

**SENATE
STATE OF MINNESOTA
NINETY-THIRD SESSION**

S.F. No. 2210

(SENATE AUTHORS: WIKLUND and Mann)

DATE
02/27/2023

D-PG
1144

Introduction and first reading
Referred to Health and Human Services

OFFICIAL STATUS

1.1 A bill for an act
1.2 relating to health; changing health care capital expenditure notification and
1.3 reporting; amending Minnesota Statutes 2022, section 62J.17, subdivision 5a.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2022, section 62J.17, subdivision 5a, is amended to read:

1.6 Subd. 5a. **Retrospective review.** (a) The commissioner shall retrospectively review
1.7 each major spending commitment and ~~notify the provider of the results of the review. The~~
1.8 ~~commissioner shall~~ determine whether the major spending commitment was appropriate.
1.9 In making the determination, the commissioner may consider the following criteria: the
1.10 major spending commitment's impact on the cost, access, and quality of health care; the
1.11 clinical effectiveness and cost-effectiveness of the major spending commitment; and the
1.12 alternatives available to the provider. If the major expenditure is determined to not be
1.13 appropriate, the commissioner shall notify the provider.

1.14 (b) The commissioner may not prevent or prohibit a major spending commitment subject
1.15 to retrospective review. However, if the provider fails the retrospective review, any major
1.16 spending commitments by that provider for the five-year period following the commissioner's
1.17 decision are subject to prospective review under subdivision 6a.