

BLWG #	Proposal	Sec.	Statute	Effective Date	Description	Committee Stops
HC-87	Change Appeals Language and Expand Timeframe for Inpatient Rate Cost Data Submission	1	256.9695, subd. 1	None	Extends the time period during which hospitals may appeal and/or correct the information DHS uses to set both the rates and the overall budget pool for inpatient hospital services from 12 to 18 months.	
HC-47	Federal Compliance: Align Asset Limits for Medicare Savings Programs	2	256B.057, subd. 3	Day following enactment	Indexes the Medicare Savings Program asset limits annually to correspond to the Low Income Subsidy (LIS) resource limits, when the LIS asset limits reach or exceed the amounts currently set out in state law.	
HC-68	Expand and Remove Limits on Telemedicine Services	3	256B.0622, subd. 7a	None	Allows psychiatric care providers on an ACT team to provide services via telemedicine	
HC-68	Expand and Remove Limits on Telemedicine Services	4	256B.0625, subd. 3b	None	Removes the three times per week cap on telemedicine. Clarifies that the patient's home can be the originating site. Expands the list of providers who can provide telemedicine services. Clarifies that telemedicine visits can be used to satisfy the face-to-face requirement for payments for FQHCs, RHCs, IHS, 638 tribal clinics, and CCBHCs.	
HC-59	MHCP Extending 90 Day Prescription Refills and Dispensing Fee Changes	5	256B.0625, subd. 13	Upon Federal approval	Allows certain drugs, including low cost generics, to be filled in up to a 90 day supply.	
HC-59	MHCP Extending 90 Day Prescription Refills and Dispensing Fee Changes	6	256B.0625, subd. 13e	None	Decreases the pharmacy dispensing fee from \$10.48 to \$9.91 based on the 2020 Cost of Dispensing Survey. Modifies the reimbursement of dispensing fees for compounded IV solutions to pay one dispensing fee per claim rather than per bag.	
HC-78	Provide Medical Assistance Enrollees with Continuous Access to Public Transportation	7	256B.0625, subd. 18	January 1, 2022	Provides a monthly bus pass to any MA enrollee who is eligible for one public transit trip for a medically necessary covered service in that month.	
HC-77	Redesign Outreach Activities for Child and Teen Check up Program	8	256B.0625, subd. 58	January 1, 2022	Allows IHPs to take on EPSDT outreach services for children attributed to them and receive a PMPM payment for the activity.	
HC-68	Expand and Remove Limits on Telemedicine Services	9	256B.0947, subd. 6	None	Allows psychiatric providers in IRMHS settings to provide services via telemedicine when necessary	
HC-68	Expand and Remove Limits on Telemedicine Services	10	256B.0949, subd. 13	None	Allows telemedicine for EIDBI services	
HC-88	Outpatient Hospital Rate Statutory Cleanup	11	256B.75	None	Language clarifies the rate methodology used to set payment rates for outpatient hospital services.	
HC-84	Expanding Integrated Care for HighRisk Pregnant Women	12	256B.79, subd. 1	None	Technical language change to definition of "targeted populations"	
HC-84	Expanding Integrated Care for HighRisk Pregnant Women	13	256B.79, subd. 3	None	Eliminates outdated language related to ICHRP grant funding	
HC-84	Expanding Integrated Care for HighRisk Pregnant Women	14	256L.01, subd. 5	Day following enactment	Defines income in MinnesotaCare as projected annual income for the applicable tax year.	
HC-84	Expanding Integrated Care for HighRisk Pregnant Women	15	256L.04, subd. 7b	Day following enactment	Requires MinnesotaCare income limits to adjust on January 1 of each year in accordance with federal law.	
HC-54	Realigning MinnesotaCare Renewals With Federal Requirements	16	256L.05, subd. 3a	Day following enactment	Defines the period of eligibility for MinnesotaCare as the calendar year and clarifies that redeterminations occur during QHP open enrollment as defined in federal law.	

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OP-45	Adding New Background Study Partners	1	62V.05, subd. 4a	None	Adds background study requirements for navigators, in-person assisters, and certified application counselors to MNsure statute	
OP-45	Adding New Background Study Partners	2	122A.18, subd 8	None	Updates background study requirement in PELSB statute.	
OP-63	Withdrawal Management Fees	3	245A.10, subd. 4	None	Updates to withdrawal management fees, clarifies that dual licensed programs only pay one fee	
OP-45	Background Studies Federal Compliance	4	245C.02, Subd 5b	None	Adds definition of "alternative background study."	
OP-44	Background Studies Federal Compliance	5	245C.02, Subd 11c	None	Adds definition of "entity."	
OP-44	Background Studies Federal Compliance	6	245C.02, Subd 16a	None	Adds definition of "results."	
CS-52	EIDBI Background Study	7	245C.03, subd. 14	The day following final enactment	Requires Commissioner to conduct background studies for Early Intensive Developmental and Behavioral Intervention services.	
CS-52	EIDBI Background Study	8	245C.10, subd. 17	The day following final enactment	Requires Commissioner to recover background study fee of \$20 per study for enrolled EIDBI service providers.	
OP-44	Background Studies Federal Compliance	9	245C.03	None	Requires individuals and organizations to comply with the requirements of this chapter. Requires all studies to be conducted according to sections 299C.60 to 299C.64. Excludes subdivisions 1, 4, 6a, 9, and 9a from that requirement. Adds background study requirements currently in the chapters governing specific programs.	
OP-44	Background Studies Federal Compliance	10	[245C.031]	None	Adds a new section to 245C that outlines the requirements of alternative background studies and the programs subject to them. Requires all studies to be conducted according to sections 299C.60 to 299C.64.	
OP-44	Background Studies Federal Compliance	11	245C.05, subd. 1	None	Adds that the subject of a study must submit a criminal and maltreatment history records check consent form for applicable national and state records checks.	
OP-44	Background Studies Federal Compliance	12	245C.05, subd. 2	None	Clarifies which entity must verify and submit information about a study subject.	
OP-44	Background Studies Federal Compliance	13	245C.05, subd. 2a	None	Clarifies that the entity initiating a child foster care background study must collect and forward information to the commissioner.	
OP-44	Background Studies Federal Compliance	14	245C.05, subd. 2b	None	Adds a private agency initiating a background study as an entity forwarding information to the commissioner for family adult day services and adult foster care studies. Adds that county agencies initiating a study for family child care and legal nonlicensed child care must provide information the commissioner.	
OP-44	Background Studies Federal Compliance	15	245C.05, subd. 4	None	Allows the sharing of information obtained during child foster care studies with private agencies. Adds that information obtained under this section applies to state and tribal agencies for alternative studies.	
OP-44	Background Studies Federal Compliance	16	245C.08, subd 5	None	Adds a subdivision defining "Authorized recipient" of studies as the commissioner of DHS	
OP-44	Background Studies Federal Compliance	17	245C.08, subd 6	None	Adds subdivision stating that all background studies conducted under this chapter shall comply with the requirements of sections 299C.60 to 299C.64 when applicable.	
OP-44	Background Studies Federal Compliance	18	245C.10, subd. 10	None	Updates fees for alternative background studies of professional guardians and conservators.	
CS-52	EIDBI Background Study	19	256B.0949, subd. 16a	The day following final enactment	EIDBI background studies must be completed through the NETStudy system	
OP-44	Background Studies Federal Compliance	20	245C.10, subd. 17	None	Clarifies fee payment for background studies for programs licensed by MDH	
OP-44	Background Studies Federal Compliance	21	245C.10, subd. 18	None	Clarifies fee payment for guardians ad litem background studies	
OP-45	Adding New Background Study Partners	22	245C.10, subd. 19	None	Adds Fees for background studies conducted for MNsure	
OP-45	Adding New Background Study Partners	23	245C.10, subd. 20	None	Adds fees for background studies conducted for PELSB	
OP-45	Adding New Background Study Partners	24	245C.10, subd. 21	None	Adds fees for background studies conducted for the Board of School Administrators	
OF-46	Transition to Fee Schedule	25	245C.10, subd. 22	None	Creates a fee schedule for background studies to cover the actual costs of administering and conducting background studies	
OP-44	Background Studies Federal Compliance	26	245C.13, subd. 2	None	Clarifies activities a personal care assistant may perform pending completion of a background study	

OP-44	Background Studies Federal Compliance	27	245C.14, subd. 4	None	Adds that an individual affiliated with a licensed child care center or certified license-exempt child care center who is disqualified from direct contact must also be removed from working in any position in the center
OP-44	Background Studies Federal Compliance	28	245C.16, subd. 1	None	Allows the commissioner to order the immediate removal of an individual from working in a licensed child care center or certified license-exempt child care center if the individual has a disqualification which may not be set aside because it is a permanent bar under section 245C.24, subdivision 1, or the individual is a child care background study subject who has a felony-level conviction for a drug-related offense in the last five years.
OP-44	Background Studies Federal Compliance	29	245C.16, subd. 2	None	Prohibits the commissioner from making a finding either of risk of harm or of no risk of harm requiring continuous, direct supervision while an individual affiliated with a licensed child care center or certified license-exempt child care center applies for a reconsideration.
OP-44	Background Studies Federal Compliance	30	245C.17, subd. 1	None	Prohibits an individual affiliated with a licensed child care center or certified license-exempt child care center from working in the center regardless of supervision if more time is needed to complete a background study.
OP-44	Background Studies Federal Compliance	31	245C.17, subd. 8	None	Requires disqualification notices for licensed child care centers and certified license-exempt child care centers to include immediate removal from direct contact and also to order removal of the individual from any position in the center. Requires notices for licensed child care centers and certified license-exempt child care centers to prohibit an individual from working under supervision.
OP-44	Background Studies Federal Compliance	32	245C.18	None	Requires a license holder for a licensed child care center or certified license-exempt child care center to remove a disqualified individual from the center upon receiving notice from the commissioner. Requires removal of a disqualified individual from a licensed child care center or certified license-exempt child care center unless the commissioner issues a notice that they are not disqualified or that they received a set aside or variance.
OP-44	Background Studies Federal Compliance	33	245C.18	None	Revisor instruction
OF-46	Transition to Fee Schedule	34	Repealer	None	Repeals old fee schedule

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HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	1	174.30, subd. 3	None	Conforming change to MS 174.30 to update cross reference to 256.0625, subd. 17	
OP-66	BRC Proposal: Expand Fraud Prevention Strategies and Improve Recoveries	2	256.983	None	Adds "tribes" to 256.983, Subdivisions 1 to 4 to explicitly include tribal agencies as direct recipients of FPI grant funding, subject to the programmatic requirements applicable to county grant applicants	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	3	New chapter 256B.0371	January 1, 2023	Establishes authority for DHS to contract with dental administrators to administer the dental benefit for MA and MinnesotaCare, including for enrollees in managed care.	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	4	256B.04, subd. 12	None	Eliminates outdated language regarding emergency and non-emergency transportation payment rates	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	5	256B.04, subd. 14	None	Allows competitive bidding for the full NEMT benefit	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	6	256B.0625, subd. 9	January 1, 2023	Carves out dental services from managed care in Medical Assistance.	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	7	256B.0625, subd. 17	None	Eliminates outdated language regarding the NEMT Advisory Committee and administration of the NEMT benefit.	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	8	256B.0625, subd. 17b	None	Allows the NEMT vendor to recover funds paid for transportation not documented according to statute	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	9	256B.0625, subd. 18b	None	Directs DHS to contract for administration of all covered modes under the NEMT benefit, including for enrollees in managed care.	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	10	256B.69, subd. 6	January 1, 2023	Carves out coverage for outpatient prescription drugs for MA from the managed care contracts.	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	11	256B.76, subd. 2	January 1, 2023	Sunsets the rural dental clinic rate add-on after December 31, 2022. Increases the payment rate for all dental services by 54% effective January 1, 2023, except for state-operated dental clinics, FQHCs, RHCs, and Indian health centers.	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	12	256B.76, subd. 4	None	Sunsets the critical access dental provider rate add-on after December 31, 2022	
HC-63	BRC Strategy: Durable Medical Equipment (DME) Rate Methodology	13	256B.766	Multiple	Changes the Medical Assistance reimbursement formula for durable medical equipment that is also covered by Medicare to pay equivalent to the Medicare rate. Adds reimbursement formula for products that don't have a Medicare rate.	
HC-63	BRC Strategy: Durable Medical Equipment (DME) Rate Methodology	14	256B.767	None	Eliminates language excluding DME, prosthetics, orthotics, and supplies from the statute limiting payment for services to the Medicare payment limit.	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	15	256L.11, subd. 7	December 31, 2022	Sunsets the critical access dental provider rate add-on in MinnesotaCare after December 31, 2022	
HC-90	BRC Strategy: Uniform Administration of Non-Emergency Medical Transportation	16	Repealer	January 1, 2023	Eliminates outdated language referencing the NEMT Advisory Committee.	
HC-58	BRC Strategy: Uniform Administration of the Pharmacy and Dental Benefits	16	Repealer	January 1, 2023	Eliminates the dental rate add-on in MinnesotaCare.	