moves to amend H.F. No. 11, the first engrossment, as follows:
Page 9, after line 4, insert:
"Sec. 12. STUDY AND REPORT ON DISPARITIES BETWEEN GEOGRAPHIC
RATING AREAS IN INDIVIDUAL AND SMALL GROUP MARKET HEALTH
INSURANCE RATES.
Subdivision 1. Study and recommendations. (a) The commissioner of commerce shall
study disparities between Minnesota's nine geographic rating areas in individual and small
group market health insurance rates and recommend ways to reduce or eliminate rate
disparities between the geographic rating areas and provide for stability of the individual
and small group health insurance markets in the state. The commissioner of commerce shall:
(1) identify the factors that cause higher individual and small group market health
insurance rates in certain geographic rating areas, and determine the extent to which each
identified factor contributes to the higher rates;
(2) identify the impact of referral centers on individual and small group market health
insurance rates in southeastern Minnesota, and identify ways to reduce the rate disparity
between southeastern Minnesota and the metropolitan area, taking into consideration the
patterns of referral center usage by patients in those regions;
(3) determine the extent to which individuals and small employers located in a geographic
rating area with higher health insurance rates than surrounding geographic rating areas have
obtained health insurance in a lower-cost geographic rating area, identify the strategies that
individuals and small employers use to obtain health insurance in a lower-cost geographic
rating area, and measure the effects of this practice on the rates of the individuals and small
employers remaining in the geographic rating area with higher health insurance rates; and

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2.1	(4) develop proposals to redraw the boundaries of Minnesota's geographic rating areas,
2.2	and calculate the effect each proposal would have on rates in each of the proposed rating
2.3	areas. The commissioner of commerce shall examine at least three options for redrawing
2.4	the boundaries of Minnesota's geographic rating areas, at least one of which must reduce
2.5	the number of geographic rating areas. All options for redrawing Minnesota's geographic
2.6	rating areas considered by the commissioner of commerce must be designed:
2.7	(i) with the purposes of reducing or eliminating rate disparities between geographic
2.8	rating areas and providing for stability of the individual and small group health insurance
2.9	markets in the state;
2.10	(ii) with consideration of the composition of existing provider networks and referral
2.11	patterns in regions of the state; and
2.12	(iii) in compliance with the requirements for geographic rating areas in Code of Federal
2.13	Regulations, title 45, section 147.102(b), and other applicable federal law and guidance.
2.14	(b) Health carriers that cover Minnesota residents, health systems that provide care to
2.15	Minnesota residents, and the commissioner of health shall cooperate with any requests for
2.16	information from the commissioner of commerce that the commissioner of commerce
2.17	determines is necessary to conduct the study.
2.18	(c) The commissioner of commerce may recommend one or more proposals for redrawing
2.19	Minnesota's geographic rating areas if the commissioner of commerce determines that the
2.20	proposal would reduce or eliminate individual and small group market health insurance rate
2.21	disparities between the geographic rating areas and provide for stability of the individual
2.22	and small group health insurance markets in the state.
2.23	Subd. 2. Contract. The commissioner of commerce may contract with another entity
2.24	for technical assistance in conducting the study and developing recommendations according
2.25	to subdivision 1.
2.26	Subd. 3. Report. The commissioner of commerce shall complete the study and
2.27	recommendations by January 1, 2022, and to submit a report on the study and
2.28	recommendations by that date to the chairs and ranking minority members of the legislative
2.29	committees with jurisdiction over health care and health insurance.

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- 3.4 \$..... in fiscal year 2022 is appropriated from the general fund to the commissioner of
- 3.5 commerce to study and report on disparities between geographic rating areas in individual
- 3.6 and small group market health insurance rates under section 12."
- 3.7 Renumber the sections in sequence and correct the internal references
- 3.8 Amend the title accordingly