

SENATE
STATE OF MINNESOTA
NINETY-THIRD SESSION

S.F. No. 3967

(SENATE AUTHORS: MANN, Mohamed, Port, Mitchell and Morrison)

DATE	D-PG	OFFICIAL STATUS
02/19/2024	11655	Introduction and first reading Referred to Commerce and Consumer Protection
03/11/2024	12113a	Comm report: Amended, No recommendation, re-referred to Health and Human Services See HF5247

1.1 A bill for an act

1.2 relating to insurance; requiring health plan coverage of abortions and

1.3 abortion-related services; requiring medical assistance coverage of abortions and

1.4 abortion-related services; making conforming changes; amending Minnesota

1.5 Statutes 2022, sections 62D.02, subdivision 7; 62D.20, subdivision 1; 62D.22,

1.6 subdivision 5; 62Q.14; Minnesota Statutes 2023 Supplement, section 256B.0625,

1.7 subdivision 16; proposing coding for new law in Minnesota Statutes, chapter 62Q;

1.8 repealing Minnesota Statutes 2022, section 62A.041, subdivision 3.

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

1.10 Section 1. Minnesota Statutes 2022, section 62D.02, subdivision 7, is amended to read:

1.11 Subd. 7. **Comprehensive health maintenance services.** "Comprehensive health

1.12 maintenance services" means a set of comprehensive health services which the enrollees

1.13 might reasonably require to be maintained in good health including as a minimum, but not

1.14 limited to, emergency care, emergency ground ambulance transportation services, inpatient

1.15 hospital and physician care, outpatient health services and preventive health services.

1.16 ~~Elective, induced abortion, except as medically necessary to prevent the death of the mother,~~

1.17 ~~whether performed in a hospital, other abortion facility or the office of a physician, shall~~

1.18 ~~not be mandatory for any health maintenance organization.~~

1.19 **EFFECTIVE DATE.** This section is effective January 1, 2025, and applies to health

1.20 plans offered, sold, issued, or renewed on or after that date.

1.21 Sec. 2. Minnesota Statutes 2022, section 62D.20, subdivision 1, is amended to read:

1.22 Subdivision 1. **Rulemaking.** The commissioner of health may, pursuant to chapter 14,

1.23 promulgate such reasonable rules as are necessary or proper to carry out the provisions of

1.24 sections 62D.01 to 62D.30. Included among such rules shall be those which provide minimum

2.1 requirements for the provision of comprehensive health maintenance services, as defined
 2.2 in section 62D.02, subdivision 7, and reasonable exclusions therefrom. ~~Nothing in such~~
 2.3 ~~rules shall force or require a health maintenance organization to provide elective, induced~~
 2.4 ~~abortions, except as medically necessary to prevent the death of the mother, whether~~
 2.5 ~~performed in a hospital, other abortion facility, or the office of a physician; the rules shall~~
 2.6 ~~provide every health maintenance organization the option of excluding or including elective,~~
 2.7 ~~induced abortions, except as medically necessary to prevent the death of the mother, as part~~
 2.8 ~~of its comprehensive health maintenance services.~~

2.9 EFFECTIVE DATE. This section is effective January 1, 2025, and applies to health
 2.10 plans offered, sold, issued, or renewed on or after that date.

2.11 Sec. 3. Minnesota Statutes 2022, section 62D.22, subdivision 5, is amended to read:

2.12 Subd. 5. **Other state law.** Except as otherwise provided in sections 62A.01 to 62A.42
 2.13 and 62D.01 to 62D.30, ~~and except as they eliminate elective, induced abortions, wherever~~
 2.14 ~~performed, from health or maternity benefits,~~ provisions of the insurance laws and provisions
 2.15 of nonprofit health service plan corporation laws shall not be applicable to any health
 2.16 maintenance organization granted a certificate of authority under sections 62D.01 to 62D.30.

2.17 EFFECTIVE DATE. This section is effective January 1, 2025, and applies to health
 2.18 plans offered, sold, issued, or renewed on or after that date.

2.19 Sec. 4. Minnesota Statutes 2022, section 62Q.14, is amended to read:

2.20 **62Q.14 RESTRICTIONS ON ENROLLEE SERVICES.**

2.21 No health plan company may restrict the choice of an enrollee as to where the enrollee
 2.22 receives services related to:

2.23 (1) the voluntary planning of the conception and bearing of children, ~~provided that this~~
 2.24 ~~clause does not refer to abortion services;~~

2.25 (2) the diagnosis of infertility;

2.26 (3) the testing and treatment of a sexually transmitted disease; and

2.27 (4) the testing for AIDS or other HIV-related conditions.

2.28 EFFECTIVE DATE. This section is effective January 1, 2025, and applies to health
 2.29 plans offered, sold, issued, or renewed on or after that date.

3.1 Sec. 5. [62Q.524] COVERAGE OF ABORTIONS AND ABORTION-RELATED
 3.2 SERVICES.

3.3 Subdivision 1. Definition. For purposes of this section, "abortion" means any medical
 3.4 treatment intended to induce the termination of a pregnancy with a purpose other than
 3.5 producing a live birth.

3.6 Subd. 2. Required coverage; cost-sharing. (a) A health plan must provide coverage
 3.7 for abortions and abortion-related services, including preabortion services and follow-up
 3.8 services.

3.9 (b) Except as provided in paragraph (c), cost-sharing requirements, including
 3.10 co-payments, coinsurance, and deductibles, must not apply for abortions and abortion-related
 3.11 services.

3.12 (c) A health plan that is a high-deductible health plan in conjunction with a health savings
 3.13 account must include cost-sharing for abortions and abortion-related services at the minimum
 3.14 level necessary to preserve the enrollee's ability to make tax-exempt contributions and
 3.15 withdrawals from the health savings account as provided in section 223 of the Internal
 3.16 Revenue Code of 1986, as amended.

3.17 (d) A health plan must not impose any limitation on the coverage under this section,
 3.18 including but not limited to any utilization review, prior authorization, referral requirements,
 3.19 restrictions, or delays, that is not generally applicable to other coverages under the plan.

3.20 Subd. 3. Exclusion. This section does not apply to managed care organizations or
 3.21 county-based purchasing plans when the plan provides coverage to public health care
 3.22 program enrollees under chapter 256B or 256L.

3.23 EFFECTIVE DATE. This section is effective January 1, 2025, and applies to health
 3.24 plans offered, sold, issued, or renewed on or after that date.

3.25 Sec. 6. Minnesota Statutes 2023 Supplement, section 256B.0625, subdivision 16, is
 3.26 amended to read:

3.27 Subd. 16. **Abortion services.** Medical assistance covers ~~abortion services determined~~
 3.28 ~~to be medically necessary by the treating provider and delivered in accordance with all~~
 3.29 ~~applicable Minnesota laws~~ abortions and abortion-related services, including preabortion
 3.30 services and follow-up services.

4.1 **EFFECTIVE DATE.** This section is effective January 1, 2025, or upon federal approval,
4.2 whichever is later. The commissioner of human services shall notify the revisor of statutes
4.3 when federal approval is obtained.

4.4 Sec. 7. **REPEALER.**

4.5 Minnesota Statutes 2022, section 62A.041, subdivision 3, is repealed.

4.6 **EFFECTIVE DATE.** This section is effective January 1, 2025, and applies to health
4.7 plans offered, sold, issued, or renewed on or after that date.

APPENDIX
Repealed Minnesota Statutes: S3967-1

62A.041 MATERNITY BENEFITS.

Subd. 3. **Abortion.** For the purposes of this section, the term "maternity benefits" shall not include elective, induced abortion whether performed in a hospital, other abortion facility, or the office of a physician.

This section applies to policies and contracts issued, delivered, or renewed after August 1, 1985, that cover Minnesota residents.