16A.124, subdivision 3, and each monthly invoice shall represent the completed delivery of the service.
- (e) The commissioner, with the November 2017 forecast, shall certify the extent to which appropriations exceed forecast obligations under this subdivision. Notwithstanding Laws 2017, chapter 2, article 1, section 7, the estimated value of available funds, up to \$98,779,000, shall be canceled to the general fund. The cancellation in this paragraph shall be reduced by any difference in medical assistance expenditures estimated in the trend calculation under section 15.

Section 1. 2

Subd. 4. **Data practices.** (a) The definitions in Minnesota Statutes, section 13.02, apply to this subdivision.

- (b) Government data on an enrollee or health carrier under this section are private data on individuals or nonpublic data, except that the total reimbursement requested by a health carrier and the total state payment to the health carrier are public data.
- (c) Notwithstanding Minnesota Statutes, section 138.17, not public government data on an enrollee or health carrier <u>for a calendar year</u> under this section must be destroyed by June 30, 2018 of the subsequent calendar year, or upon completion by the legislative auditor of the audits required by section 3, whichever is later. This paragraph does not apply to data maintained by the legislative auditor.
- Subd. 5. **Data sharing.** (a) Notwithstanding any law to the contrary, government entities are permitted to share or disseminate data as follows:
- (1) the commissioner of human services and the board of directors of MNsure must share data on public program enrollment under Minnesota Statutes, sections 256B.055 and 256L.04, as well as data on an enrollee's receipt of a premium tax credit under Code of Federal Regulations, title 26, section 1.36B-2, with the commissioner of management and budget; and
- (2) the commissioner of management and budget must disseminate data on an enrollee's public program coverage enrollment under Minnesota Statutes, sections 256B.055 and 256L.04, to health carriers to the extent the commissioner determines is necessary for determining the enrollee's eligibility for the premium subsidy program authorized by this act.
- (b) Data shared under this subdivision may be collected, stored, or used only for the purposes of administration of the premium subsidy program authorized by this act and may not be further shared or disseminated except as otherwise provided by law.
- 3.26 (c) By June 30, 2018, A health carrier must destroy any data <u>for a calendar year</u> it received pursuant to this subdivision by June 30 of the subsequent calendar year.
- 3.28 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- Sec. 2. Laws 2017, chapter 2, article 1, section 5, as amended by Laws 2017, First Special Session chapter 6, article 5, section 8, is amended to read:
- 3.31 Sec. 5. **SUNSET.**

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Sec. 2. 3

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4.1	This article,	, other than section	on 2, subdivision 5	5; section 3; and section	7, sunsets August	
4.2	31, 2018 <u>2019</u> .					
4.3	EFFECTIVE DATE. This section is effective the day following final enactment.					
4.4	Sec. 3. Laws 2017, chapter 2, article 1, section 7, as amended by Laws 2017, First Special					
4.5	Session chapter 6, article 5, section 9, is amended to read:					
4.6	Sec. 7. APPROPRIATIONS.					
4.7	(a) \$311,78	8,000 in fiscal y	ear 2017 is approp	oriated from the genera	l fund to the	
4.8	commissioner	of management a	and budget for pre	emium assistance under	section 2. This	

- appropriation is onetime and is available through August 31, 2018 2019.
- (b) \$157,000 in fiscal year 2017 is appropriated from the general fund to the legislative 4.10 auditor for purposes of section 3. This appropriation is onetime. 4.11

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- (c) Any unexpended amount from the appropriation in paragraph (a) after June 30, 2018 4.12 2019, shall be transferred no later than August 31, 2018 2019, from the general fund to the 4.13 budget reserve account under Minnesota Statutes, section 16A.152, subdivision 1a. 4.14
- 4.15 **EFFECTIVE DATE.** This section is effective the day following final enactment.

Sec. 4. TERMINATION OF MINNESOTA PREMIUM SECURITY PLAN.

- (a) The commissioner of commerce, in consultation with the board of directors of the 4.17 Minnesota Comprehensive Health Association, shall develop and implement a process to 4.18 terminate the Minnesota premium security plan authorized under Minnesota Statutes, section 4.19 62E.23, and reinsurance payments provided through the plan. 4 20
- (b) The Minnesota premium security plan, and reinsurance payments provided through 4.21 the plan, must be completely terminated within 90 days of the effective date of this section. 4.22
- (c) The Minnesota premium security plan shall not be financially responsible for any 4.23 reinsurance payments requested by an eligible health carrier after 60 days of the effective 4.24 date of this section. 4.25
- **EFFECTIVE DATE.** This section is effective the day following final enactment. 4.26

Sec. 5. TRANSFER OF MINNESOTA PREMIUM SECURITY PLAN FUNDS. 4.27

(a) All funds in the Minnesota premium security plan account under Minnesota Statutes, 4.28 section 62E.25, must be transferred to the health care access fund established under 4.29

Sec. 5. 4

EFFECTIVE DATE. This section is effective 90 days after final enactment.

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Sec. 7. 5