

Subject MA managed care opt-out

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Date February 3, 2023

## Overview

Under current law, most MA enrollees who are eligible as families and children, adults without children, and persons over age 65 are required to enroll in MA managed care and receive services from HMOs and county-based purchasing plans. Persons with disabilities are required to enroll in MA managed care, but may opt out and receive services under fee-for-service. This bill requires DHS to provide all persons currently required to enroll in MA managed care with the opportunity to opt out and receive care under fee-for-service.

## Summary

Section	Description
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|---|---|
| 1 | <b>Limitation of choice; opportunity to opt out.</b><br>Amends § 256B.69, subd. 4. Requires the commissioner to provide all MA enrollees required to enroll in managed care with the opportunity to opt out, and receive care under fee-for-service. Also makes conforming changes. Provides a January 1, 2024, effective date. |
| 2 | <b>Medicare special needs plans; medical assistance basic health care.</b><br>Amends § 256B.69, subd. 28. Makes a conforming change, in the section of law allowing persons with disabilities to opt out of MA managed care. Provides a January 1, 2024, effective date.  |
| 3 | <b>Enrollee support system.</b><br>Amends § 256B.69, subd. 36. Requires the DHS enrollee support system to provide potential enrollees with access to counseling on opting out of managed care. Provides a January 1, 2024, effective date.   |

Section	Description
4	<p data-bbox="316 262 462 294"><b>In general.</b></p> <p data-bbox="316 304 1430 420">Amends § 256B.692, subd. 1. Makes a conforming change, adding a reference to the opt-out provision in a section dealing with county-based purchasing plans. Provides a January 1, 2024, effective date.</p>



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