

1.1 ..... moves to amend the H0214DE3 amendment to H.F. No. 214 as follows:

1.2 Page 1, after line 17, insert:

1.3 "Sec. 2. Minnesota Statutes 2012, section 256B.0755, subdivision 3, is amended to read:

1.4 Subd. 3. **Accountability.** (a) Health care delivery systems must accept responsibility  
1.5 for the quality of care based on standards established under subdivision 1, paragraph (b),  
1.6 clause (10), and the cost of care or utilization of services provided to its enrollees under  
1.7 subdivision 1, paragraph (b), clause (1).

1.8 (b) A health care delivery system may contract and coordinate with providers and  
1.9 clinics for the delivery of services and shall contract with community health clinics,  
1.10 federally qualified health centers, community mental health centers or programs, county  
1.11 agencies, and rural clinics to the extent practicable.

1.12 (c) A health care delivery system must demonstrate how its services will be  
1.13 coordinated with other services affecting its attributed patients' health, quality of care,  
1.14 and cost of care that are provided by other providers and county agencies in the local  
1.15 service. The health care delivery system must document how other providers and counties,  
1.16 including county-based purchasing plans, will provide services to persons attributed to  
1.17 the health care delivery system participated in developing the application. A health care  
1.18 delivery system must document how it will address applicable local needs, priorities,  
1.19 and public health goals.

1.20 Sec. 3. Minnesota Statutes 2012, section 256B.694, is amended to read:

1.21 **256B.694 SOLE-SOURCE OR SINGLE-PLAN MANAGED CARE**  
1.22 **CONTRACT.**

1.23 (a) MS 2010 [Expired, 2008 c 364 s 10]

1.24 (b) The commissioner shall consider, and may approve, contracting on a  
1.25 single-health plan basis with ~~other~~ county-based purchasing plans, or with other qualified

2.1 health plans that have coordination arrangements with counties, to serve persons with  
2.2 ~~a disability who voluntarily enroll~~ enrolled in state health care programs, in order to  
2.3 promote better coordination or integration of health care services, social services and  
2.4 other community-based services, provided that all requirements applicable to health plan  
2.5 purchasing, including those in section 256B.69, subdivision 23, are satisfied. ~~Nothing in~~  
2.6 ~~this paragraph supersedes or modifies the requirements in paragraph (a)."~~

2.7 Page 1, line 24, delete "services" and insert "sources"

2.8 Page 5, line 34, delete "MAGI"

2.9 Page 7, delete lines 21 to 28

2.10 Page 15, line 29, delete "and"

2.11 Page 15, line 32, before the period, insert

2.12 "; and

2.13 (4) establishing requirements and criteria for selection that ensure that covered  
2.14 health care services will be coordinated with local public health, social services, long-term  
2.15 care services, mental health services, and other local services affecting enrollees' health,  
2.16 access, and quality of care."

2.17 Renumber the sections in sequence and correct the internal references

2.18 Amend the title accordingly