SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION

S.F. No. 970

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DATE	D-PG	OFFICIAL STATUS
02/03/2025	265	Introduction and first reading Referred to Commerce and Consumer Protection
02/06/2025	316	Author added Boldon

A bill for an act

relating to health insurance; requiring health plans to cover bowel and bladder management for spinal cord injuries; requiring the commissioner of commerce to defray the cost of coverage of bowel and bladder management for spinal cord injuries; requiring coverage of bowel and bladder management for spinal cord injuries in medical assistance and MinnesotaCare; appropriating money; amending Minnesota Statutes 2024, section 256B.0625, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 62Q.

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

Section 1. **[62Q.6661] COVERAGE OF BOWEL AND BLADDER MANAGEMENT FOR SPINAL CORD INJURIES.**

Subdivision 1. **Definition.** For the purposes of this section, "bowel and bladder management for spinal cord injuries" means any treatment, service, supply, or equipment for bowel or bladder management, prescribed for the insured by a provider licensed in this state, as the result of a spinal cord injury, including but not limited to over-the-counter medications and supplies prescribed by the provider.

Subd. 2. **Required coverage.** All health plans must cover bowel and bladder management for spinal cord injuries.

Subd. 3. **Cost-sharing requirements.** A health plan must not impose on the coverage under this section any cost-sharing requirement that is not generally applicable to other coverages under the plan, including but not limited to the following requirements:

(1) deductible;

(2) co-payment; or

(3) coinsurance.

Subd. 4. **Review and referral limitations.** A health plan must not impose on the coverage under this section any review or referral limitation that is not generally applicable to other coverages under the plan, including but not limited to the following limitations:

(1) utilization review, as defined in section 62M.02;

(2) referral requirement; or

(3) delay period.

Subd. 5. **Quantity limitations.** A health plan must not impose on the coverage under this section any quantity limitation.

Subd. 6. **Reimbursement.** (a) The commissioner of commerce must reimburse health plan companies for coverage under this section, as required by Code of Federal Regulations, title 45, section 155.170. Reimbursement is available only for coverage that would not have been provided by the health plan without the requirements of this section. Treatments, services, supplies, and equipment covered by the health plan as of January 1, 2025, are ineligible for payments under this subdivision by the commissioner of commerce.

(b) Health plan companies must report to the commissioner of commerce quantified costs attributable to the additional benefit under this section in a format developed by the commissioner. A health plan's coverage as of January 1, 2025, must be used by the health plan company as the basis for determining whether coverage would not have been provided by the health plan for purposes of this subdivision.

(c) The commissioner of commerce must evaluate submissions and make payments to health plan companies as provided in Code of Federal Regulations, title 45, section 155.170.

Subd. 7. **Appropriation.** Each fiscal year, an amount necessary to make payments to health plan companies to defray the cost of providing coverage under this section is appropriated to the commissioner of commerce.

EFFECTIVE DATE. This section is effective January 1, 2026, and applies to all health plans offered, issued, or sold on or after that date.

Sec. 2. Minnesota Statutes 2024, section 256B.0625, is amended by adding a subdivision to read:

Subd. 77. **Bowel and bladder management for spinal cord injuries.** (a) Medical assistance covers bowel and bladder management for spinal cord injuries, as defined in section 62Q.6661.

(b) Medical assistance must meet the requirements that would otherwise apply to a health plan under section 62Q.6661, except that medical assistance is not required to comply with any provision of section 62Q.6661 if compliance with the provision would prevent the state from receiving federal financial participation for the coverage under this subdivision.

EFFECTIVE DATE. This section is effective January 1, 2026, or upon federal approval, whichever is later. The commissioner of human services shall notify the revisor of statutes when federal approval is obtained.

Sec. 3. **DEFRAYAL OF COSTS FOR MANDATED COVERAGE OF BOWEL AND BLADDER MANAGEMENT FOR SPINAL CORD INJURIES.**

(a) $..... in fiscal year 2026 and $..... in fiscal year 2027 are appropriated from the general fund to the commissioner of commerce for the estimated amount of defrayal costs for mandated coverage of bowel and bladder management for spinal cord injuries.

(b) $..... in fiscal year 2026 and $..... in fiscal year 2027 are appropriated from the general fund to the commissioner of commerce for administrative costs to implement mandated coverage of bowel and bladder management for spinal cord injuries.