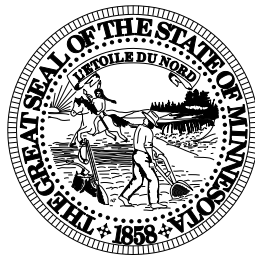


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**Minnesota
House of
Representatives**
Melissa Hortman, Speaker

FOR IMMEDIATE RELEASE

Date: Dec. 18, 2020
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New Laws Effective Jan. 1, 2021

The following is a list of select new laws passed during the 2020 regular and special legislative sessions that take effect Jan. 1, 2021. The asterisk following the bill number denotes the language that became law.

Summaries of all laws passed by the 2020 Legislature in regular and special sessions are available online from nonpartisan House Public Information Services at www.house.mn/newlaws/#/search/2020.

HEALTH AND HUMAN SERVICES

Continuity of care to be improved with changes to prior authorization requirements

A new law modifies statutes on health care services utilization and prior authorization requirements to modify timelines for determinations and appeals, provide for continuity of care and improve public access to information.

Sponsored by Rep. Kelly Morrison (DFL-Deephaven) and Sen. Julie Rosen (R-Vernon Center), the law is – except where otherwise noted – effective Jan. 1, 2021, and applies to health plans offered, sold, issued or renewed on or after that date.

Under the law, if a person switches health plan companies, their new provider will be required to comply with previous prior authorizations for health care services for the first 60 days after enrollment while a new utilization review is conducted. The enrollee, or a medical professional acting on their behalf, will be required to submit documentation to access this.

If a utilization review organization changes its coverage terms or clinical criteria during a plan year, those changes will not apply until the next year for any enrollee who received prior authorization for a health care service that would be affected, with some exceptions.

The law will also require utilization review organizations to submit their current requirements and restrictions for prior authorization determinations to the health plan companies for which they conduct reviews.

The health plan companies, in turn, will be required to post this information on their public websites in easy-to-understand language. Any changes to the prior authorization requirements will also need to be posted online.

In addition, health plan companies will be required to post certain data on their public websites, including the number of prior authorization requests for which an authorization was issued and the reasons for prior authorization denial. This will need to be available online by April 1, 2022, and updated by each following April 1.

The law will also:

- shorten the length of time available for determinations to be made regarding utilization review;
- require a report from the Department of Health, including data on prior authorization requests, by April 1, 2021;
- prohibit the revocation, limitation or restriction of a prior authorization that has been authorized except when there is evidence of fraud, misinformation or a conflict with state or federal law;
- require that new requirements or restrictions will need to be provided to any impacted Minnesota-based, in-network attending health care professionals at least 45 days before those changes will go into effect; and
- clarify and define terms and make a range of conforming changes.

This chapter of law will not apply to managed care plans or county-based purchasing plans providing coverage to state public health care program enrollees under Medical Assistance or MinnesotaCare.

HF3398/SF3204*/CH114

PUBLIC SAFETY

Submission and storing of restricted sexual assault examination kits

Part of the omnibus public finance, capital investment, taxes and supplemental budget law passed in October modifies how sexual assault examination kits are handled and stored.

Current law provides some discretion to law enforcement on submitting an unrestricted sexual assault examination kit — where the victim signs a release to permit forensic analysis — for forensic testing. Effective Jan. 1, 2021, that discretion is removed. The new law also requires the unrestricted kit to be retained indefinitely by the submitting agency once returned from the testing laboratory.

Additionally, the law will require a hospital preparing a restricted sexual assault examination kit or a law enforcement agency receiving a restricted sexual assault examination kit from a hospital to submit it to the Bureau of Criminal Apprehension within 60 days. The BCA will store all restricted kits collected in the state and must retain them for at least 30 months from the receiving date.

Because a restricted kit, by definition, is one where the victim doesn't want evidence in the kit analyzed, the kit is often destroyed by law enforcement at three or six months, depending on agency policies. Supporters say the extended time would give sexual assault victims a chance to change their mind about having a kit sent to a lab.

The law is sponsored by Rep. Mary Murphy (DFL-Hermantown) and Sen. David Senjem (R-Rochester); however, the provision was initially included in the regular session as HF2983, sponsored by Rep. Marion O'Neill (R-Maple Lake).

Special Session 5: SSHF1*/SSSF26/CH3