

**List of Sections: House Article 1 – Department of Human Services Health Care Programs  
Senate Article 1 – Health Care; Department of Human Services**

House section	Senate section	Cost?	Description	Comparison
1-5			Exempt MA and MinnesotaCare from private insurance mandates	House only
6, 14, 15, 28, 29, 31		\$	Require DHS to contract for the administration of non-emergency medical transportation (NEMT) services	House only
7	8	\$	Expands use of the encounter alerting service	Identical
	9		Requires agency reporting requirements to expire after three or five years	Senate only
8, 32			Allow DHS to use more than one base year to set inpatient hospital and FQHC and rural health clinic rates	House only
9, 41, 42, 46, 60	12, 37, 38, 41, 49, 56	\$	Establish a directed payment arrangement for Hennepin County Medical Center that involves intergovernmental transfers and higher reimbursement rates from managed care plans	Similar
10			Clarifies the criteria for disproportionate share hospital (DSH) payments	House only
10, 43, 47, 65		\$	Carve out outpatient drug coverage from MA managed care contracts; increase funding for 340B and other providers; require a study of expansion to MinnesotaCare and the private sector	House only
11	13		Extends the time period for hospitals to appeal base year information	Identical
12	14	\$	Allows tribal agencies to receive fraud prevention grants	Identical

House section	Senate section	Cost?	Description	Comparison
13, 23, 48, 49, 57, 58		\$	Require DHS to contract with a dental administrator and carve-out dental services from MA and MinnesotaCare managed care; replaces supplemental rates with a new base rate and a 20 percent critical access dental provider add-on	House only
15, 33, 35		\$	Establish an MA enhanced asthma benefit	House only
16, 17, 19, 66	15, 16, 18, 52	\$	Extend MA postpartum coverage from current 60 days	Differences – House: 12 months; Senate: 6 months
18	17		Links the asset limit for QMBs to the Medicare low income subsidy level	Identical
20, 21, 22	19, 20, 21		Make changes related to the Health Services Advisory Committee	Identical
23	22	\$	Expands adult dental services to include coverage for periodontal disease	Identical (but House also has dental carve-out language)
	23, 24	\$	Establish a uniform prior authorization process and a uniform credentialing process for dental services	Senate only
24	25	\$	Allows dispensing of a 90-day supply of certain generic drugs	Identical
24, 45			Require reporting on reimbursement for 340B drugs	House only
25	26		DHS Formulary Committee expiration: 6-30-22	House makes ongoing; Senate technical change
26		\$	Requires MA to cover weight loss drugs	House only

House section	Senate section	Cost?	Description	Comparison
27	27	\$	Increases the MA dispensing fee to \$10.77 and requires separate cost of dispensing measures for specialty and non-specialty drugs	Identical
	28		Requires DHS to hold a public hearing and consider certain factors, before removing a drug from the preferred drug list	Senate only
	29, 39	\$	Requires pharmacies and other entities that dispense drugs to MA to be located within Minnesota	Senate only
30		\$	Allows DHS to provide monthly transit passes to NEMT recipients	House only
34		\$	Specifies additional requirements for EPSDT services and allows DHS to contract for the provision of EPSDT services	House only
36, 53		\$	Exempt HIV drugs from MA and MinnesotaCare copayments	House only
37, 38, 39	31, 32, 33		Modify the operation and membership of the opioid prescribing work group	Identical
40	34		Eliminates a requirement that PCA providers working for an agency enroll as individual providers	Identical
	40		Requires managed care plans and dental benefits administrators to make fee schedules available to dental providers	Senate only
44			Requires managed care plans to provide information to DHS on provider payment rates and DHS to report annually to the legislature	House only
47	42		Clarifies use of Medicare payment methods for outpatient hospital rates	Identical (but House also has drug carve-out language)
50, 51			Clarify language related to the integrated care for high-risk pregnant women program	House only
	43	\$	Requires DHS to report on the effectiveness of maternal and child health policies and programs in addressing disparities in health outcomes	Senate only

House section	Senate section	Cost?	Description	Comparison
52, 54, 55	44, 45, 46		Modify MinnesotaCare eligibility determination procedures to reflect federal denial of a waiver request	Identical
56		\$	Allows persons subject to the family glitch to be eligible for MinnesotaCare	House only
59	47	\$	Adjusts MinnesotaCare premiums to reflect federal reductions in QHP premiums	Technical differences only
	48	\$	Increases MinnesotaCare premiums by 10 percent for persons who use tobacco products who are not participating in a tobacco cessation program	Senate only
61			Allows DHS to take actions to maintain current MA and MinnesotaCare policies, if the ACA is overturned	House only
62		\$	Requires DHS to report on alternative methods of delivering care under MA and MinnesotaCare	House only
63	51	\$	Requires study of a dental home demonstration project	Differences
64		\$	Exempts payments from the St. Paul guaranteed income demonstration project from being counted when determining eligibility for DHS programs	House only
	50	\$	Delays payment of \$93.7 million in capitation payments due in May 2023 until July 2023 and delays payment of \$114.1 million of capitation payments due in May 2025 until July 2025	Senate only
67			Requires DHS to develop a proposal for a public option and report to the legislature	House only
68			Allows DHS to suspend collection of unpaid premiums and use of periodic data matching for up to six months following the end of the public health emergency	House only
	53	\$	Exempts DME and other provider from being financially liable to the federal government for certain overpayments; requires the state to repay the federal government with state funds	Senate only
	54		Requires DHS to report recommendations for a new Formulary Committee to the legislature	Senate only
	58		Requires DHS to develop an MA reimbursable recuperative care service	Senate only
69	60		Revisor's instruction related to the Health Services Advisory Council	Identical

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House section	Senate section	Cost?	Description	Comparison
70	61	\$	Repealer: Senate repeals the health care access fund to general fund transfer on 7-1-24; House repeals transfer on 6-30-25 in article 21. House also repeals EPSDT rules and certain NEMT provisions.	Differences