

HOUSE RESEARCH

Bill Summary

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Version: First engrossment

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Overview

This bill requires certain health plans to indicate the level of coverage for orally administered anticancer medication and extends the time in which an enrollee must file a request for external review. The bill also makes technical corrections and restores language that was removed in 2013 legislation. This bill is identical to S.F. 1523, the second engrossment.

Section

- 1** **Cancer chemotherapy treatment coverage.** Amends § 62A.3075. Requires a health plan company that offers a health plan covering chemotherapy to indicate the level of coverage for orally administered anticancer medication along with the other pharmacy benefits filed with the commissioner of commerce.
Effective date. Section is effective January 1, 2017, and applies to coverage offered, sold, issued or renewed on or after that date.
- 2** **Premium rate restrictions.** Amends § 62A.65, subdivision 3. States that the provisions of Minnesota Statutes 2012, section 62A.65, subdivision 3, apply to grandfathered plans. The effect of this is to restore rate requirements that were removed in the 2013 session.
- 3** **Dependent coverage.** Amends § 62L.05, subdivision 9. Makes technical corrections and removes language. Current law requires other laws and rules applicable to health plan coverage of dependent children who do not reside with the eligible employee apply to small employer plans. Bill removes “who do not reside with the eligible employee.” This language is no longer necessary due to the Affordable Care Act.

Section

- 4** **Grandfathered plans.** Amends § 62L.08 by adding subdivision 12. States that provisions of Minnesota Statutes 2012, section 62L.08, apply to grandfathered plans. The effect of this is to restore rate requirements that were removed in the 2013 session.
- 5** **Portability of coverage.** Amends §62Q.18, subdivision 7. Removes language as a technical correction relating to portability of coverage.
- 6** **Right to external review.** Amends § 62Q.73, subdivision 3. Extends the allowable time in which an enrollee may request an external review after an adverse determination to nine months (current law is six months).