

HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Lead Agency: **Commerce Dept**
 Other Agencies:
 Health Dept Human Services Dept
 Minn Management and Budget MNsurre

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact	X	

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings) Dollars in Thousands	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
Commerce Dept					
General Fund	-	-	-	338	319
Minn Management and Budget					
General Fund	-	-	8	16	17
State Employees Insurance	-	-	-	-	-
All Other Funds	-	-	16	34	35
State Total					
General Fund	-	-	8	354	336
State Employees Insurance	-	-	-	-	-
All Other Funds	-	-	16	34	35
	Total	-	-	24	371
	Biennial Total		24		759

Full Time Equivalent Positions (FTE)	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
Commerce Dept					
General Fund	-	-	-	.2	.1
Minn Management and Budget					
General Fund	-	-	-	-	-
State Employees Insurance	-	-	-	-	-
All Other Funds	-	-	-	-	-
	Total	-	-	.2	.1

Lead LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Shannon Zila **Date:** 4/2/2024 9:35:22 AM

Phone: 651-296-6053 **Email:** shannon.zila@lbo.mn.gov

State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2023	FY2024	FY2025	FY2026	FY2027
Commerce Dept						
General Fund		-	-	-	338	319
Minn Management and Budget						
General Fund		-	-	8	16	17
State Employees Insurance		-	-	-	-	-
All Other Funds		-	-	16	34	35
	Total	-	-	24	388	371
	Biennial Total			24		759
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Commerce Dept						
General Fund		-	-	-	338	319
Minn Management and Budget						
General Fund		-	-	8	16	17
State Employees Insurance		-	-	27	57	60
All Other Funds		-	-	16	34	35
	Total	-	-	51	445	431
	Biennial Total			51		876
2 - Revenues, Transfers In*						
Commerce Dept						
General Fund		-	-	-	-	-
Minn Management and Budget						
General Fund		-	-	-	-	-
State Employees Insurance		-	-	27	57	60
All Other Funds		-	-	-	-	-
	Total	-	-	27	57	60
	Biennial Total			27		117

HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Agency: **Commerce Dept**

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	-	338	319	
Total	-	-	-	338	319	
Biennial Total			-			657

Full Time Equivalent Positions (FTE)	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	-	.2	.1
Total	-	-	-	.2	.1

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Shannon Zila **Date:** 3/5/2024 12:42:50 PM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	-	-	338	319
Total		-	-	-	338	319
Biennial Total					-	657
1 - Expenditures, Absorbed Costs*, Transfers Out*						
General Fund	-	-	-	-	338	319
Total		-	-	-	338	319
Biennial Total					-	657
2 - Revenues, Transfers In*						
General Fund	-	-	-	-	-	-
Total		-	-	-	-	-
Biennial Total					-	-

Bill Description

House File 4053-0 would require a health carrier to provide health insurance coverage for abortions and abortion-related services. This proposed mandate would prohibit cost-sharing (e.g., co-payment, deductible, or coinsurance) for abortions and abortion-related services, except in the case of high-deductible health plans. This bill also strikes language limiting abortion coverage in Minn. Stat. §62D.02, §62D.22 and §62Q.04. In addition, Minn. Stat. §62A.014 Subd.3 is repealed.

HF4053-0 would apply to all medication or procedural interventions intended to terminate a pregnancy. The bill does not define what may be considered abortion-related services, but pre-abortion or follow-up services may include evaluation of pre-procedural medical conditions, tests to confirm pregnancy status, emergency department visits, and contraceptive and family planning services.

This bill would apply to fully insured small and large group commercial health plans, individual market plans, and the State Employee Group Insurance Program (SEGIP). This would not apply to self-insured employer plans, grandfathered plans, Medicare and Medicare supplemental policies, and Minnesota public health coverage programs.

HF4053-0 would be effective January 1, 2025, and would apply to health plans offered, sold, issued, or renewed on or after that date.

Assumptions

Commerce assumes the requirements of HF4053 would constitute a new benefit mandate requiring partial defrayal as understood under Section 1311(d)(3) of the Affordable Care Act (ACA), as the proposed bill creates new coverage requirements for abortion services. New benefit mandates not included as essential health benefits specified under Section 1302(b) and added by state law after December 31, 2012, require the state to defray health plan costs associated with providing coverage to enrollees.

Commerce assumes the cost to the state for partial defrayal of abortion services would be between \$90,000 and \$300,000 in the first year following enactment. Commerce also assumes defrayal costs will be ongoing.

Commerce staff would be required to maintain a distinct reporting process to review and validate defrayal requests from carriers. Commerce assumes this will be 0.20 of an analyst’s time (SPA, Coord) in the first year to develop, document and communicate processes to carriers; receive, review and process defrayal submissions; and triage and respond to carrier questions. Commerce assumes the mandate will require 0.10 of an analyst’s time (SPA, Coord) after the first year. These assumptions are based on Commerce’s experience administering the defrayal process for other provisions.

Commerce staff reviewing health plan forms and rate filings would be required to add the new statutory provisions of the bill to existing checklists and review them for compliance. However, the work required by the bill would not substantially add to or deviate from the existing overall role agency staff have in the review of health plan filings.

Expenditure and/or Revenue Formula

Defrayal costs will be between \$90,000 and \$300,000 beginning in FY2026.

One-time .20 FTE SPA Coordinator in FY2026. Ongoing .10 FTE SPA Coordinator in FY2027 and beyond.

	FY25	FY26	FY27	FY28
Salary		\$22,801	\$11,401	\$11,401
Fringe		\$6,840	\$3,420	\$3,420
Other Personnel Costs		\$8,131	\$4,065	\$4,065
Total		\$37,772	\$18,886	\$18,886

Long-Term Fiscal Considerations

Commerce assumes that there will be annual and ongoing costs of between \$90,000 and \$300,00 and that there will be ongoing staff costs associated with administering the defrayal payments.

Commerce assumes that, if enacted, an open appropriation would be structured as an open appropriation in order for the agency to pay defrayment amounts to eligible health plans based on actual costs incurred in the previous plan year. This assumption is based on the current structure of defrayal payments required under current law.

Local Fiscal Impact

References/Sources

Agency Contact:

Agency Fiscal Note Coordinator Signature: Amy Trumper

Phone: 651-539-1517

Date: 3/5/2024 11:31:01 AM

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HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Agency: **Health Dept**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-
Biennial Total			-			-

Full Time Equivalent Positions (FTE)	Biennium			Biennium		
		FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Shannon Zila **Date:** 3/4/2024 8:47:35 AM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2023	FY2024	FY2025	FY2026	FY2027
	Total	-	-	-	-	-
	Biennial Total			-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
	Total	-	-	-	-	-
	Biennial Total			-		-
2 - Revenues, Transfers In*						
	Total	-	-	-	-	-
	Biennial Total			-		-

Bill Description

This bill would require health plans to cover abortions and related services with no cost-sharing. High-deductible health plans in conjunction with a health savings account must include cost sharing at the minimum level necessary to preserve the enrollee’s ability to make tax-exempt contributions and withdrawals from the health savings account. Health plans may not impose limitations on the coverage, including utilization review, prior authorization, referral requirements, restrictions, or delays. The provisions take effect January 1, 2025.

Medical Assistance would cover abortions under this bill, with no restriction based on medical necessity.

Technical Comment:

Filings for the 2025 plan year are submitted in April 2024 in order to meet statutory requirements for review and approval. Depending on the date of enactment, the bill may affect filings already in process or under review, which could require resubmission of information by health plans.

Assumptions

MDH is responsible for reviewing state-regulated health maintenance organization (HMO) health plans for compliance with state and federal requirements before they are available to enrollees. This bill impacts coverage of abortion services. Enforcement of this requirement falls within the routine reviews of HMO health plan coverage and would not generate a material increase in workload.

Expenditure and/or Revenue Formula

Long-Term Fiscal Considerations

Local Fiscal Impact

References/Sources

Agency Contact:

Agency Fiscal Note Coordinator Signature: Brendan Wright

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HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Agency: **Human Services Dept**

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-
Biennial Total			-			-

Full Time Equivalent Positions (FTE)	Biennium			Biennium		
		FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

This fiscal note has been reviewed and meets the LBO requirements for compliance with the fiscal note Uniform Standards and Procedures. This proposed legislation has a fiscal impact; however, an accurate fiscal impact cannot be determined due to a lack of data.

LBO Signature: Kate Schiller **Date:** 4/2/2024 9:14:20 AM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027	
Total	-	-	-	-	-	-
Biennial Total			-			-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total	-	-	-	-	-	-
Biennial Total			-			-
2 - Revenues, Transfers In*						
Total	-	-	-	-	-	-
Biennial Total			-			-

Bill Description

Section 6 modifies language in Minnesota Statutes related to coverage of abortion services in Minnesota Health Care Programs, by deleting “determined to be medically necessary by the treating provider,” and clarifying coverage of preabortion and follow-up services.

Assumptions

The effective date of this bill is assumed to be January 1, 2025.

Minnesota Health Care Programs currently covers abortions and abortion-related services, including preabortion and follow-up services, when medically necessary. This bill deletes the language, “determined to be medically necessary by the treating provider.” This change in language may have a utilization impact in the case that a provider may deliver services that may not have under the current construct , but the department does not have data to inform a related estimate. Thus, any utilization impact on public programs as a result of this bill is indeterminable.

Expenditure and/or Revenue Formula

Long-Term Fiscal Considerations

Local Fiscal Impact

References/Sources

Agency Contact:

Agency Fiscal Note Coordinator Signature: Chris Zempel

Phone: 651-247-3698

Date: 4/2/2024 8:21:33 AM

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HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Agency: **Minn Management and Budget**

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact	X	

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	8	16	17	
State Employees Insurance	-	-	-	-	-	-
All Other Funds	-	-	16	34	35	
Total	-	-	24	50	52	
Biennial Total			24		102	

Full Time Equivalent Positions (FTE)	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	-	-	-
State Employees Insurance	-	-	-	-	-
All Other Funds	-	-	-	-	-
Total	-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Kate Schiller **Date:** 3/15/2024 1:58:34 PM
Phone: 651-296-6052 **Email:** kate.schiller@lbo.mn.gov

State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	-	-	8	16	17
State Employees Insurance	-	-	-	-	-	-
All Other Funds	-	-	-	16	34	35
Total	-	-	-	24	50	52
Biennial Total				24	50	102
1 - Expenditures, Absorbed Costs*, Transfers Out*						
General Fund	-	-	-	8	16	17
State Employees Insurance	-	-	-	27	57	60
All Other Funds	-	-	-	16	34	35
Total	-	-	-	51	107	112
Biennial Total				51	107	219
2 - Revenues, Transfers In*						
General Fund	-	-	-	-	-	-
State Employees Insurance	-	-	-	27	57	60
All Other Funds	-	-	-	-	-	-
Total	-	-	-	27	57	60
Biennial Total				27	57	117

Bill Description

Senate File 3967 is a bill requiring health plan coverage of abortion and abortion-related services, including pre-abortion services and follow-up services without member cost-sharing, including copayments, coinsurance, and deductibles; or prohibit health plans from imposing limitations on coverage.

Sections 1-4 of the bill removes abortion exclusions from comprehensive HMO plans. the exclusion of non-maternal lifesaving elective abortions from health maintenance services, removes abortion exclusion language from health plan language, and prohibits health plan restrictions around where an enrollee may receive an abortion or abortion services.

Section 5 of the bill requires plans to cover abortions and abortion-related services without cost-sharing (including deductible, co-payment, or coinsurance) and specifies that high deductible health plans with a health savings account component must include cost-sharing at a minimum level necessary to preserve the plan’s ability to meet the definition of a high deductible health plan under IRS regulations. The bill states that health plans cannot impose limitations on coverage (including utilization review, prior authorization, referral requirements, restrictions, or delays) that are not generally applied to other health plan coverages.

Section 6 of the bill covers abortions and abortion-related services for Medical Assistance, and Section 7 repeals abortion exclusions from maternity benefits.

The effective date for this bill is January 1, 2025.

Background:

Minnesota Management and Budget (MMB) administers the State Employee Group Insurance Program (SEGIP) which provides health, dental, life, and other benefits to eligible State employees and their dependents, and quasi-state agencies defined in Minnesota Statute. Health benefits are provided through the self-funded Minnesota Advantage Health Plan (Advantage). SEGIP contracts with two health plan administrators to provide medical benefits and a Pharmacy Benefit Manager (PBM) to provide its prescription drug benefit.

Assumptions

MMB assumes that SF 3967-0 will have a fiscal impact on SEGIP.

Under the Advantage Health Plan, members have coverage for abortion and abortion-related services, with cost-sharing in the form of copayments, coinsurance, or deductible depending on the place of service. MMB assumes that the only change required for SEGIP to comply with the bill is to remove member cost-sharing associated with these services.

MMB directed its health plan administrators to estimate the fiscal impact of removing member cost-sharing for abortions and abortion-related services, including pre-abortion and follow-up services. The health plan administrators analyzed historical claims data to identify abortions and abortion services, provided both before and after the procedure, to estimate the total claims cost to the plan if member cost-sharing was removed. The analysis produced a range of potential Per-Member-Per-Month (PMPM) fiscal impacts from \$0.02 PMPM to \$0.05 PMPM because the bill does not explicitly specify which diagnosis and procedure codes must be used. MMB assumes the average of that range, \$0.035 PMPM, to be the fiscal impact of this bill.

SEGIP offers the Advantage High Deductible Health Plan (HDHP), which has an accompanying health care savings account, to a small subset of eligible employees. MMB assumes that the language in Section 5, Subdivision 2(c) of the bill is sufficient to allow the continued operation of SEGIP’s Advantage HDHP, which would continue to include cost-sharing to avoid conflict with IRS regulations.

With an effective date of January 1, 2025 and with approximately 130,000 members, the fiscal impact of the bill is estimated to be \$27,300 for the last six months of FY2025. We assume a 5% inflation factor for FY2026 and beyond to account for the increasing cost of medical services.

Expenditure and/or Revenue Formula

FY2025: \$0.035 PMPM * 130,000 members * 6 months = \$27,300.

FY2026: \$0.035 PMPM * 130,000 members * 12 months * 5% inflation factor = \$57,330

Fiscal Year Cost Calculation	FY24	FY25	FY26	FY27
Total Cost to SEGIP of this bill	\$0	\$27,300	\$57,330	\$60,197

Total Expenditures including new employee costs:

SEGIP’s costs are funded by premium contributions paid by state and quasi-state employers and employees. Our fiscal note assumes that 86.6% of added costs will be paid by state agencies in the form of employer premium contributions. This figure represents the proportion of employees on active payroll (97.2%), meaning those who receive an employer contribution, multiplied by the average employer contribution rate across all current collective bargaining agreements and compensation plans (89.1%).

Thus, 86.6% of added costs will be paid by state agencies and 13.4% will be paid by state employees and quasi-state agencies in the form of premium contributions.

The table below reflects how these premium costs are split between the employer and employee. The state employer costs are further split between the General Fund (32.5%) and All Other Funds (67.5%) on the same basis that state agencies pay for employee medical insurance premiums.

Fiscal Year Cost Calculation	FY2024	FY2025	FY2026	FY2027
Employee and quasi-state agency share 13.4%	\$0	\$3,658	\$7,682	\$8,066
Employer share - 1000 General Fund	\$0	\$7,684	\$16,136	\$16,942
Employer share - 9998 all Other Funds	\$0	\$15,598	\$33,512	\$35,188
Total	\$0	\$27,300	\$57,330	\$60,197

Long-Term Fiscal Considerations

Not Applicable

Local Fiscal Impact

MMB expects local units of government may incur increased spending due to the changes proposed in this legislation.

References/Sources

Program information and claims data from SEGIP, administered by MMB.

Agency Contact: Galen Benshoof 651-201-8224

Agency Fiscal Note Coordinator Signature: Ronika Rampadarat

Date: 3/13/2024 5:51:36 PM

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HF4053 - 0 - Health Coverage; Abortion & Abortion-Related Svcs

Chief Author: **Zack Stephenson**
 Committee: **Commerce Finance And Policy**
 Date Completed: **4/2/2024 9:35:22 AM**
 Agency: **MNsure**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-
Biennial Total			-			-

Full Time Equivalent Positions (FTE)	Biennium			Biennium		
		FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Steve McDaniel **Date:** 3/1/2024 3:05:32 PM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2 Dollars in Thousands	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
Total	-	-	-	-	-
Biennial Total			-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*					
Total	-	-	-	-	-
Biennial Total			-		-
2 - Revenues, Transfers In*					
Total	-	-	-	-	-
Biennial Total			-		-

Bill Description

This bill (SF 3967/HF 4053) provides requirements around health coverage for abortion and abortion related services.

Section 1 amends the definition of comprehensive health maintenance services in Minnesota Statutes 2022, section 62D.02, subdivision 7 so that elective abortion services are not excluded as a part of comprehensive health maintenance services. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Section 2 amends Minnesota Statutes 2022, section 62D.20, subdivision 1 so that abortion services are not excluded in coverage as the commissioner of health may promulgate reasonable rules to carry about provisions of 62D.01 to 62D.30. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Section 3 deletes exclusion of abortion services in Minnesota Statutes 2022, section 62D.22, subdivision 5. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Section 4 amends Minnesota Statutes 2022, section 62Q.14 (restrictions on enrollee services) so that abortion services may be included as an enrollee service for voluntary planning of the conception and bearing of children. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Section 5 provides requirements for health plans that prohibit cost sharing requirements for abortions and abortion-related services. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Section 6 amends Minnesota Statutes 2023 Supplement, section 256B.0625 to require Medical Assistance coverage for abortions and abortion-related services. This section is effective January 1, 2025, or upon federal approval, whichever is later. The commissioner of human services shall notify the revisor of statutes, when federal approval is obtained.

Section 7 repeals Minnesota Statutes 2022, section 62A.041, subdivision 3. This section is effective January 1, 2025, and applies to health plans offered, sold, issued, or renewed on or after that date.

Assumptions

This bill would result in no direct fiscal impact to MNsure; however, changes in plan premiums, plan choice, or plan enrollment could have an effect on the amount of revenue MNsure generates through its premium withhold. An actuarial study would need to be conducted to determine the impact to health insurance premiums, plan choice, or plan enrollment caused by the coverage provided for changes in requirements for abortion and abortion related services with the effective dates as described in the bill.

Expenditure and/or Revenue Formula

Long-Term Fiscal Considerations

Local Fiscal Impact

References/Sources

Agency Contact:

Agency Fiscal Note Coordinator Signature: Pete Engler

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