

SENATE
STATE OF MINNESOTA
EIGHTY-NINTH SESSION

S.F. No. 3215

(SENATE AUTHORS: ROSEN)

DATE	D-PG	OFFICIAL STATUS
03/24/2016	5259	Introduction and first reading
		Referred to Health, Human Services and Housing
04/07/2016		Comm report: To pass as amended and re-refer to Finance

1.1 A bill for an act
 1.2 relating to human services; providing medical assistance coverage for services
 1.3 provided by a community medical response emergency medical technician;
 1.4 amending Minnesota Statutes 2014, section 256B.0625, by adding a subdivision.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2014, section 256B.0625, is amended by adding a
 1.7 subdivision to read:

1.8 Subd. 60a. **Community emergency medical technician services.** (a) Medical
 1.9 assistance covers services provided by a community emergency medical technician
 1.10 (CEMT) who is certified under section 144E.275, subdivision 7, when the services are
 1.11 provided in accordance with this subdivision.

1.12 (b) A CEMT may provide a posthospital discharge visit when ordered by a treating
 1.13 physician. The posthospital discharge visit includes:

- 1.14 (1) verbal or visual reminders of discharge orders;
 1.15 (2) recording and reporting of vital signs to the patient's primary care provider;
 1.16 (3) medication access confirmation;
 1.17 (4) food access confirmation; and
 1.18 (5) identification of home hazards.

1.19 (c) Individuals who have repeat ambulance calls due to falls, have been discharged
 1.20 from a nursing home, or identified by their primary care provider as at risk for nursing
 1.21 home placement, may receive a safety evaluation visit from a CEMT when ordered by a
 1.22 primary care provider in accordance with the individual's care plan. A safety evaluation
 1.23 visit includes:

- 1.24 (1) medication access confirmation;

2.1 (2) food access confirmation; and

2.2 (3) identification of home hazards.

2.3 (d) A CEMT shall be paid at \$9.75 per 15 minute increment. A safety evaluation visit
2.4 may not be billed for the same day as a posthospital discharge visit for the same recipient.

2.5 **EFFECTIVE DATE.** This section is effective January 1, 2017, or upon federal
2.6 approval, whichever is later.