STATE OF MINNESOTA

NINETIETH SESSION — 2017

SEVENTH DAY

SAINT PAUL, MINNESOTA, THURSDAY, JANUARY 19, 2017

The House of Representatives convened at 3:30 p.m. and was called to order by Tony Albright, Speaker pro tempore.

Prayer was offered by Pastor Keith Kerstetter, Willmar Assembly of God, Willmar, Minnesota.

The members of the House gave the pledge of allegiance to the flag of the United States of America.

The roll was called and the following members were present:

Albright	Davnie	Hansen	Lesch	Nornes	Scott
Allen	Dean, M.	Hausman	Liebling	O'Driscoll	Slocum
Anderson, P.	Dehn, R.	Heintzeman	Lien	Olson	Smith
Anderson, S.	Dettmer	Hertaus	Lillie	Omar	Sundin
Anselmo	Drazkowski	Hilstrom	Loeffler	O'Neill	Swedzinski
Applebaum	Ecklund	Hoppe	Lohmer	Pelowski	Theis
Backer	Erickson	Hornstein	Loon	Peppin	Thissen
Baker	Fabian	Hortman	Loonan	Petersburg	Torkelson
Barr, R.	Fenton	Howe	Lucero	Peterson	Uglem
Becker-Finn	Fischer	Jessup	Lueck	Pierson	Vogel
Bennett	Flanagan	Johnson, B.	Marquart	Pinto	Wagenius
Bernardy	Franke	Johnson, C.	Masin	Poppe	Ward
Bliss	Franson	Johnson, S.	Maye Quade	Poston	West
Bly	Freiberg	Jurgens	McDonald	Pryor	Whelan
Carlson, A.	Garofalo	Kiel	Metsa	Quam	Youakim
Carlson, L.	Green	Knoblach	Miller	Rarick	Zerwas
Christensen	Grossell	Koegel	Moran	Rosenthal	Spk. Daudt
Clark	Gruenhagen	Koznick	Murphy, E.	Runbeck	
Considine	Gunther	Kresha	Murphy, M.	Sandstede	
Cornish	Haley	Kunesh-Podein	Nash	Sauke	
Daniels	Halverson	Layman	Nelson	Schomacker	
Davids	Hamilton	Lee	Newberger	Schultz	

A quorum was present.

Bahr, C.; Mahoney; Pugh; Urdahl and Wills were excused.

Mariani was excused until 4:45 p.m.

The Chief Clerk proceeded to read the Journal of the preceding day. There being no objection, further reading of the Journal was dispensed with and the Journal was approved as corrected by the Chief Clerk.

REPORTS OF STANDING COMMITTEES AND DIVISIONS

Torkelson from the Committee on Transportation Finance to which was referred:

H. F. No. 3, A bill for an act relating to transportation; authorizing and governing implementation of requirements of the federal REAL ID Act; amending certain requirements governing driver's licenses and Minnesota identification cards; amending imposition of certain fees; requiring legislative reporting; appropriating money; amending Minnesota Statutes 2016, sections 171.01, by adding subdivisions; 171.017; 171.04, by adding a subdivision; 171.06, subdivisions 1, 3, 4, 9a; 171.071, subdivision 3; 171.072; 171.12, by adding subdivisions; 171.27; proposing coding for new law in Minnesota Statutes, chapter 171; repealing Laws 2009, chapter 92, section 1, as amended.

Reported the same back with the following amendments:

Page 3, delete line 18

Page 5, after line 20, insert:

"Sec. 8. Minnesota Statutes 2016, section 171.06, subdivision 2, is amended to read:

Subd. 2. Fees. (a) The fees for a license and Minnesota identification card are as follows:

Classified Driver's License	D-\$17.25	C-\$21.25	B-\$28.25	A-\$36.25
Classified Under-21 D.L.	D-\$17.25	C-\$21.25	B-\$28.25	A-\$16.25
Enhanced Driver's License	D-\$32.25	C-\$36.25	B-\$43.25	A-\$51.25
Instruction Permit				\$5.25
Enhanced Instruction Permit				\$20.25
Commercial Learner's Permit				\$2.50
Provisional License				\$8.25
Enhanced Provisional License				\$23.25
Duplicate License or duplicate identification card				\$6.75
Enhanced Duplicate License or enhanced duplicate				
identification card				\$21.75
Minnesota identification card or Under-21 Minnesota				
identification card, other than duplicate, except as otherwise				
provided in section 171.07, subdivisions 3 and 3a				
Enhanced Minnesota identification card				

In addition to each fee required in this paragraph, the commissioner shall collect a surcharge of: (1) \$1.75 until June 30, 2012; and (2) \$1.00 from July 1, 2012, to June 30, 2016. Surcharges collected under this paragraph must be credited to the driver and vehicle services technology account in the special revenue fund under section 299A.705.

(b) Notwithstanding paragraph (a), an individual who holds a provisional license and has a driving record free of (1) convictions for a violation of section 169A.20, 169A.33, 169A.35, or sections 169A.50 to 169A.53, (2) convictions for crash-related moving violations, and (3) convictions for moving violations that are not crash related, shall have a \$3.50 credit toward the fee for any classified under-21 driver's license. "Moving violation" has the meaning given it in section 171.04, subdivision 1.

- (c) In addition to the driver's license fee required under paragraph (a), the commissioner shall collect an additional \$4 processing fee from each new applicant or individual renewing a license with a school bus endorsement to cover the costs for processing an applicant's initial and biennial physical examination certificate. The department shall not charge these applicants any other fee to receive or renew the endorsement.
- (d) In addition to the fee required under paragraph (a), a driver's license agent may charge and retain a filing fee as provided under section 171.061, subdivision 4.
- (e) In addition to the fee required under paragraph (a), the commissioner shall charge a filing fee at the same amount as a driver's license agent under section 171.061, subdivision 4. Revenue collected under this paragraph must be deposited in the driver services operating account.
- (f) An application for a Minnesota identification card, instruction permit, provisional license, or driver's license, including an application for renewal, must contain a provision that allows the applicant to add to the fee under paragraph (a), a \$2 donation for the purposes of public information and education on anatomical gifts under section 171.075.
- (g) The fees under paragraph (a) for a driver's license, instruction permit, provisional license, or Minnesota identification card are the same for a noncompliant license or identification card."

Page 6, line 18, delete "All" and delete "the" and insert a colon

Page 6, delete line 19

Page 6, line 20, delete everything after "and" and insert "any legal name change if applicable;"

Page 6, delete lines 21 to 24

Page 6, line 25, delete "(3)" and insert "(2)" and delete the period and insert "; and"

Page 6, after line 25, insert:

- "(3) for driver's licenses and Minnesota identification cards that meet all requirements of the REAL ID Act:
- (i) principal residence address in Minnesota, including application for a renewal or change of address, unless the applicant provides a designated address under section 5B.05; and
 - (ii) Social Security number, or related documentation as applicable."

Page 7, line 30, delete "distribution" and insert "availability"

Page 7, line 31, delete "to all" and insert "for" and delete everything after the period

Page 7, delete line 32 and insert "Renewal notifications mailed to license and identification card holders must include a department Web site address containing the summary information."

Page 8, line 1, delete "include" and insert ", at a minimum, identify"

Page 8, line 2, delete "a listing of"

Page 8, line 4, after the semicolon, insert "and"

Page 8, line 6, delete "; and" and insert a period

Page 8, delete lines 7 to 8

Page 8, line 20, delete the first "the" and insert "all"

Page 9, line 12, delete "or"

Page 9, line 14, delete the period and insert "; or"

Page 9, after line 14, insert:

"(11) a document issued by a federal agency that demonstrates the applicant's lawful status."

Page 11, delete subdivision 6 and insert:

"Subd. 6. Exceptions process. (a) The commissioner may grant a variance from the requirements of this section as provided under Minnesota Rules, part 7410.0600, or successor rules, for evidence of:

- (1) identity or date of birth under subdivision 2;
- (2) lawful status under subdivision 3, only for demonstration of United States citizenship;
- (3) Social Security number under subdivision 4; and
- (4) residence in Minnesota under subdivision 5.
- (b) The commissioner must not grant a variance for an applicant having a lawful temporary admission period."

Page 12, line 15, after "(e)" insert "Except for an enhanced driver's license or a noncompliant license,"

Page 12, line 19, after the semicolon, insert "and"

Page 12, line 20, delete "; and" and insert a period

Page 12, delete line 21

Page 13, line 20, after "(e)" insert "Except for an enhanced identification card or a noncompliant identification card,"

Page 13, line 24, after the semicolon, insert "and"

Page 13, line 25, delete "; and" and insert a period

Page 13, delete line 26

Page 19, line 6, delete "January" and insert "October" and after the period, insert "The commissioner shall submit a notification of the specific full compliance implementation date to: the chairs and ranking minority members of the legislative committees with jurisdiction over transportation policy and finance, public safety, and data practices; the revisor of statutes; and the Legislative Commission on Data Practices and Personal Data Privacy."

Page 20, line 25, delete "21" and insert "22"

Page 20, line 26, delete "January 1, 2018" and insert "the full compliance implementation date under section 22, subdivision 2."

Renumber the sections in sequence

Correct the title numbers accordingly

With the recommendation that when so amended the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Hoppe from the Committee on Commerce and Regulatory Reform to which was referred:

H. F. No. 30, A bill for an act relating to liquor; permitting off-sale intoxicating liquor sales on Sunday; amending Minnesota Statutes 2016, section 340A.504, subdivision 4.

Reported the same back with the following amendments:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 2016, section 340A.504, subdivision 4, is amended to read:

Subd. 4. Intoxicating liquor; off-sale. (a) No sale of intoxicating liquor may be made by an off-sale licensee:

- (1) on Sundays before 10:00 a.m. or after 6:00 p.m. on a Sunday;
- (2) before 8:00 a.m. or after 10:00 p.m. on Monday through Saturday;
- (3) on Thanksgiving Day;
- (4) on Christmas Day, December 25; or
- (5) after 8:00 p.m. on Christmas Eve, December 24.
- (b) No delivery of alcohol to an off-sale retailer may be made by a carrier or accepted by the retailer on a Sunday.

EFFECTIVE DATE. This section is effective July 1, 2017."

With the recommendation that when so amended the bill be placed on the General Register.

The report was adopted.

Hoppe from the Committee on Commerce and Regulatory Reform to which was referred:

H. F. No. 68, A bill for an act relating to liquor; creating labeling requirements for 3.2 percent malt liquor; amending Minnesota Statutes 2016, section 340A.301, by adding a subdivision.

Reported the same back with the recommendation that the bill be placed on the General Register.

The report was adopted.

Garofalo from the Committee on Job Growth and Energy Affordability Policy and Finance to which was referred:

H. F. No. 113, A bill for an act relating to energy; authorizing construction and operation of a natural gas combined cycle electric generation plant.

Reported the same back with the following amendments:

Page 1, line 7, before "Notwithstanding" insert "(a)"

Page 1, line 10, delete "15-21" and insert "E-002/RP-15-21"

Page 1, line 11, delete "August" and insert "January 1, 2018."

Page 1, after line 11, insert:

"(b) The commission must approve recovery of reasonably and prudently incurred costs associated with the construction and operation of a plant under this section as provided under Minnesota Statutes, section 216B.16.

(c) No less than 20 months prior to the start of construction, a public utility may file with the commission an independent evaluation of the utility's forecasted costs for a plant under this section, and may request that the commission establish a sliding scale rate of return mechanism of no more than 25 basis points above or below the most recently authorized rate of return on equity for the capital investment under this section, in order to provide an incentive for the utility to complete the project at or under the forecasted costs."

Page 1, delete lines 12 to 14

With the recommendation that when so amended the bill be placed on the General Register.

The report was adopted.

Garofalo from the Committee on Job Growth and Energy Affordability Policy and Finance to which was referred:

H. F. No. 234, A bill for an act relating to energy; amending Public Utilities Commission regulation of municipal electric utilities and rural electric cooperatives; amending Minnesota Statutes 2016, section 216B.164, subdivisions 5, 9, by adding a subdivision.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Garofalo from the Committee on Job Growth and Energy Affordability Policy and Finance to which was referred:

H. F. No. 235, A bill for an act relating to energy; renaming and repurposing the renewable development account; terminating certain solar energy incentives; appropriating money; amending Minnesota Statutes 2016, sections 16B.323; 116C.779, subdivision 1; 116C.7792; 216C.41, subdivisions 2, 5a; proposing coding for new law in Minnesota Statutes, chapter 216C; repealing Minnesota Statutes 2016, sections 116C.779, subdivision 3; 174.187; 216C.411; 216C.412; 216C.413; 216C.414; 216C.415; 216C.416.

Reported the same back with the following amendments:

Page 7, line 9, after "of" insert "Minnesota Statutes 2016,"

Page 8, after line 13, insert:

"(c) Laws 2013, chapter 85, article 6, section 11, is repealed."

Correct the title numbers accordingly

With the recommendation that when so amended the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

SECOND READING OF HOUSE BILLS

H. F. Nos. 30, 68 and 113 were read for the second time.

INTRODUCTION AND FIRST READING OF HOUSE BILLS

The following House Files were introduced:

Zerwas; Cornish; Bahr, C.; Fabian; Daudt; Baker; Nash; Drazkowski; McDonald; Pugh; O'Neill; Johnson, B.; Uglem; Franke; Runbeck; Lohmer; Howe; Miller; Theis; Franson; Rarick; Dettmer and Dean, M., introduced:

H. F. No. 322, A bill for an act relating to public safety; authorizing governmental units to sue to recover for the public safety response costs related to unlawful assemblies and public nuisances; proposing coding for new law in Minnesota Statutes, chapter 609.

The bill was read for the first time and referred to the Committee on Civil Law and Data Practices Policy.

Howe introduced:

H. F. No. 323, A bill for an act relating to transportation; governing transportation finance; proposing a constitutional amendment to the Minnesota Constitution, article XIV, to allocate state tax revenue related to motor vehicle repair or maintenance exclusively to fund roads; amending Minnesota Statutes 2016, section 297A.94.

The bill was read for the first time and referred to the Committee on Transportation Finance.

Backer introduced:

H. F. No. 324, A bill for an act relating to health occupations; providing an interstate compact for the recognition of emergency medical services personnel licensure; proposing coding for new law in Minnesota Statutes, chapter 144E.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Nornes introduced:

H. F. No. 325, A bill for an act relating to capital investment; appropriating money for a grant to the city of Parkers Prairie for swimming pool renovations; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Howe introduced:

H. F. No. 326, A bill for an act relating to transportation; designating a segment of marked Trunk Highway 23 in the city and town of Paynesville as Medal of Honor recipient Kenneth L. Olson Highway; amending Minnesota Statutes 2016, section 161.14, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Transportation and Regional Governance Policy.

Zerwas introduced:

H. F. No. 327, A bill for an act relating to workers' compensation; modifying occupational disease provisions; amending Minnesota Statutes 2016, section 176.011, subdivision 15.

The bill was read for the first time and referred to the Committee on Commerce and Regulatory Reform.

Anderson, S., introduced:

H. F. No. 328, A bill for an act relating to taxation; individual income; providing for a maximum rate of 7.85 percent on active trade or business income; amending Minnesota Statutes 2016, sections 290.06, subdivisions 2c, 2d; 290.0675, subdivisions 1, 3.

The bill was read for the first time and referred to the Committee on Taxes.

Rarick, Smith, Daudt, Theis, Pierson, Loonan, Swedzinski, Sundin, Considine, Ecklund, Daniels, Christensen, McDonald, Hamilton, Poston, Cornish, Lucero, Franson and Garofalo introduced:

H. F. No. 329, A bill for an act relating to public safety; regulating the manufacture, sale, and use of fireworks; dedicating a portion of revenues from the sale of certain fireworks for public safety purposes; providing for a new account in the state treasury; amending Minnesota Statutes 2016, sections 297A.94; 624.20, subdivision 1; proposing coding for new law in Minnesota Statutes, chapter 88.

The bill was read for the first time and referred to the Committee on Public Safety and Security Policy and Finance.

Nash, Nelson, Lesch and Quam introduced:

H. F. No. 330, A bill for an act relating to local government; requiring a two-thirds vote to impose an interim ordinance; requiring a public hearing after ten-day notice before imposing an interim ordinance relating to housing; amending Minnesota Statutes 2016, section 462.355, subdivision 4.

The bill was read for the first time and referred to the Committee on Government Operations and Elections Policy.

Anderson, P.; Johnson, C., and Backer introduced:

H. F. No. 331, A bill for an act relating to agriculture; decreasing the administration and promotion allowance for the tractor rollover protection pilot grant program; appropriating money for tractor rollover protection grants; amending Minnesota Statutes 2016, section 17.119, subdivision 2.

The bill was read for the first time and referred to the Committee on Agriculture Finance.

Miller; Johnson, C.; Torkelson; Gunther; Urdahl; Gruenhagen and Backer introduced:

H. F. No. 332, A bill for an act relating to natural resources; requiring an agreement with the city of Fairfax to operate Fort Ridgely State Park Golf Course.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Johnson, C., introduced:

H. F. No. 333, A bill for an act relating to game and fish; modifying resident licensing requirements; amending Minnesota Statutes 2016, section 97A.405, subdivision 5.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Zerwas and Dean, M., introduced:

H. F. No. 334, A bill for an act relating to health; repealing the Minnesota Radon Licensing Act; repealing Minnesota Statutes 2016, section 144.4961.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Layman and Bliss introduced:

H. F. No. 335, A bill for an act relating to capital investment; appropriating money to cover cost overruns for the Myles Reif Center for the Performing Arts project in Grand Rapids.

The bill was read for the first time and referred to the Committee on Education Finance.

Ecklund introduced:

H. F. No. 336, A bill for an act relating to capital investment; appropriating money for a Black Beach campground in Silver Bay; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Ecklund introduced:

H. F. No. 337, A bill for an act relating to capital investment; appropriating money for a wastewater collection and treatment facility in Silver Creek Township; authorizing the issuance of state bonds.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Green, McDonald, Ecklund and Swedzinski introduced:

H. F. No. 338, A bill for an act relating to natural resources; establishing alternative wetland mitigation options in greater than 80 percent areas; authorizing rulemaking; amending Minnesota Statutes 2016, section 103G.222, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Knoblach, Urdahl and Theis introduced:

H. F. No. 339, A bill for an act relating to capital investment; appropriating money for St. Cloud State University; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Higher Education and Career Readiness Policy and Finance.

Slocum introduced:

H. F. No. 340, A bill for an act relating to transportation; amending prohibition governing use of wireless communications device; amending Minnesota Statutes 2016, section 169.475, subdivisions 2, 3.

The bill was read for the first time and referred to the Committee on Transportation and Regional Governance Policy.

Thissen introduced:

H. F. No. 341, A bill for an act relating to education; pursuing strategies to prevent over-enrolling minority students and English learners in special education, dismissing more minority students than other students with disabilities, or placing more minority students than other students in settings other than general education classrooms; emphasizing cultural competency; amending Minnesota Statutes 2016, sections 120B.12, subdivision 1; 121A.55; 122A.06, subdivision 4; 125A.08; 125A.56.

The bill was read for the first time and referred to the Committee on Education Innovation Policy.

Metsa introduced:

H. F. No. 342, A bill for an act relating to taxation; minerals; adding six unorganized territories to certain distributions of the production tax on taconite; amending Minnesota Statutes 2016, section 298.28, subdivision 3.

The bill was read for the first time and referred to the Committee on Taxes.

Metsa introduced:

H. F. No. 343, A bill for an act relating to capital investment; appropriating money to renovate the Miner's Memorial Building; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Davnie and Freiberg introduced:

H. F. No. 344, A bill for an act relating to education; modifying the calculation of special education aid; increasing school district basic revenue; indexing basic revenue to inflation; authorizing a school district to renew an expiring referendum by action of the school board; appropriating money; amending Minnesota Statutes 2016, sections 125A.76, subdivisions 1, 2c; 125A.79, subdivision 5; 126C.10, subdivision 2; 126C.17, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Education Finance.

Zerwas, Theis, McDonald and Fenton introduced:

H. F. No. 345, A bill for an act relating to health; creating the Palliative Care Advisory Committee; proposing coding for new law in Minnesota Statutes, chapter 144.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Cornish introduced:

H. F. No. 346, A bill for an act relating to public safety; requiring peace officers to receive training in crisis response, conflict management, and cultural diversity; reforming and increasing funding for peace officer training reimbursement; providing reimbursement grants for pathway to policing programs; authorizing the Peace Officer Standards and Training Board to collect peace officer race data for a limited purpose; appropriating money; amending Minnesota Statutes 2016, sections 171.20, subdivision 4; 357.021, subdivision 7; 363A.08, subdivision 4; 626.8432, subdivision 1; 626.845, subdivision 1; proposing coding for new law in Minnesota Statutes, chapter 626.

The bill was read for the first time and referred to the Committee on Public Safety and Security Policy and Finance.

Koznick, Metsa, Schultz and Runbeck introduced:

H. F. No. 347, A bill for an act relating to motor vehicles; regulating transfers of manufactured homes when ownership is at issue; proposing coding for new law in Minnesota Statutes, chapter 168A.

The bill was read for the first time and referred to the Committee on Transportation and Regional Governance Policy.

Hornstein, Pinto, Allen and Lien introduced:

H. F. No. 348, A bill for an act relating to taxation; corporate franchise; expanding the definition of domestic corporations to include certain foreign corporations incorporated in tax havens; amending Minnesota Statutes 2016, sections 290.01, subdivision 5, by adding a subdivision; 290.17, subdivision 4.

The bill was read for the first time and referred to the Committee on Taxes.

McDonald and Bahr, C., introduced:

H. F. No. 349, A bill for an act relating to taxation; sales and use; repealing the tax on digital products; amending Minnesota Statutes 2016, sections 297A.61, subdivisions 3, 4, 38; 297A.668, subdivisions 1, 2, 6a, 7; 297A.669, subdivision 14a; repealing Minnesota Statutes 2016, section 297A.61, subdivisions 50, 51, 52, 53, 54, 55, 56.

The bill was read for the first time and referred to the Committee on Taxes.

Liebling introduced:

H. F. No. 350, A bill for an act relating to education finance; modifying the count of pupil units for purposes of calculating charter school lease aid to include a pupil's time spent in PSEO courses; appropriating money; amending Minnesota Statutes 2016, section 124E.22.

The bill was read for the first time and referred to the Committee on Education Finance.

Hertaus, Davids, McDonald, Uglem, Hoppe, Albright, Peterson, Slocum, Zerwas and Loeffler introduced:

H. F. No. 351, A bill for an act relating to taxation; gross revenues and gross receipts; exempting certain supplemental payments from gross revenues that are subject to the provider tax; amending Minnesota Statutes 2016, section 295.53, subdivision 1.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Rosenthal, Cornish and Hilstrom introduced:

H. F. No. 352, A bill for an act relating to public safety; appropriating funds to the commissioner of public safety to process controlled substance evidence submitted to the state's crime laboratories for chemical testing in a timely manner.

The bill was read for the first time and referred to the Committee on Public Safety and Security Policy and Finance.

Cornish introduced:

H. F. No. 353, A bill for an act relating to capital investment; appropriating money for street and sewer improvements in the city of Waldorf; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Fabian, Urdahl, Heintzeman, Fenton, Backer, Schultz, Miller and Nornes introduced:

H. F. No. 354, A bill for an act relating to health; establishing a waiver dispute process for waiver requests requested by health carriers or preferred provider organizations on provider geographic accessibility requirements; amending Minnesota Statutes 2016, section 62K.10, subdivision 5.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Wagenius; Murphy, E.; Maye Quade; Lee and Liebling introduced:

H. F. No. 355, A bill for an act relating to health; lowering the blood lead level that constitutes an elevated blood lead level in the Lead Poisoning Prevention Act; amending Minnesota Statutes 2016, section 144,9501, subdivision 9.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Moran introduced:

H. F. No. 356, A resolution relating to ratification of the proposed Equal Rights Amendment to the United States Constitution; memorializing Congress to remove the deadline for ratification of the amendment by the states.

The bill was read for the first time and referred to the Committee on Civil Law and Data Practices Policy.

Allen, Hornstein, Mariani, Liebling and Halverson introduced:

H. F. No. 357, A bill for an act relating to human services; expanding general assistance eligibility; amending Minnesota Statutes 2016, sections 256D.01, subdivision 1a; 256D.05, subdivision 1.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Bly; Koegel; Clark; Dehn, R.; Ward; Allen; Lee; Sundin; Ecklund; Nelson; Hausman; Carlson, L.; Bernardy; Omar; Moran; Wagenius; Schultz; Mahoney; Flanagan; Hansen; Freiberg; Olson; Considine; Lien; Slocum; Liebling; Lesch; Pinto; Fischer; Masin; Lillie; Johnson, C.; Mariani; Davnie and Hornstein introduced:

H. F. No. 358, A bill for an act relating to health; guaranteeing that health care is available and affordable for every Minnesotan; establishing the Minnesota Health Plan, Minnesota Health Board, Minnesota Health Fund, Office of Health Quality and Planning, ombudsman for patient advocacy, and auditor general for the Minnesota Health Plan; requesting a 1332 waiver; authorizing rulemaking; appropriating money; amending Minnesota Statutes 2016, sections 13.3806, by adding a subdivision; 14.03, subdivisions 2, 3; 15A.0815, subdivision 2; proposing coding for new law as Minnesota Statutes, chapter 62W.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Lucero, Garofalo and O'Neill introduced:

H. F. No. 359, A bill for an act relating to energy; abolishing prohibition on issuing certificate of need for new nuclear power plant; amending Minnesota Statutes 2016, section 216B.243, subdivision 3b.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Murphy, M.; Schultz and Olson introduced:

H. F. No. 360, A bill for an act relating to capital investment; appropriating money for Minneapolis to Duluth high-speed passenger rail; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Transportation Finance.

Nelson introduced:

H. F. No. 361, A bill for an act relating to employment; requiring the payout of earned paid time off at separation from employment; amending Minnesota Statutes 2016, section 181.171, by adding subdivisions.

The bill was read for the first time and referred to the Committee on Commerce and Regulatory Reform.

Murphy, M.; Olson and Schultz introduced:

H. F. No. 362, A bill for an act relating to capital investment; appropriating money for capital improvements to the Duluth airports.

The bill was read for the first time and referred to the Committee on Transportation Finance.

Davids, Ecklund, Metsa, Sundin, Knoblach, Layman, Franke and Murphy, E., introduced:

H. F. No. 363, A bill for an act relating to taxation; sales and use; providing an exemption for building materials purchased by nonprofit snowmobile clubs; amending Minnesota Statutes 2016, section 297A.71, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Dettmer, Lillie and Fenton introduced:

H. F. No. 364, A bill for an act relating to state lands; authorizing sale of certain state lands.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Applebaum introduced:

H. F. No. 365, A bill for an act relating to taxation; individual income; allowing a refundable student loan credit; proposing coding for new law in Minnesota Statutes, chapter 290.

The bill was read for the first time and referred to the Committee on Higher Education and Career Readiness Policy and Finance.

Hansen, Bly and Davids introduced:

H. F. No. 366, A bill for an act relating to game and fish; prohibiting use of unmanned aircraft systems to take, harm, or harass wild animals; proposing coding for new law in Minnesota Statutes, chapter 97A.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Bliss and Layman introduced:

H. F. No. 367, A bill for an act relating to capital investment; appropriating money for a bridge over the Popple River in Itasca County; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Bliss, Howe and Poston introduced:

H. F. No. 368, A bill for an act relating to consumer protection; prohibiting the assignment of military pay or benefits; providing penalties and remedies; proposing coding for new law in Minnesota Statutes, chapter 325F.

The bill was read for the first time and referred to the Veterans Affairs Division.

Theis; Mahoney; Gunther; Swedzinski; Clark; O'Driscoll; Johnson, C.; Considine; Lien and Knoblach introduced:

H. F. No. 369, A bill for an act relating to vocational rehabilitation; appropriating money for centers for independent living.

The bill was read for the first time and referred to the Committee on Job Growth and Energy Affordability Policy and Finance.

Marquart introduced:

H. F. No. 370, A bill for an act relating to capital investment; appropriating money for flood hazard mitigation grants; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Fenton, Lillie and Dean, M., introduced:

H. F. No. 371, A bill for an act relating to counties; allowing a county board to temporarily fill a county commissioner vacancy by appointment in certain circumstances; amending Minnesota Statutes 2016, section 375.101, subdivision 1.

The bill was read for the first time and referred to the Committee on Government Operations and Elections Policy.

Nash and Slocum introduced:

H. F. No. 372, A bill for an act relating to solid waste; prohibiting incentives for specified methods of collection or recycling; amending Minnesota Statutes 2016, section 115A.94, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy and Finance.

Howe and Slocum introduced:

H. F. No. 373, A bill for an act relating to motor vehicles; providing rebates for natural gas vehicles and fueling stations; establishing a rebate program with the Department of Commerce; appropriating money.

The bill was read for the first time and referred to the Committee on Transportation and Regional Governance Policy.

Swedzinski introduced:

H. F. No. 374, A bill for an act relating to the city of Canby; allowing creation of a special tax increment financing district.

The bill was read for the first time and referred to the Committee on Taxes.

Swedzinski introduced:

H. F. No. 375, A bill for an act relating to local government; allowing a county board to appropriate money for a veterans memorial anywhere in the county; amending Minnesota Statutes 2016, section 375.18, subdivision 10.

The bill was read for the first time and referred to the Veterans Affairs Division.

Swedzinski introduced:

H. F. No. 376, A bill for an act relating to education; creating choice scholarships for students who have dropped out of high school; authorizing rulemaking; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 124D.

The bill was read for the first time and referred to the Committee on Education Innovation Policy.

Thissen introduced:

H. F. No. 377, A bill for an act relating to commerce; regulating franchises; prohibiting disclaimers of violations; regulating renewals; amending Minnesota Statutes 2016, sections 80C.13, subdivision 2; 80C.14, subdivisions 2, 3, 4, by adding a subdivision; 80C.17, subdivision 5; 80C.21.

The bill was read for the first time and referred to the Committee on Commerce and Regulatory Reform.

Swedzinski introduced:

H. F. No. 378, A bill for an act relating to capital investment; appropriating money for the Agricultural Utilization Research Institute upgrades.

The bill was read for the first time and referred to the Committee on Agriculture Finance.

Swedzinski introduced:

H. F. No. 379, A bill for an act relating to education finance; authorizing additional school employees to participate in Southwest Minnesota State University's special education teacher education program; extending an appropriation; amending Laws 2016, chapter 189, article 25, section 62, subdivision 17.

The bill was read for the first time and referred to the Committee on Education Innovation Policy.

Urdahl and Erickson introduced:

H. F. No. 380, A bill for an act relating to transportation; increasing fines for certain traffic violations around school buses; requiring violator to attend driver improvement clinic; amending Minnesota Statutes 2016, section 169.444, subdivision 2.

The bill was read for the first time and referred to the Committee on Transportation and Regional Governance Policy.

Petersburg and Davids introduced:

H. F. No. 381, A bill for an act relating to taxation; sales and use; clarifying exemption on nonprofit tickets or admissions; amending Minnesota Statutes 2016, section 297A.70, subdivision 10.

The bill was read for the first time and referred to the Committee on Taxes.

Liebling; Schultz; Murphy, E.; Sauke; Lien; Fischer; Considine; Loeffler and Allen introduced:

H. F. No. 382, A bill for an act relating to human services; establishing network access standards based on appointment wait times for managed care and county-based purchasing plans; amending Minnesota Statutes 2016, section 256B.69, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Health and Human Services Reform.

Bernardy introduced:

H. F. No. 383, A bill for an act relating to transportation; appropriating money for a Rice Creek Regional Trail crossing on Silver Lake Road in New Brighton.

The bill was read for the first time and referred to the Committee on Transportation Finance.

Bernardy introduced:

H. F. No. 384, A bill for an act relating to elections; providing for early voting; appropriating money; amending Minnesota Statutes 2016, sections 201.022, subdivision 1; 203B.001; 203B.01, by adding a subdivision; 203B.03, subdivision 1; 203B.05, subdivision 1; 203B.081, subdivision 2; 203B.085; 203B.121, subdivisions 1, 3, 4, 5, by adding a subdivision; 204B.28, subdivision 2; 206.82, subdivision 1; 206.83; proposing coding for new law in Minnesota Statutes, chapter 203B; repealing Minnesota Statutes 2016, section 203B.081, subdivision 3.

The bill was read for the first time and referred to the Committee on Government Operations and Elections Policy.

Lucero, Knoblach, O'Neill, McDonald, Theis, Howe and Newberger introduced:

H. F. No. 385, A bill for an act relating to transportation; appropriating money for lane expansion of marked Interstate Highway 94 and replacement of black iron overpasses in Wright County; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Transportation Finance.

MESSAGES FROM THE SENATE

The following messages were received from the Senate:

Mr. Speaker:

I have the honor to inform the House of Representatives that the Senate is ready to meet with the House in Joint Convention at 6:45 p.m., Monday, January 23, 2017 to receive the message of the Honorable Mark Dayton, Governor of the State of Minnesota, which will be delivered at 7:00 p.m.

CAL R. LUDEMAN, Secretary of the Senate

Mr. Speaker:

I have the honor to announce that the Senate has appointed a committee of five members of the Senate to act with a like committee on the part of the House of Representatives to escort the Honorable Mark Dayton, Governor of the State of Minnesota, to the House Chamber on the occasion of the Joint Convention on Monday, January 23, 2017, at 7:00 p.m.

Senators Anderson, P.; Klein; Little; Ruud and Utke have been appointed as members of such committee on the part of the Senate.

CAL R. LUDEMAN, Secretary of the Senate

ANNOUNCEMENT BY THE SPEAKER

The Speaker announced the appointment of the following members of the House to the committee to escort the Governor to the Joint Convention on Monday, January 23, 2017:

Jessup, Layman, Anselmo, Sauke and Flanagan.

REPORT FROM THE COMMITTEE ON RULES AND LEGISLATIVE ADMINISTRATION

Peppin from the Committee on Rules and Legislative Administration, pursuant to rules 1.21 and 3.33, designated the following bill to be placed on the Calendar for the Day for Thursday, January 19, 2017 and established a prefiling requirement for amendments offered to the following bill:

S. F. No. 1.

Peppin moved that the House recess subject to the call of the Chair. The motion prevailed.

RECESS

RECONVENED

The House reconvened and was called to order by the Speaker.

CALENDAR FOR THE DAY

S. F. No. 1 was reported to the House.

Hoppe moved to amend S. F. No. 1, the second engrossment, as follows:

Delete everything after the enacting clause and insert the following language of H. F. No. 1, the first engrossment:

"ARTICLE 1 PREMIUM ASSISTANCE

Section 1. PREMIUM ASSISTANCE PROGRAM ESTABLISHED.

The commissioner of Minnesota Management and Budget, in consultation with the commissioner of commerce and the commissioner of revenue, shall establish and administer a premium assistance program to help eligible individuals pay expenses for qualified health coverage in 2017.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 2. **DEFINITIONS.**

<u>Subdivision 1.</u> <u>Scope.</u> For purposes of sections 1 to 5, the following terms have the meanings given, unless the <u>context clearly indicates otherwise.</u>

- Subd. 2. Commissioner. "Commissioner" means the commissioner of Minnesota Management and Budget.
- Subd. 3. Eligible individual. "Eligible individual" means an individual who:
- (1) is a resident of Minnesota;
- (2) purchased qualified health coverage for calendar year 2017;
- (3) meets the income eligibility requirements under section 3, subdivision 3;
- (4) is not receiving a premium assistance credit under section 36B of the Internal Revenue Code for calendar year 2017; and

- (5) is approved by the commissioner as qualifying for premium assistance.
- Subd. 4. Health plan. "Health plan" has the meaning provided in Minnesota Statutes, section 62A.011, subdivision 3.
- Subd. 5. Health plan company. "Health plan company" means a health carrier, as defined in Minnesota Statutes, section 62A.011, subdivision 2, that provides qualified health coverage in the individual market through MNsure or outside of MNsure to Minnesota resident individuals in 2017.
- <u>Subd. 6.</u> <u>Individual market.</u> "Individual market" means the individual market as defined in Minnesota Statutes, section 62A.011, subdivision 5.
- <u>Subd. 7.</u> <u>Internal Revenue Code.</u> "Internal Revenue Code" means the Internal Revenue Code as amended through December 31, 2016.
- Subd. 8. Modified adjusted gross income. "Modified adjusted gross income" means the modified adjusted gross income for taxable year 2016, as defined in section 36B(d)(2)(B) of the Internal Revenue Code.
- Subd. 9. Premium assistance. "Premium assistance," "assistance amount," or "assistance" means the amount allowed to an eligible individual as determined by the commissioner under section 3 as a percentage of the qualified premium.
 - Subd. 10. **Program.** "Program" means the premium assistance program established under section 1.
- Subd. 11. **Qualified health coverage.** "Qualified health coverage" means an individual health plan, as defined under section 62A.011, subdivision 4, that is:
 - (1) not a grandfathered plan, as defined under section 62A.011, subdivision 1b; and
 - (2) provided by a health plan company through MNsure or outside of MNsure.
- Subd. 12. **Qualified premium.** "Qualified premium" means the premium for qualified health coverage purchased by an eligible individual.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 3. **PREMIUM ASSISTANCE AMOUNT.**

Subdivision 1. Applications by individuals; notification of eligibility. (a) An eligible individual may apply to the commissioner to receive premium assistance under this section at any time after purchase of qualified health coverage, but no later than January 31, 2018. The commissioner shall prescribe the manner and form for applications, including requiring any information the commissioner considers necessary or useful in determining whether an applicant is eligible and the assistance amount allowed to the individual under this section. The application must include a Tennessen warning as provided in Minnesota Statutes, section 13.04, subdivision 2. The commissioner shall make application forms available on the agency's Web site.

(b) The commissioner shall notify applicants of their eligibility status under the program, including, for applicants determined to be eligible, their premium assistance amount.

- Subd. 2. <u>Health plan companies.</u> (a) Through June 30, 2018, each health plan company shall provide to the commissioner, by the first of each month and any other times the commissioner requires, an effectuated coverage list with the following information for each individual for whom it provides qualified health coverage:
- (1) name, address, and age of each individual covered by the health plan, and any other identifying information that the commissioner determines appropriate to administer the program;
 - (2) the qualified premium for the coverage;
 - (3) whether the coverage is individual or family coverage; and
- (4) whether the individual is receiving advance payment of the credit under section 36B of the Internal Revenue Code, as reported to the health plan company by MNsure.
- (b) A health plan company must notify the commissioner of coverage terminations of eligible individuals within ten business days of MNsure reporting the coverage termination to the health plan company for qualified health coverage purchased through MNsure and within ten business days of the health plan company terminating enrollee coverage, for qualified health coverage purchased outside of MNsure.
- (c) Each health plan company shall make the application forms developed by the commissioner under subdivision 1 available on the company's Web site, and shall include application forms with premium notices for individual health coverage.
- Subd. 3. Income eligibility rules. (a) Individuals with incomes that meet the requirements of this subdivision satisfy the income eligibility requirements for the program. For purposes of this subdivision, "poverty line" has the meaning used in section 36B of the Internal Revenue Code, except that modified adjusted gross income, as reported on the individual's federal income tax return for tax year 2016, must be used instead of household income. For married separate filers claiming eligibility for family coverage, modified adjusted gross income equals the sum of that income reported by both spouses on their returns.
- (b) Individuals are eligible for premium assistance if their modified adjusted gross income is greater than 300 percent but does not exceed 800 percent of the poverty line.
- Subd. 4. <u>Determination of assistance amounts.</u> (a) For the period January 1, 2017, through December 31, 2017, eligible individuals qualify for premium assistance equal to 25 percent of the qualified premium for effectuated coverage.
- (b) The commissioner shall determine premium assistance amounts as provided under this subdivision so that the estimated sum of all premium assistance for eligible individuals does not exceed the appropriation for this purpose. The commissioner may adjust premium assistance amounts using a sliding scale based on income, if this is necessary to remain within the limits of the appropriation.
- Subd. 5. Provision of premium assistance to eligible individuals. (a) The commissioner shall provide the premium assistance amount calculated under subdivision 4 on a monthly basis to each eligible individual. The commissioner shall provide each eligible individual with the option of receiving premium assistance through direct deposit to a financial institution.
- (b) If the commissioner, for administrative reasons, is unable to provide an eligible individual with the premium assistance owed for one or more months for which the eligible individual had effectuated coverage, the commissioner shall include the premium assistance owed for that period with the premium assistance payment for the first month for which the commissioner is able to provide premium assistance in a timely manner.

- (c) The commissioner may require an eligible individual to provide any documentation and substantiation of payment of the qualified premium that the commissioner considers appropriate.
- <u>Subd. 6.</u> <u>Contracting.</u> The commissioner may contract with a third-party administrator to determine eligibility for and administer premium assistance under this section.
- Subd. 7. **Verification.** The commissioner shall verify that persons applying for premium assistance are residents of Minnesota. The commissioner may access information from the Department of Employment and Economic Development and the Minnesota Department of Revenue when verifying residency.
- <u>Subd. 8.</u> <u>Data practices.</u> (a) Information provided to the commissioner under subdivisions 1 and 2 is private data on individuals as defined in Minnesota Statutes, section 13.02, subdivision 12.
- (b) Notwithstanding the commissioner's retention schedule, the commissioner must destroy data provided under subdivision 2 on June 30, 2018.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 4. AUDIT AND PROGRAM INTEGRITY.

Subdivision 1. Audit. The legislative auditor shall audit implementation of the premium assistance program by the commissioner to determine whether premium assistance payments align with the criteria established in sections 2 and 3. The legislative auditor shall present a report summarizing findings of the audit to the legislative committees with jurisdiction over insurance and health by June 1, 2018.

Subd. 2. **Program integrity.** The commissioner of revenue shall ensure that only eligible individuals, as defined in section 2, subdivision 3, have received premium assistance. The commissioner of revenue shall review information available from Minnesota Management and Budget, the Department of Human Services, MNsure, and the most recent Minnesota tax records to identify ineligible individuals who received premium assistance. The commissioner of revenue shall recover the amount of any premium assistance paid on behalf of an ineligible individual from the ineligible individual, in the manner provided by law for the collection of unpaid taxes or erroneously paid refunds of taxes.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 5. TRANSFER.

\$300,157,000 in fiscal year 2017 is transferred from the budget reserve account in Minnesota Statutes, section 16A.152, subdivision 1a, to the general fund.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 6. APPROPRIATIONS.

(a) \$285,000,000 in fiscal year 2017 is appropriated from the general fund to the commissioner of Minnesota Management and Budget for purposes of providing premium assistance under section 3. No more than three percent of this appropriation is available to the commissioner for administrative costs. This is a onetime appropriation and is available until June 30, 2018. Any funds remaining from this appropriation on June 30, 2018, cancel to the budget reserve account in Minnesota Statutes, section 16A.152, subdivision 1a.

(b) \$157,000 in fiscal year 2017 is appropriated from the general fund to the legislative auditor to conduct the audit required by section 4. This is a onetime appropriation and is available until June 30, 2018. Any funds remaining from this appropriation on June 30, 2018, cancel to the budget reserve account in Minnesota Statutes, section 16A.152, subdivision 1a.

EFFECTIVE DATE. This section is effective the day following final enactment.

ARTICLE 2 INSURANCE MARKET REFORMS

- Section 1. Minnesota Statutes 2016, section 60A.08, subdivision 15, is amended to read:
- Subd. 15. **Classification of insurance filings data.** (a) All forms, rates, and related information filed with the commissioner under section 61A.02 shall be nonpublic data until the filing becomes effective.
- (b) All forms, rates, and related information filed with the commissioner under section 62A.02 shall be nonpublic data until the filing becomes effective.
- (c) All forms, rates, and related information filed with the commissioner under section 62C.14, subdivision 10, shall be nonpublic data until the filing becomes effective.
- (d) All forms, rates, and related information filed with the commissioner under section 70A.06 shall be nonpublic data until the filing becomes effective.
- (e) All forms, rates, and related information filed with the commissioner under section 79.56 shall be nonpublic data until the filing becomes effective.
- (f) Notwithstanding paragraphs (b) and (c), for all rate increases subject to review under section 2794 of the Public Health Services Act and any amendments to, or regulations, or guidance issued under the act that are filed with the commissioner on or after September 1, 2011, the commissioner:
 - (1) may acknowledge receipt of the information;
 - (2) may acknowledge that the corresponding rate filing is pending review;
- (3) must provide public access from the Department of Commerce's Web site to parts I and II of the Preliminary Justifications of the rate increases subject to review; and
- (4) must provide notice to the public on the Department of Commerce's Web site of the review of the proposed rate, which must include a statement that the public has 30 calendar days to submit written comments to the commissioner on the rate filing subject to review.
- (g) Notwithstanding paragraphs (b) and (c), for all proposed premium rates filed with the commissioner for individual health plans, as defined in section 62A.011, subdivision 4, and small group health plans, as defined in section 62K.03, subdivision 12, the commissioner must provide public access on the Department of Commerce's Web site to compiled data of the proposed changes to rates, separated by health plan and geographic rating area, within ten business days after the deadline by which health carriers, as defined in section 62A.011, subdivision 2, must submit proposed rates to the commissioner for approval.

EFFECTIVE DATE. This section is effective 30 days following final enactment.

- Sec. 2. Minnesota Statutes 2016, section 60A.235, subdivision 3, is amended to read:
- Subd. 3. **Health plan policies issued as stop loss coverage.** (a) An insurance company or health carrier issuing or renewing an insurance policy or other evidence of coverage, that provides coverage to an employer for health care expenses incurred under an employer-sponsored plan provided to the employer's employees, retired employees, or their dependents, shall issue the policy or evidence of coverage as a health plan if the policy or evidence of coverage:
 - (1) has a specific attachment point for claims incurred per individual that is lower than \$20,000 \$10,000; or
 - (2) has an aggregate attachment point, for groups of 50 or fewer, that is lower than the greater of:
 - (i) \$4,000 times the number of group members;
 - (ii) 120 percent of expected claims; or
 - (iii) \$20,000; or
- (3) (2) has an aggregate attachment point for groups of 51 or more that is lower than 110 percent of expected claims.
- (b) An insurer shall determine the number of persons in a group, for the purposes of this section, on a consistent basis, at least annually. Where the insurance policy or evidence of coverage applies to a contract period of more than one year, the dollar amounts set forth in paragraph (a), clauses clause (1) and (2), must be multiplied by the length of the contract period expressed in years.
- (c) The commissioner may adjust the constant dollar amounts provided in paragraph (a), clauses (1), (2), and (3), on January 1 of any year, based upon changes in the medical component of the Consumer Price Index (CPI). Adjustments must be in increments of \$100 and must not be made unless at least that amount of adjustment is required. The commissioner shall publish any change in these dollar amounts at least six months before their effective date.
- (d) (c) A policy or evidence of coverage issued by an insurance company or health carrier that provides direct coverage of health care expenses of an individual including a policy or evidence of coverage administered on a group basis is a health plan regardless of whether the policy or evidence of coverage is denominated as stop loss coverage.

EFFECTIVE DATE. This section is effective 30 days following final enactment, and applies to policies or evidence of coverage offered, issued, or renewed to an employer on or after that date.

Sec. 3. Minnesota Statutes 2016, section 60A.236, is amended to read:

60A.236 STOP LOSS REGULATION; SMALL EMPLOYER COVERAGE.

A contract providing stop loss coverage, issued or renewed to a small employer, as defined in section 62L.02, subdivision 26, or to a plan sponsored by a small employer, must include a claim settlement period no less favorable to the small employer or plan than coverage of all the following:

- (1) claims incurred during the contract period regardless of when the claims are; and
- (2) paid by the plan during the contract period or within one month after expiration of the contract period.

EFFECTIVE DATE. This section is effective 30 days following final enactment, and applies to policies or evidence of coverage offered, issued, or renewed to an employer on or after that date.

- Sec. 4. Minnesota Statutes 2016, section 62D.02, subdivision 4, is amended to read:
- Subd. 4. **Health maintenance organization.** (a) "Health maintenance organization" means a nonprofit foreign or domestic corporation organized under chapter 317A, or a local governmental unit as defined in subdivision 11, controlled and operated as provided in sections 62D.01 to 62D.30, which provides, either directly or through arrangements with providers or other persons, comprehensive health maintenance services, or arranges for the provision of these services, to enrollees on the basis of a fixed prepaid sum without regard to the frequency or extent of services furnished to any particular enrollee.

(b) [Expired]

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 5. Minnesota Statutes 2016, section 62D.03, subdivision 1, is amended to read:

Subdivision 1. **Certificate of authority required.** Notwithstanding any law of this state to the contrary, any nonprofit foreign or domestic corporation organized to do so or a local governmental unit may apply to the commissioner of health for a certificate of authority to establish and operate a health maintenance organization in compliance with sections 62D.01 to 62D.30. No person shall establish or operate a health maintenance organization in this state, nor sell or offer to sell, or solicit offers to purchase or receive advance or periodic consideration in conjunction with a health maintenance organization or health maintenance contract unless the organization has a certificate of authority under sections 62D.01 to 62D.30.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 6. Minnesota Statutes 2016, section 62D.05, subdivision 1, is amended to read:

Subdivision 1. **Authority granted.** Any nonprofit corporation or local governmental unit may, upon obtaining a certificate of authority as required in sections 62D.01 to 62D.30, operate as a health maintenance organization.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 7. Minnesota Statutes 2016, section 62D.06, subdivision 1, is amended to read:

Subdivision 1. **Governing body composition; enrollee advisory body.** The governing body of any health maintenance organization which is a nonprofit corporation may include enrollees, providers, or other individuals; provided, however, that after a health maintenance organization which is a nonprofit corporation has been authorized under sections 62D.01 to 62D.30 for one year, at least 40 percent of the governing body shall be composed of enrollees and members elected by the enrollees and members from among the enrollees and members. For purposes of this section, "member" means a consumer who receives health care services through a self-insured contract that is administered by the health maintenance organization or its related third-party administrator. The number of members elected to the governing body shall not exceed the number of enrollees elected to the governing body. An enrollee or member elected to the governing board may not be a person:

- (1) whose occupation involves, or before retirement involved, the administration of health activities or the provision of health services;
 - (2) who is or was employed by a health care facility as a licensed health professional; or

(3) who has or had a direct substantial financial or managerial interest in the rendering of a health service, other than the payment of a reasonable expense reimbursement or compensation as a member of the board of a health maintenance organization.

After a health maintenance organization which is a local governmental unit has been authorized under sections 62D.01 to 62D.30 for one year, an enrollee advisory body shall be established. The enrollees who make up this advisory body shall be elected by the enrollees from among the enrollees.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 8. Minnesota Statutes 2016, section 62D.19, is amended to read:

62D.19 UNREASONABLE EXPENSES.

No health maintenance organization shall incur or pay for any expense of any nature which is unreasonably high in relation to the value of the service or goods provided. The commissioner of health shall implement and enforce this section by rules adopted under this section.

In an effort to achieve the stated purposes of sections 62D.01 to 62D.30; in order to safeguard the underlying nonprofit status of health maintenance organizations; and to ensure that the payment of health maintenance organization money to major participating entities results in a corresponding benefit to the health maintenance organization and its enrollees, when determining whether an organization has incurred an unreasonable expense in relation to a major participating entity, due consideration shall be given to, in addition to any other appropriate factors, whether the officers and trustees of the health maintenance organization have acted with good faith and in the best interests of the health maintenance organization in entering into, and performing under, a contract under which the health maintenance organization has incurred an expense. The commissioner has standing to sue, on behalf of a health maintenance organization, officers or trustees of the health maintenance organization who have breached their fiduciary duty in entering into and performing such contracts.

EFFECTIVE DATE. This section is effective the day following final enactment.

- Sec. 9. Minnesota Statutes 2016, section 62E.02, subdivision 3, is amended to read:
- Subd. 3. **Health maintenance organization.** "Health maintenance organization" means a nonprofit corporation licensed and operated as provided in chapter 62D.

EFFECTIVE DATE. This section is effective the day following final enactment.

- Sec. 10. Minnesota Statutes 2016, section 62L.12, subdivision 2, is amended to read:
- Subd. 2. **Exceptions.** (a) A health carrier may renew individual conversion policies to eligible employees otherwise eligible for conversion coverage under section 62D.104 as a result of leaving a health maintenance organization's service area.
- (b) A health carrier may renew individual conversion policies to eligible employees otherwise eligible for conversion coverage as a result of the expiration of any continuation of group coverage required under sections 62A.146, 62A.17, 62A.21, 62C.142, 62D.101, and 62D.105.
 - (c) A health carrier may renew conversion policies to eligible employees.
 - (d) A health carrier may sell, issue, or renew individual continuation policies to eligible employees as required.

- (e) A health carrier may sell, issue, or renew individual health plans if the coverage is appropriate due to an unexpired preexisting condition limitation or exclusion applicable to the person under the employer's group health plan or due to the person's need for health care services not covered under the employer's group health plan.
- (f) A health carrier may sell, issue, or renew an individual health plan, if the individual has elected to buy the individual health plan not as part of a general plan to substitute individual health plans for a group health plan nor as a result of any violation of subdivision 3 or 4.
- (g) A health carrier may sell, issue, or renew an individual health plan if coverage provided by the employer is determined to be unaffordable under the provisions of the Affordable Care Act as defined in section 62A.011, subdivision 1a.
- (h) Nothing in this subdivision relieves a health carrier of any obligation to provide continuation or conversion coverage otherwise required under federal or state law.
- (i) Nothing in this chapter restricts the offer, sale, issuance, or renewal of coverage issued as a supplement to Medicare under sections 62A.3099 to 62A.44, or policies or contracts that supplement Medicare issued by health maintenance organizations, or those contracts governed by sections 1833, 1851 to 1859, 1860D, or 1876 of the federal Social Security Act, United States Code, title 42, section 1395 et seq., as amended.
- (j) Nothing in this chapter restricts the offer, sale, issuance, or renewal of individual health plans necessary to comply with a court order.
- (k) A health carrier may offer, issue, sell, or renew an individual health plan to persons eligible for an employer group health plan, if the individual health plan is a high deductible health plan for use in connection with an existing health savings account, in compliance with the Internal Revenue Code, section 223. In that situation, the same or a different health carrier may offer, issue, sell, or renew a group health plan to cover the other eligible employees in the group.
- (l) A health carrier may offer, sell, issue, or renew an individual health plan to one or more employees of a small employer if the individual health plan is marketed directly to all employees of the small employer and the small employer does not contribute directly or indirectly to the premiums or facilitate the administration of the individual health plan. The requirement to market an individual health plan to all employees does not require the health carrier to offer or issue an individual health plan to any employee. For purposes of this paragraph, an employer is not contributing to the premiums or facilitating the administration of the individual health plan if the employer does not contribute to the premium and merely collects the premiums from an employee's wages or salary through payroll deductions and submits payment for the premiums of one or more employees in a lump sum to the health carrier. Except for coverage under section 62A.65, subdivision 5, paragraph (b), at the request of an employee, the health carrier may bill the employer for the premiums payable by the employee, provided that the employer is not liable for payment except from payroll deductions for that purpose. If an employer is submitting payments under this paragraph, the health carrier shall provide a cancellation notice directly to the primary insured at least ten days prior to termination of coverage for nonpayment of premium. Individual coverage under this paragraph may be offered only if the small employer has not provided coverage under section 62L.03 to the employees within the past 12 months.
- (m) A health carrier may offer, sell, issue, or renew an individual health plan to one or more employees of a small employer if the small employer, eligible employee, and individual health plan are in compliance with the 21st Century Cures Act, Public Law 114-255.

Sec. 11. [62Q.556] UNAUTHORIZED PROVIDER SERVICES.

- <u>Subdivision 1.</u> <u>Unauthorized provider services.</u> (a) Except as provided in paragraph (c), unauthorized provider services occur when an enrollee receives services:
- (1) from a nonparticipating provider at a participating hospital or ambulatory surgical center, when the services are rendered:
 - (i) due to the unavailability of a participating provider;
 - (ii) by a nonparticipating provider without the enrollee's knowledge; or
 - (iii) due to the need for unforeseen services arising at the time the services are being rendered;
- (2) from a nonparticipating provider in a participating provider's practice setting under circumstances not described in clause (1);
- (3) from a participating provider that sends a specimen taken from the enrollee in the participating provider's practice setting to a nonparticipating laboratory, pathologist, or other medical testing facility; or
- (4) not described in clause (3) that are performed by a nonparticipating provider, if a referral for the services is required by the health plan.
 - (b) Unauthorized provider services do not include emergency services as defined in section 62Q.55, subdivision 3.
- (c) The services described in paragraph (a), clauses (2) to (4), are not unauthorized provider services if the enrollee gives advance written consent to the provider acknowledging that the use of a provider, or the services to be rendered, may result in costs not covered by the health plan.
- <u>Subd. 2.</u> <u>Prohibition.</u> An enrollee must have the same cost-sharing requirements for unauthorized provider services, including co-payments, deductibles, coinsurance, coverage restrictions, and coverage limitations as those applicable to services received by the enrollee from a participating provider.
- **EFFECTIVE DATE.** This section is effective 30 days following final enactment and applies to provider services provided on or after that date.

Sec. 12. [62Q.557] BALANCE BILLING PROHIBITED.

- (a) A participating provider is prohibited from billing an enrollee for any amount in excess of the allowable amount the health plan company has contracted for with the provider as total payment for the health care services. A participating provider is permitted to bill an enrollee the approved co-payment, deductible, or coinsurance.
- (b) A participating provider is permitted to bill an enrollee for services not covered by the enrollee's health plan as long as the enrollee agrees in writing in advance before the service is performed to pay for the noncovered service.
- **EFFECTIVE DATE.** This section is effective July 1, 2017, and applies to health plans offered, issued, or renewed to a Minnesota resident on or after that date.

Sec. 13. TRANSITION OF CARE COVERAGE FOR CALENDAR YEAR 2017; INVOLUNTARY TERMINATION OF COVERAGE.

- Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.
- (b) "Enrollee" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 2b.
- (c) "Health plan" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 3.
- (d) "Health plan company" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 4.
- (e) "Individual market" has the meaning given in Minnesota Statutes, section 62A.011, subdivision 5.
- (f) "Involuntary termination of coverage" means the termination of a health plan due to a health plan company's refusal to renew the health plan in the individual market because the health plan company elects to cease offering individual market health plans in all or some geographic rating areas of the state.
- Subd. 2. Application. This section applies to an enrollee who is subject to a change in health plans in the individual market due to an involuntary termination of coverage from a health plan in the individual market after October 31, 2016, and before January 1, 2017, and who enrolls in a new health plan in the individual market for all or a portion of calendar year 2017 that goes into effect after December 31, 2016, and before March 2, 2017.
- Subd. 3. Change in health plans; transition of care coverage. (a) If an enrollee satisfies the criteria in subdivision 2, the enrollee's new health plan company must provide, upon request of the enrollee or the enrollee's health care provider, authorization to receive services that are otherwise covered under the terms of the enrollee's calendar year 2017 health plan from a provider who provided care on an in-network basis to the enrollee during calendar year 2016 but who is out of network in the enrollee's calendar year 2017 health plan:
- (1) for up to 120 days if the enrollee has received a diagnosis of, or is engaged in a current course of treatment for, one or more of the following conditions:
 - (i) an acute condition;
 - (ii) a life-threatening mental or physical illness;
 - (iii) pregnancy beyond the first trimester of pregnancy;
- (iv) a physical or mental disability defined as an inability to engage in one or more major life activities, provided the disability has lasted or can be expected to last for at least one year or can be expected to result in death; or
 - (v) a disabling or chronic condition that is in an acute phase; or
- (2) for the rest of the enrollee's life if a physician certifies that the enrollee has an expected lifetime of 180 days or less.
- (b) For all requests for authorization under this subdivision, the health plan company must grant the request for authorization unless the enrollee does not meet the criteria in paragraph (a) or subdivision 2.
- (c) The commissioner of Minnesota Management and Budget must reimburse the enrollee's new health plan company for costs attributed to services authorized under this subdivision. Costs eligible for reimbursement under this paragraph are the difference between the health plan company's reimbursement rate for in-network providers for

a service authorized under this subdivision and its rate for out-of-network providers for the service. The health plan company must seek reimbursement from the commissioner for costs attributed to services authorized under this subdivision, in a form and manner mutually agreed upon by the commissioner and the affected health plan companies. Total state reimbursements to health plan companies under this paragraph are subject to the limits of the available appropriation. In the event that funding for reimbursements to health plan companies is not sufficient to fully reimburse health plan companies for the costs attributed to services authorized under this subdivision, health plan companies must continue to cover services authorized under this subdivision.

- Subd. 4. **Limitations.** (a) Subdivision 3 applies only if the enrollee's health care provider agrees to:
- (1) accept as payment in full the lesser of:
- (i) the health plan company's reimbursement rate for in-network providers for the same or similar service; or
- (ii) the provider's regular fee for that service;
- (2) request authorization for services in the form and manner specified by the enrollee's new health plan company; and
- (3) provide the enrollee's new health plan company with all necessary medical information related to the care provided to the enrollee.
- (b) Nothing in this section requires a health plan company to provide coverage for a health care service or treatment that is not covered under the enrollee's health plan.
- Subd. 5. Request for authorization. The enrollee's health plan company may require medical records and other supporting documentation to be submitted with a request for authorization under subdivision 3. If authorization is denied, the health plan company must explain the criteria used to make its decision on the request for authorization and must explain the enrollee's right to appeal the decision. If an enrollee chooses to appeal a denial, the enrollee must appeal the denial within five business days of the date on which the enrollee receives the denial. If authorization is granted, the health plan company must provide the enrollee, within five business days of granting the authorization, with an explanation of how transition of care will be provided.

EFFECTIVE DATE. This section is effective for health plans issued after December 31, 2016, and before March 2, 2017, and that are in effect for all or a portion of calendar year 2017. This section expires June 30, 2018.

Sec. 14. COSTS RELATED TO IMPLEMENTATION OF THIS ACT.

A state agency that incurs administrative costs to implement one or more provisions in this act and does not receive an appropriation for administrative costs in section 16 or article 1, section 6, must implement the act within the limits of existing appropriations.

Sec. 15. INSURANCE MARKET OPTIONS.

The commissioner of commerce shall report by February 15, 2017, to the standing committees of the legislature having jurisdiction over insurance and health on:

(1) a plan to implement and operate a residency verification process for individual health insurance market participants; and

- (2) the past and future use of Minnesota Statutes 2005, section 62L.056, and Minnesota Statutes, section 62Q.188, including:
 - (i) rate and form filings received, approved, or withdrawn;
 - (ii) barriers to current utilization, including federal and state laws; and
- (iii) recommendations for allowing or increasing the offering of health plans compliant with Minnesota Statutes, section 62Q.188.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 16. <u>APPROPRIATION</u>; <u>COVERAGE FOR TRANSITION OF CARE.</u>

\$15,000,000 in fiscal year 2017 is appropriated from the general fund to the commissioner of Minnesota Management and Budget to reimburse health plan companies for costs attributed to coverage of transition of care services under section 13. No more than three percent of this appropriation is available to the commissioner for administrative costs. This is a onetime appropriation and is available until June 30, 2018. Any funds remaining from this appropriation on June 30, 2018, cancel to the budget reserve account in Minnesota Statutes, section 16A.152, subdivision 1a.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 17. **REPEALER.**

- (a) Minnesota Statutes 2016, section 62D.12, subdivision 9, is repealed effective the day following final enactment.
 - (b) Minnesota Statutes 2016, section 62K.11, is repealed effective July 1, 2017."

Delete the title and insert:

"A bill for an act relating to health care coverage; providing a temporary program to help pay for health insurance premiums; modifying requirements for health maintenance organizations; modifying provisions governing health insurance; requiring reports; appropriating money; amending Minnesota Statutes 2016, sections 60A.08, subdivision 15; 60A.235, subdivision 3; 60A.236; 62D.02, subdivision 4; 62D.03, subdivision 1; 62D.05, subdivision 1; 62D.06, subdivision 1; 62D.19; 62E.02, subdivision 3; 62L.12, subdivision 2; proposing coding for new law in Minnesota Statutes, chapter 62Q; repealing Minnesota Statutes 2016, sections 62D.12, subdivision 9; 62K.11."

The motion prevailed and the amendment was adopted.

Knoblach moved to amend S. F. No. 1, the second engrossment, as amended, as follows:

Page 6, after line 7, insert:

"(b) If the commissioner of Minnesota Management and Budget determines that the amount of the appropriation available for administrative costs in paragraph (a) is inadequate, the commissioner may increase the amount available for administrative costs up to \$20,000,000 by using any available amounts of the fiscal year 2017

appropriation for agency operations for that purpose or by using amounts of the appropriations for agency operations in fiscal years 2018 or 2019 for that purpose. Before increasing the amount available for administrative costs above the amount provided in paragraph (a), the commissioner must provide information justifying the higher expenditure to the chairs and ranking minority members of the Ways and Means Committee in the house and the Finance Committee in the senate.

(c) If the commissioner of revenue determines that the Department of Revenue has administrative costs that are not funded elsewhere in this act, the commissioner may use up to \$7,802,000 for those administrative costs by using any available amounts of the fiscal year 2017 appropriation for agency operations or by using amounts of the appropriations for agency operations in fiscal years 2018 or 2019. Before spending amounts for administrative costs as specified in this paragraph, the commissioner must provide information justifying the expenditure to the chairs and ranking minority members of the Ways and Means Committee in the house and the Finance Committee in the senate."

Page 6, line 8, delete "(b)" and insert "(d)"

The motion prevailed and the amendment was adopted.

Fabian and Davids moved to amend S. F. No. 1, the second engrossment, as amended, as follows:

Page 11, after line 9, insert:

"Sec. 10. Minnesota Statutes 2016, section 62K.10, is amended by adding a subdivision to read:

Subd. 5a. Appeal of waiver of network adequacy requirements. If a health carrier receives a waiver under subdivision 5 applicable to a health plan's provider network, a provider who is in the geographic area served by the health plan and who is aggrieved by the issuance of the waiver, may appeal the commissioner's decision using the contested case procedures in chapter 14. A contested case proceeding must be initiated within 60 days after the date on which the commissioner grants a waiver, except that a proceeding regarding a waiver in effect as of January 1, 2017, must be initiated within 60 days after the effective date of this section. Notwithstanding any law to the contrary, each party to the proceeding must pay an equal amount of the costs for the proceeding. After considering the appeal, the administrative law judge must either uphold or nullify a waiver of network adequacy requirements. The decision of the administrative law judge constitutes the final decision regarding the waiver. A party aggrieved by the administrative law judge's decision may seek judicial review of the decision as provided in chapter 14. If the waiver is nullified and no judicial review is sought, the health carrier must comply with the network adequacy requirements in section 62K.10, subdivisions 2, 3, and 4, within 30 days after the deadline for seeking judicial review in section 14.63.

EFFECTIVE DATE. This section is effective the day following final enactment, and applies to network adequacy waivers in effect on or after January 1, 2017."

Renumber the sections in sequence and correct the internal references

Amend the title accordingly

The motion prevailed and the amendment was adopted.

Hertaus was excused for the remainder of today's session.

Miller moved to amend S. F. No. 1, the second engrossment, as amended, as follows:

Page 11, after line 9, insert:

"Sec. 10. [62H.18] AGRICULTURAL COOPERATIVE HEALTH PLAN.

Subdivision 1. **Definitions.** (a) The definitions in this subdivision apply to this section.

- (b) "Agricultural cooperative" means a cooperative organized under chapters 308A or 308B that meets the requirements of subdivision 2.
 - (c) "Broker" means an insurance agent engaged in brokerage business according to section 60K.49.
- (d) "Employee Retirement Income Security Act" means the Employee Retirement Income Security Act of 1974, United States Code, title 29, sections 1001, et seq.
 - (e) "Enrollee" means a natural person covered by a joint self-insurance plan operating under this section.
 - (f) "Insurance agent" has the meaning given to insurance agent in section 60A.02, subdivision 7.
- (g) "Joint self-insurance plan" or "plan" means a plan or any other arrangement established for the benefit of two or more entities authorized to transact business in the state, in order to jointly self-insure through a single employee welfare benefit plan funded through a trust, to provide health, dental, or other benefits as permitted under the Employee Retirement Income Security Act.
 - (h) "Service plan administrator" means a vendor of risk management services licensed under section 60A.23.
- (i) "Trust" means a trust established to accept and hold assets of the joint self-insurance plan in trust and use and disperse funds in accordance with the terms of the written trust document and joint self-insurance plan for the sole purposes of providing benefits and defraying reasonable administrative costs of providing the benefits.
- Subd. 2. Exemption. A joint self-insurance plan is exempt from sections 62H.01 to 62H.17 and is instead governed by this section, if it is administered through a trust established by an agricultural cooperative that:
- (1) has members who (i) actively work in production agriculture in Minnesota and file either Form 1065 or Schedule F with the member's income tax return; or (ii) provide direct services to production agriculture in Minnesota;
 - (2) specifies criteria for membership in the agricultural cooperative in their articles of organization or bylaws; and
- (3) grants at least 51 percent of the aggregate voting power on matters for which all members may vote to members who satisfy clause (1) and any additional criteria in the agricultural cooperative's articles of organization and bylaws.
 - Subd. 3. Plan requirements. A joint self-insurance plan operating under this section must:
- (1) offer health coverage to members of the agricultural cooperative that establishes the plan and their dependents, to employees of members of the agricultural cooperative that establishes the plan and their dependents, or to employees of the agricultural cooperative that establishes the plan and their dependents;

- (2) include aggregate stop-loss coverage and individual stop-loss coverage provided by an insurance company licensed in Minnesota;
- (3) establish a reserve fund, certified by an actuary to be sufficient to cover unpaid claim liability for incurred but not reported liabilities in the event of plan termination. Certification from the actuary must include all maximum funding requirements for plan fixed cost requirements and current claims liability requirements, and must include a calculation of the reserve levels needed to fund all incurred but not reported liabilities in the event of member or plan termination. These reserve funds must be held in a trust;
 - (4) be governed by a board elected by agricultural cooperative members that participate in the plan;
 - (5) contract for services with a service plan administrator; and
- (6) satisfy the requirements of the Employee Retirement Income Security Act that apply to employee welfare benefit plans.
- Subd. 4. Submission of documents to commissioner of commerce. A joint self-insurance plan operating under this section must submit to the commissioner of commerce copies of all filings and reports that are submitted to the United States Department of Labor according to the Employee Retirement Income Security Act. Members participating in the joint self-insurance plan may designate an agricultural cooperative that establishes the plan as the entity responsible for satisfying the reporting requirements of the Employee Retirement Income Security Act and for providing copies of these filings and reports to the commissioner of commerce.
- Subd. 5. Participation; termination of participation. If a member chooses to participate in a joint self-insurance plan under this section, the member must participate in the plan for at least three consecutive years. If a member terminates participation in the plan before the end of the three-year period, a financial penalty may be assessed under the plan, not to exceed the amount contributed by the member to the plan reserves.
- Subd. 6. Single risk pool. The enrollees of a joint self-insurance plan operating under this section shall be members of a single risk pool. The plan shall provide benefits as a single, self-insured plan with the size of the plan based on the total enrollees in the risk pool.
- Subd. 7. Promotion, marketing, sale of coverage. (a) Coverage in a joint self-insurance plan operating under this section may be promoted, marketed, and sold by insurance agents and brokers to members of the agricultural cooperative sponsoring the plan and their dependents, employees of members of the agricultural cooperative sponsoring the plan and their dependents, and employees of the agricultural cooperative sponsoring the plan and their dependents.
- (b) Coverage in a joint self-insurance plan operating under this section may be promoted and marketed by a cooperative organized under chapters 308A or 308B to persons who may be eligible to participate in the joint self-insurance plan.
- Subd. 8. <u>Taxation.</u> <u>Joint self-insurance plans are exempt from the taxation imposed under section 297I.05, subdivision 12.</u>
 - Subd. 9. Compliance with other laws. A joint self-insurance plan operating under this section:
- (1) is exempt from providing the mandated health benefits in chapters 62A and 62Q, if the plan otherwise provides the benefits required under the Employee Retirement Income Security Act;

(2) is exempt from the continuation requirements in sections 62A.146, 62A.16, 62A.17, 62A.20, and 62A.21, if the plan complies with the continuation requirements under the Employee Retirement Income Security Act; and

(3) must comply with all requirements of the Affordable Care Act, as defined in section 62A.011, subdivision 1a, to the extent that they apply to such plans.

EFFECTIVE DATE. This section is effective the day following final enactment."

Renumber the sections in sequence and correct the internal references

Amend the title accordingly

A roll call was requested and properly seconded.

The question was taken on the Miller amendment and the roll was called. There were 98 yeas and 29 nays as follows:

Those who voted in the affirmative were:

Albright	Davids	Gunther	Kunesh-Podein	Newberger	Schomacker
Anderson, P.	Davnie	Haley	Layman	Nornes	Scott
Anderson, S.	Dean, M.	Halverson	Lien	O'Driscoll	Smith
Anselmo	Dettmer	Hamilton	Lillie	O'Neill	Swedzinski
Backer	Drazkowski	Hausman	Lohmer	Pelowski	Theis
Baker	Ecklund	Heintzeman	Loon	Peppin	Thissen
Barr, R.	Erickson	Hilstrom	Loonan	Petersburg	Torkelson
Becker-Finn	Fabian	Hoppe	Lucero	Peterson	Uglem
Bennett	Fenton	Howe	Lueck	Pierson	Vogel
Bliss	Fischer	Jessup	Marquart	Poppe	West
Bly	Franke	Johnson, B.	Maye Quade	Poston	Whelan
Carlson, A.	Franson	Johnson, C.	McDonald	Pryor	Zerwas
Carlson, L.	Freiberg	Jurgens	Metsa	Quam	Spk. Daudt
Christensen	Garofalo	Kiel	Miller	Rarick	
Considine	Green	Knoblach	Murphy, E.	Rosenthal	
Cornish	Grossell	Koznick	Murphy, M.	Runbeck	
Daniels	Gruenhagen	Kresha	Nash	Sauke	

Those who voted in the negative were:

Allen	Flanagan	Koegel	Mariani	Omar	Sundin
Applebaum	Hansen	Lee	Masin	Pinto	Wagenius
Bernardy	Hornstein	Lesch	Moran	Sandstede	Ward
Clark	Hortman	Liebling	Nelson	Schultz	Youakim
Dehn, R.	Johnson, S.	Loeffler	Olson	Slocum	

The motion prevailed and the amendment was adopted.

Drazkowski moved to amend S. F. No. 1, the second engrossment, as amended, as follows:

Page 13, after line 4, insert:

"Sec. 11. [62Q.022] FEDERAL ACT; COMPLIANCE NOT REQUIRED.

Notwithstanding any state or federal law to the contrary, a health plan company may offer health plans that do not include federally required health benefit mandates.

EFFECTIVE DATE. This section is effective the day following final enactment."

Page 17, after line 25, insert:

"(c) Minnesota Statutes 2016, sections 62A.041, subdivision 2; 62A.041; 62A.042; 62A.043; 62A.047; 62A.149, subdivision 1; 62A.151; 62A.152; 62A.153; 62A.154; 62A.155; 62A.25; 62A.265; 62A.28; 62A.285, subdivisions 1, 2, and 3; 62A.30; 62A.304; 62A.305; 62A.3075; 62A.308; 62A.3093; 62D.102; 62D.103; 62Q.47; 62Q.471; 62Q.50; 62Q.525; 62Q.525; 62Q.527; 62Q.53; 62Q.535; 62Q.545; 62Q.55; 62Q.56; 62Q.58; 62Q.66; 62Q.67; and 62Q.675, are repealed effective the day following final enactment."

Renumber the sections in sequence and correct the internal references

Amend the title accordingly

A roll call was requested and properly seconded.

CALL OF THE HOUSE

On the motion of Hortman and on the demand of 10 members, a call of the House was ordered. The following members answered to their names:

Albright	Davids	Halverson	Layman	Nelson	Sauke
Allen	Davnie	Hamilton	Lesch	Newberger	Schomacker
Anderson, P.	Dean, M.	Hansen	Liebling	Nornes	Schultz
Anderson, S.	Dehn, R.	Hausman	Lien	O'Driscoll	Scott
Anselmo	Dettmer	Heintzeman	Lillie	Olson	Slocum
Applebaum	Drazkowski	Hilstrom	Loeffler	Omar	Smith
Backer	Ecklund	Hoppe	Lohmer	O'Neill	Sundin
Baker	Erickson	Hornstein	Loon	Pelowski	Swedzinski
Barr, R.	Fabian	Hortman	Loonan	Peppin	Theis
Becker-Finn	Fenton	Howe	Lucero	Petersburg	Thissen
Bennett	Fischer	Jessup	Lueck	Peterson	Torkelson
Bernardy	Flanagan	Johnson, B.	Mariani	Pierson	Uglem
Bliss	Franke	Johnson, C.	Marquart	Pinto	Vogel
Bly	Franson	Johnson, S.	Masin	Poppe	Wagenius
Carlson, A.	Freiberg	Jurgens	Maye Quade	Poston	Ward
Carlson, L.	Garofalo	Kiel	McDonald	Pryor	West
Christensen	Green	Knoblach	Metsa	Quam	Whelan
Clark	Grossell	Koegel	Miller	Rarick	Youakim
Considine	Gruenhagen	Koznick	Murphy, E.	Rosenthal	Zerwas
Cornish	Gunther	Kresha	Murphy, M.	Runbeck	Spk. Daudt
Daniels	Haley	Kunesh-Podein	Nash	Sandstede	

Peppin moved that further proceedings of the roll call be suspended and that the Sergeant at Arms be instructed to bring in the absentees. The motion prevailed and it was so ordered.

Drazkowski moved to amend the Drazkowski amendment to S. F. No. 1, the second engrossment, as amended, as follows:

Page 1, line 3 after "ACT" insert "AND STATE MANDATES"

Page 1, line 4, before "Notwithstanding" insert "(a)"

Page 1, after line 5, insert:

"(b) Notwithstanding any state or federal law to the contrary, a health plan company may offer health plans that do not include all or some of the health benefit mandates in chapters 62A and 62Q, if the health plan company also offers a health plan that includes all of the health benefit mandates in chapters 62A and 62Q in the same service area."

Page 1, delete lines 7 to 13

Renumber the sections in sequence and correct the internal references

Amend the title accordingly

A roll call was requested and properly seconded.

The question was taken on the Drazkowski amendment to the Drazkowski amendment and the roll was called.

Peppin moved that those not voting be excused from voting. The motion prevailed.

There were 72 yeas and 54 nays as follows:

Those who voted in the affirmative were:

Albright	Davids	Gruenhagen	Koznick	Nornes	Scott
Anderson, P.	Dean, M.	Gunther	Kresha	O'Driscoll	Smith
Anderson, S.	Dettmer	Haley	Layman	O'Neill	Swedzinski
Anselmo	Drazkowski	Hamilton	Lohmer	Peppin	Theis
Backer	Erickson	Heintzeman	Loon	Petersburg	Thissen
Baker	Fabian	Hoppe	Loonan	Peterson	Torkelson
Barr, R.	Fenton	Howe	Lucero	Pierson	Uglem
Bennett	Franke	Jessup	Lueck	Poston	Vogel
Bliss	Franson	Johnson, B.	Miller	Quam	West
Christensen	Garofalo	Jurgens	Murphy, M.	Rarick	Whelan
Cornish	Green	Kiel	Nash	Runbeck	Zerwas
Daniels	Grossell	Knoblach	Newberger	Schomacker	Spk. Daudt

Those who voted in the negative were:

Allen	Davnie	Hilstrom	Liebling	Moran	Rosenthal
Applebaum	Dehn, R.	Hornstein	Lien	Murphy, E.	Sandstede
Becker-Finn	Ecklund	Hortman	Lillie	Nelson	Sauke
Bernardy	Fischer	Johnson, C.	Loeffler	Olson	Schultz
Bly	Flanagan	Johnson, S.	Mariani	Omar	Slocum
Carlson, A.	Freiberg	Koegel	Marquart	Pelowski	Sundin
Carlson, L.	Halverson	Kunesh-Podein	Masin	Pinto	Wagenius
Clark	Hansen	Lee	Maye Quade	Poppe	Ward
Considine	Hausman	Lesch	Metsa	Pryor	Youakim

The motion prevailed and the amendment to the amendment was adopted.

Halverson offered an amendment to the Drazkowski amendment, as amended, to S. F. No. 1, the second engrossment, as amended.

POINT OF ORDER

Albright raised a point of order pursuant to section 401, paragraph 1, of "Mason's Manual of Legislative Procedure," relating to Frivolous and Improper Amendments. The Speaker ruled the point of order well taken and the Halverson amendment to the Drazkowski amendment out of order.

The question recurred on the Drazkowski amendment, as amended, and the roll was called. There were 71 yeas and 56 nays as follows:

Those who voted in the affirmative were:

Albright	Davids	Gruenhagen	Koznick	Nornes	Scott
Anderson, P.	Dean, M.	Gunther	Kresha	O'Driscoll	Smith
Anderson, S.	Dettmer	Haley	Layman	O'Neill	Swedzinski
Anselmo	Drazkowski	Hamilton	Lohmer	Peppin	Theis
Backer	Erickson	Heintzeman	Loon	Petersburg	Torkelson
Baker	Fabian	Hoppe	Loonan	Peterson	Uglem
Barr, R.	Fenton	Howe	Lucero	Pierson	Vogel
Bennett	Franke	Jessup	Lueck	Poston	West
Bliss	Franson	Johnson, B.	McDonald	Quam	Whelan
Christensen	Garofalo	Jurgens	Miller	Rarick	Zerwas
Cornish	Green	Kiel	Nash	Runbeck	Spk. Daudt
Daniels	Grossell	Knoblach	Newberger	Schomacker	•

Those who voted in the negative were:

Allen	Dehn, R.	Hortman	Loeffler	Olson	Slocum
Applebaum	Ecklund	Johnson, C.	Mariani	Omar	Sundin
Becker-Finn	Fischer	Johnson, S.	Marquart	Pelowski	Thissen
Bernardy	Flanagan	Koegel	Masin	Pinto	Wagenius
Bly	Freiberg	Kunesh-Podein	Maye Quade	Poppe	Ward
Carlson, A.	Halverson	Lee	Metsa	Pryor	Youakim
Carlson, L.	Hansen	Lesch	Moran	Rosenthal	
Clark	Hausman	Liebling	Murphy, E.	Sandstede	
Considine	Hilstrom	Lien	Murphy, M.	Sauke	
Davnie	Hornstein	Lillie	Nelson	Schultz	

The motion prevailed and the amendment, as amended, was adopted.

The Speaker called Garofalo to the Chair.

Liebling moved to amend S. F. No. 1, the second engrossment, as amended, as follows:

Delete everything after the enacting clause and insert:

"ARTICLE 1 PREMIUM SUBSIDY PROGRAM

Section 1. **DEFINITIONS.**

- Subdivision 1. Scope. For purposes of sections 1 to 5, the following terms have the meanings given.
- Subd. 2. Eligible individual. "Eligible individual" means a Minnesota resident who is not receiving a premium tax credit under Code of Federal Regulations and is not receiving public program coverage under Minnesota Statutes, section 256B.055, or 256L.04.
- Subd. 3. **Gross premium.** "Gross premium" means the amount billed for a health plan purchased by an eligible individual prior to a state premium subsidy, as defined in subdivision 5, in a calendar year.
- Subd. 4. Net premium. "Net premium" means the gross premium less the premium subsidy defined in subdivision 5.
 - Subd. 5. **Premium subsidy.** "Premium subsidy":
- (1) is a payment made on behalf of eligible individuals for the promotion of general welfare, and is not compensation for any services;
- (2) is equal to 25 percent of the monthly gross premium otherwise paid by or on behalf of the eligible individual for coverage purchased in the individual market, that covers the eligible individual and the eligible individual's spouse and dependents; and
- (3) is excluded from any calculation used to determine eligibility within any of the Department of Human Services programs.
- Subd. 6. <u>Health carrier.</u> "Health carrier" has the meaning given in Minnesota Statutes, section 62A.011, subdivision 2.
 - Subd. 7. Commissioner. "Commissioner" means the commissioner of management and budget.
- <u>Subd. 8.</u> <u>Individual market.</u> "Individual market" means the market for health insurance coverage offered to individuals other than in connection with a group health plan, as defined in Minnesota Statutes, section 62A.011, subdivision 5.

Sec. 2. PAYMENT TO HEALTH CARRIERS ON BEHALF OF ELIGIBLE INDIVIDUALS.

- <u>Subdivision 1.</u> <u>Program established.</u> <u>The commissioner of Minnesota Management and Budget, in consultation with the commissioner of commerce and the commissioner of human services, shall establish and administer the premium subsidy program authorized by this act, to help eligible individuals pay for coverage in the individual market in 2017.</u>
- Subd. 2. **Premium subsidy provided.** A health carrier shall provide a premium subsidy to an eligible individual who purchases a health plan in the individual market. An eligible individual shall pay the net premium amount to the health carrier.
- Subd. 3. Payments to health carriers. The commissioner shall make payments to health carriers on behalf of eligible individuals effectuating coverage for calendar year 2017, for the months in that year for which the individual has paid the net premium amount to the health carrier. Payments to health carriers shall be based on the

premium subsidy available to eligible individuals in the individual market, regardless of the cost of coverage purchased. Health carriers seeking reimbursement from the commissioner must submit an invoice and supporting information to the commissioner, in a form prescribed by the commissioner, in order to be eligible for payment. Total state payments to health carriers must be made within the limits of the available appropriation in section 5. The commissioner shall prorate payments to health carriers if necessary, so as not to exceed the available appropriation.

Sec. 3. AUDIT.

The commissioner of commerce shall conduct audits of the health carriers' supporting data, as prescribed by the commissioner, to determine whether payments align with criteria established in sections 1 and 2. The Department of Human Services shall provide data as necessary to the Department of Commerce to complete the audit. All data collected for that purpose shall be held as confidential and nonpublic as defined in Minnesota Statutes, chapter 13. The commissioner shall withhold payments from or charge back payments to the health carriers to the extent they do not align with the criteria established in sections 1 and 2, as determined by the Department of Commerce.

Sec. 4. APPLICABILITY OF GROSS PREMIUM.

Notwithstanding premium subsidies provided under section 2, the premium base for calculating the amount of any applicable premium taxes under Minnesota Statutes, chapter 297I or premium withholds under Minnesota Statutes, section 62V.05, subdivision 2, shall be the gross premium, for health plans purchased by eligible individuals in the individual market.

Sec. 5. TRANSFER.

\$311,945,000 in fiscal year 2017 is transferred from the budget reserve account in Minnesota Statutes, section 16A.152, subdivision 1a, to the general fund.

Sec. 6. **APPROPRIATIONS.**

- (a) \$311,645,000 in fiscal year 2017 is appropriated from the general fund to the commissioner of Minnesota Management and Budget for the purposes of making payments as defined in section 2. The appropriation is onetime and is available through June 30, 2018.
- (b) \$300,000 in fiscal year 2017 is appropriated from the general fund to the commissioner of commerce for purposes of section 3, and to facilitate payments to health carriers. The appropriation is onetime and is available until expended.

Sec. 7. EFFECTIVE DATE.

<u>Sections 1 to 6 are effective the day following final enactment.</u>

ARTICLE 2 TRANSITION OF CARE COVERAGE

Section 1. TRANSITION OF CARE COVERAGE FOR CALENDAR YEAR 2017; INVOLUNTARY TERMINATION OF COVERAGE.

Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.

(b) "Enrollee" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 2b.

- (c) "Health plan" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 3.
- (d) "Health plan company" has the meaning given in Minnesota Statutes, section 62Q.01, subdivision 4.
- (e) "Individual market" has the meaning given in Minnesota Statutes, section 62A.011, subdivision 5.
- (f) "Involuntary termination of coverage" means the termination of a health plan due to a health plan company's refusal to renew the health plan in the individual market because the health plan company elects to cease offering individual market health plans in all or some geographic rating areas of the state.
- Subd. 2. Application. This section applies to an enrollee who is subject to a change in health plans in the individual market due to an involuntary termination of coverage from a health plan in the individual market after October 31, 2016, and before January 1, 2017, and who enrolls in a new health plan in the individual market for all or a portion of calendar year 2017 that goes into effect after December 31, 2016, and before March 2, 2017.
- Subd. 3. Change in health plans; transition of care coverage. (a) If an enrollee satisfies the criteria in subdivision 2, the enrollee's new health plan company must provide, upon request of the enrollee or the enrollee's health care provider, authorization to receive services that are otherwise covered under the terms of the enrollee's calendar year 2017 health plan from a provider who provided care on an in-network basis to the enrollee during calendar year 2016 but who is out of network in the enrollee's calendar year 2017 health plan:
- (1) for up to 120 days if the enrollee has received a diagnosis of, or is engaged in a current course of treatment for, one or more of the following conditions:
 - (i) an acute condition;
 - (ii) a life-threatening mental or physical illness;
 - (iii) pregnancy beyond the first trimester of pregnancy;
- (iv) a physical or mental disability defined as an inability to engage in one or more major life activities, provided the disability has lasted or can be expected to last for at least one year or can be expected to result in death; or
 - (v) a disabling or chronic condition that is in an acute phase; or
- (2) for the rest of the enrollee's life if a physician certifies that the enrollee has an expected lifetime of 180 days or less.
- (b) For all requests for authorization under this subdivision, the health plan company must grant the request for authorization unless the enrollee does not meet the criteria in paragraph (a) or subdivision 2.
- (c) The commissioner of Minnesota Management and Budget must reimburse the enrollee's new health plan company for costs attributed to services authorized under this subdivision. Costs eligible for reimbursement under this paragraph are the difference between the health plan company's reimbursement rate for in-network providers for a service authorized under this subdivision and its rate for out-of-network providers for the service. The health plan company must seek reimbursement from the commissioner for costs attributed to services authorized under this subdivision, in a form and manner mutually agreed upon by the commissioner and the affected health plan companies. Total state reimbursements to health plan companies under this paragraph are subject to the limits of the available appropriation. In the event that funding for reimbursements to health plan companies is not sufficient to fully reimburse health plan companies for the costs attributed to services authorized under this subdivision, health plan companies must continue to cover services authorized under this subdivision.

- Subd. 4. Limitations. (a) Subdivision 3 applies only if the enrollee's health care provider agrees to:
- (1) accept as payment in full the lesser of:
- (i) the health plan company's reimbursement rate for in-network providers for the same or similar service; or
- (ii) the provider's regular fee for that service;
- (2) request authorization for services in the form and manner specified by the enrollee's new health plan company, if the provider chooses to request authorization; and
- (3) provide the enrollee's new health plan company with all necessary medical information related to the care provided to the enrollee.
- (b) Nothing in this section requires a health plan company to provide coverage for a health care service or treatment that is not covered under the enrollee's health plan.
- Subd. 5. Request for authorization. The enrollee's health plan company may require medical records and other supporting documentation to be submitted with a request for authorization under subdivision 3. If authorization is denied, the health plan company must explain the criteria used to make its decision on the request for authorization and must explain the enrollee's right to appeal the decision. If an enrollee chooses to appeal a denial, the enrollee must appeal the denial within five business days of the date on which the enrollee receives the denial. If authorization is granted, the health plan company must provide the enrollee, within five business days of granting the authorization, with an explanation of how transition of care will be provided.

EFFECTIVE DATE. This section is effective for health plans issued after December 31, 2016, and before March 2, 2017, and that are in effect for all or a portion of calendar year 2017. This section expires June 30, 2018.

Sec. 2. APPROPRIATION; COVERAGE FOR TRANSITION OF CARE.

\$15,000,000 in fiscal year 2017 is appropriated from the general fund to the commissioner of Minnesota Management and Budget to reimburse health plan companies for costs attributed to coverage of transition of care services under section 1. No more than three percent of this appropriation is available to the commissioner for administrative costs. This is a onetime appropriation and is available until June 30, 2018.

EFFECTIVE DATE. This section is effective the day following final enactment."

Amend the title accordingly

A roll call was requested and properly seconded.

The question was taken on the Liebling amendment and the roll was called. There were 57 yeas and 70 nays as follows:

Those who voted in the affirmative were:

Allen	Bly	Considine	Fischer	Hansen	Hortman
Applebaum	Carlson, A.	Davnie	Flanagan	Hausman	Johnson, C.
Becker-Finn	Carlson, L.	Dehn, R.	Freiberg	Hilstrom	Johnson, S.
Bernardy	Clark	Ecklund	Halverson	Hornstein	Koegel

Kunesh-Podein	Loeffler	Metsa	Omar	Sandstede	Wagenius
Lee	Mariani	Moran	Pelowski	Sauke	Ward
Lesch	Marquart	Murphy, E.	Pinto	Schultz	Youakim
Liebling	Masin	Murphy, M.	Poppe	Slocum	
Lien	Maye Quade	Nelson	Pryor	Sundin	
Lillie	McDonald	Olson	Rosenthal	Thissen	

Those who voted in the negative were:

Albright	Davids	Gruenhagen	Koznick	O'Driscoll	Smith
Anderson, P.	Dean, M.	Gunther	Kresha	O'Neill	Swedzinski
Anderson, S.	Dettmer	Haley	Layman	Peppin	Theis
Anselmo	Drazkowski	Hamilton	Lohmer	Petersburg	Torkelson
Backer	Erickson	Heintzeman	Loon	Peterson	Uglem
Baker	Fabian	Hoppe	Loonan	Pierson	Vogel
Barr, R.	Fenton	Howe	Lucero	Poston	West
Bennett	Franke	Jessup	Lueck	Quam	Whelan
Bliss	Franson	Johnson, B.	Miller	Rarick	Zerwas
Christensen	Garofalo	Jurgens	Nash	Runbeck	Spk. Daudt
Cornish	Green	Kiel	Newberger	Schomacker	
Daniels	Grossell	Knoblach	Nornes	Scott	

The motion did not prevail and the amendment was not adopted.

S. F. No. 1, as amended, was read for the third time.

CALL OF THE HOUSE LIFTED

Peppin moved that the call of the House be lifted. The motion prevailed and it was so ordered.

S. F. No. 1, A bill for an act relating to health care coverage; providing a temporary program to help pay for health insurance premiums; modifying requirements for health maintenance organizations; modifying provisions governing health insurance; requiring reports; establishing a state reinsurance program through the Minnesota Comprehensive Health Association; authorizing agricultural cooperative health plans; appropriating money; amending Minnesota Statutes 2016, sections 60A.08, subdivision 15; 60A.235, subdivision 3; 60A.236; 62D.02, subdivision 4; 62D.03, subdivision 1; 62D.05, subdivision 1; 62D.06, subdivision 1; 62D.19; 62E.02, subdivision 3; 62L.12, subdivision 2; proposing coding for new law in Minnesota Statutes, chapters 62E; 62H; repealing Minnesota Statutes 2016, section 62D.12, subdivision 9; Laws 2007, chapter 147, article 12, section 14, as amended.

The bill, as amended, was placed upon its final passage.

The question was taken on the passage of the bill and the roll was called. There were 73 yeas and 54 nays as follows:

Those who voted in the affirmative were:

Albright	Anselmo	Barr, R.	Christensen	Davids	Drazkowski
Anderson, P.	Backer	Bennett	Cornish	Dean, M.	Erickson
Anderson, S.	Baker	Bliss	Daniels	Dettmer	Fabian

Fenton	Hamilton	Kresha	Nash	Quam	Vogel
Franke	Heintzeman	Layman	Newberger	Rarick	West
Franson	Hoppe	Lien	Nornes	Runbeck	Whelan
Garofalo	Howe	Lohmer	O'Driscoll	Schomacker	Zerwas
Green	Jessup	Loon	O'Neill	Scott	Spk. Daudt
Grossell	Johnson, B.	Loonan	Peppin	Smith	
Gruenhagen	Jurgens	Lucero	Petersburg	Swedzinski	
Gunther	Kiel	Lueck	Peterson	Theis	
Haley	Knoblach	McDonald	Pierson	Torkelson	
Halverson	Koznick	Miller	Poston	Uglem	

Those who voted in the negative were:

Allen	Davnie	Hornstein	Lillie	Murphy, M.	Sandstede
Applebaum	Dehn, R.	Hortman	Loeffler	Nelson	Sauke
Becker-Finn	Ecklund	Johnson, C.	Mariani	Olson	Schultz
Bernardy	Fischer	Johnson, S.	Marquart	Omar	Slocum
Bly	Flanagan	Koegel	Masin	Pelowski	Sundin
Carlson, A.	Freiberg	Kunesh-Podein	Maye Quade	Pinto	Thissen
Carlson, L.	Hansen	Lee	Metsa	Poppe	Wagenius
Clark	Hausman	Lesch	Moran	Pryor	Ward
Considine	Hilstrom	Liebling	Murphy, E.	Rosenthal	Youakim

The bill was passed, as amended, and its title agreed to.

MOTIONS AND RESOLUTIONS

Smith moved that the name of Albright be added as an author on H. F. No. 3. The motion prevailed.

Davids moved that the name of Dettmer be added as an author on H. F. No. 4. The motion prevailed.

Nash moved that the names of Halverson and Knoblach be added as authors on H. F. No. 7. The motion prevailed.

Lueck moved that the names of Dettmer and Layman be added as authors on H. F. No. 9. The motion prevailed.

Miller moved that the name of Backer be added as an author on H. F. No. 14. The motion prevailed.

Quam moved that the name of Gruenhagen be added as an author on H. F. No. 26. The motion prevailed.

Johnson, B., moved that the name of Howe be added as an author on H. F. No. 33. The motion prevailed.

Garofalo moved that the name of Bliss be added as an author on H. F. No. 47. The motion prevailed.

Lohmer moved that the name of Daniels be added as an author on H. F. No. 55. The motion prevailed.

Dean, M., moved that the name of Lohmer be added as an author on H. F. No. 120. The motion prevailed.

Nash moved that the name of Bahr, C., be added as an author on H. F. No. 123. The motion prevailed.

Swedzinski moved that the name of Miller be added as an author on H. F. No. 124. The motion prevailed.

Miller moved that the name of Backer be added as an author on H. F. No. 130. The motion prevailed.

Knoblach moved that the names of Metsa and Dettmer be added as authors on H. F. No. 138. The motion prevailed.

Green moved that the name of Bliss be added as an author on H. F. No. 143. The motion prevailed.

Howe moved that his name be stricken as an author on H. F. No. 167. The motion prevailed.

Davids moved that the names of Dettmer, Metsa and Hertaus be added as authors on H. F. No. 182. The motion prevailed.

Davids moved that the names of Dettmer, Schultz and Metsa be added as authors on H. F. No. 183. The motion prevailed.

Nash moved that the name of Dettmer be added as an author on H. F. No. 186. The motion prevailed.

Nash moved that the names of Bahr, C.; Miller; Franson; Christensen and Loonan be added as authors on H. F. No. 188. The motion prevailed.

Wagenius moved that the name of Slocum be added as an author on H. F. No. 190. The motion prevailed.

Heintzeman moved that the names of Poston and Daniels be added as authors on H. F. No. 192. The motion prevailed.

Ecklund moved that the name of Slocum be added as an author on H. F. No. 196. The motion prevailed.

Anderson, P., moved that the name of Daniels be added as an author on H. F. No. 199. The motion prevailed.

Hertaus moved that the name of Dettmer be added as an author on H. F. No. 210. The motion prevailed.

Lohmer moved that the names of Dettmer, Anselmo, Daniels and Lucero be added as authors on H. F. No. 213. The motion prevailed.

Zerwas moved that the names of Lee, Clark and Slocum be added as authors on H. F. No. 225. The motion prevailed.

Dettmer moved that the name of Lien be added as an author on H. F. No. 226. The motion prevailed.

Lucero moved that the name of Daniels be added as an author on H. F. No. 231. The motion prevailed.

Baker moved that the names of Marquart; Thissen; Gunther; Murphy, E.; Backer; Bennett; Metsa and Howe be added as authors on H. F. No. 234. The motion prevailed.

Nash moved that the names of Bahr, C.; Miller; Franson; Dettmer; Daniels and Loonan be added as authors on H. F. No. 238. The motion prevailed.

Thissen moved that the name of Slocum be added as an author on H. F. No. 239. The motion prevailed.

Thissen moved that the names of Carlson, A., and Slocum be added as authors on H. F. No. 240. The motion prevailed.

Schultz moved that the names of Lien; Lee; Maye Quade; Dehn, R.; Youakim and Allen be added as authors on H. F. No. 245. The motion prevailed.

Schultz moved that the names of Lee and Slocum be added as authors on H. F. No. 246. The motion prevailed.

Green moved that the name of Bliss be added as an author on H. F. No. 247. The motion prevailed.

Rosenthal moved that the name of Slocum be added as an author on H. F. No. 249. The motion prevailed.

Loonan moved that the name of Poston be added as an author on H. F. No. 250. The motion prevailed.

Loonan moved that the name of Poston be added as an author on H. F. No. 251. The motion prevailed.

Swedzinski moved that the names of Lucero and Backer be added as authors on H. F. No. 256. The motion prevailed.

O'Driscoll moved that the name of Lohmer be added as an author on H. F. No. 261. The motion prevailed.

Kiel moved that the name of Youakim be added as an author on H. F. No. 262. The motion prevailed.

Swedzinski moved that the name of Slocum be added as an author on H. F. No. 264. The motion prevailed.

Franke moved that the names of Maye Quade, Howe and Lohmer be added as authors on H. F. No. 270. The motion prevailed.

Bly moved that the name of Dehn, R., be added as an author on H. F. No. 273. The motion prevailed.

Bly moved that the names of Fischer and Slocum be added as authors on H. F. No. 276. The motion prevailed.

Bly moved that the name of Slocum be added as an author on H. F. No. 278. The motion prevailed.

Bly moved that the name of Slocum be added as an author on H. F. No. 280. The motion prevailed.

Scott moved that the names of Lucero and Howe be added as authors on H. F. No. 291. The motion prevailed.

Urdahl moved that the name of Slocum be added as an author on H. F. No. 294. The motion prevailed.

Nash moved that the names of Howe and Lohmer be added as authors on H. F. No. 295. The motion prevailed.

Urdahl moved that the names of Hansen, Howe and Knoblach be added as authors on H. F. No. 296. The motion prevailed.

Bahr, C., moved that the name of Howe be added as an author on H. F. No. 309. The motion prevailed.

Hornstein moved that the name of Moran be added as an author on H. F. No. 312. The motion prevailed.

ADJOURNMENT

Peppin moved that when the House adjourns today it adjourn until 3:30 p.m., Monday, January 23, 2017. The motion prevailed.

Peppin moved that the House adjourn. The motion prevailed, and Speaker pro tempore Garofalo declared the House stands adjourned until 3:30 p.m., Monday, January 23, 2017.

PATRICK D. MURPHY, Chief Clerk, House of Representatives