

substantial bodily harm, that person may be sentenced to imprisonment for not more than three years or to payment of not more than \$5,000, or both.

**Sec. 3. EFFECTIVE DATE.**

Sections 1 and 2 are effective August 1, 1988, and apply to violations committed on or after that date.

Approved April 26, 1988

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**CHAPTER 656—S.F.No. 1646**

*An act relating to insurance; accident and health; clarifying certain coverages for newborn infants; requiring coverage for services provided to a ventilator-dependent person; modifying coverage for adopted children; providing certain payment and subrogation rights for medical care and services provided to inmates; amending Minnesota Statutes 1986, sections 62A.042; and 62A.044; Minnesota Statutes 1987 Supplement, section 62A.27; proposing coding for new law in Minnesota Statutes, chapters 62A and 243.*

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

Section 1. Minnesota Statutes 1986, section 62A.042, is amended to read:

**62A.042 FAMILY COVERAGE; COVERAGE OF NEWBORN INFANTS.**

Subdivision 1. **INDIVIDUAL FAMILY POLICIES; RENEWALS.** (a) No policy of individual accident and sickness insurance which provides for insurance for more than one person under section 62A.03, subdivision 1, clause (3), and no individual health maintenance contract which provides for coverage for more than one person under chapter 62D, shall be renewed to insure or cover any person in this state or be delivered or issued for delivery to any person in this state unless ~~such~~ the policy or contract includes as insured or covered members of the family any newborn infants immediately from the moment of birth and thereafter which insurance or contract shall provide coverage for illness, injury, congenital malformation or premature birth.

(b) The coverage under paragraph (a) includes benefits for inpatient or outpatient expenses arising from medical and dental treatment up to age 18, including orthodontic and oral surgery treatment, involved in the management of birth defects known as cleft lip and cleft palate. If orthodontic services are eligible for coverage under a dental insurance plan and another policy or contract, the dental plan shall be primary and the other policy or contract shall be secondary in regard to the coverage required under paragraph (a). Payment for dental or orthodontic treatment not related to the management of the congenital condition of cleft lip and cleft palate shall not be covered under this provision.

Subd. 2. **GROUP POLICIES; RENEWALS.** (a) No group accident and

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sickness insurance policy and no group health maintenance contract which provide for coverage of family members or other dependents of an employee or other member of the covered group shall be renewed to cover members of a group located in this state or delivered or issued for delivery to any person in this state unless ~~such~~ the policy or contract includes as insured or covered family members or dependents any newborn infants immediately from the moment of birth and thereafter which insurance or contract shall provide coverage for illness, injury, congenital malformation or premature birth.

(b) The coverage under paragraph (a) includes benefits for inpatient or outpatient expenses arising from medical and dental treatment up to age 18, including orthodontic and oral surgery treatment, involved in the management of birth defects known as cleft lip and cleft palate. If orthodontic services are eligible for coverage under a dental insurance plan and another policy or contract, the dental plan shall be primary and the other policy or contract shall be secondary in regard to the coverage required under paragraph (a). Payment for dental or orthodontic treatment not related to the management of the congenital condition of cleft lip and cleft palate shall not be covered under this provision.

Sec. 2. Minnesota Statutes 1986, section 62A.044, is amended to read:

#### 62A.044 PAYMENTS TO GOVERNMENTAL INSTITUTIONS.

No group or individual policy of accident and sickness insurance issued or renewed after May 22, 1973 pursuant to this chapter, no group or individual service plan or subscriber contract issued or renewed after May 22, 1973 pursuant to chapter 62C, and no group or individual health maintenance contract issued or renewed after August 1, 1984, pursuant to chapter 62D, shall contain any provision excluding, denying, or prohibiting payments for covered and authorized services rendered or paid by a hospital or medical institution owned or operated by the federal, state, or local government, including correctional facilities, or practitioners therein in any instance wherein charges for such services are imposed against the policy holder, subscriber, or enrollee. The unit of government operating the institution may maintain an action for recovery of such charges.

#### Sec. 3. [62A.155] COVERAGE FOR SERVICES PROVIDED TO A VENTILATOR-DEPENDENT PERSON.

Subdivision 1. SCOPE OF COVERAGE. This section applies to all policies of accident and health insurance, group subscriber contracts offered by nonprofit health service plan corporations regulated under chapter 62C, health maintenance contracts regulated under chapter 62D, and health benefit certificates offered through a fraternal beneficiary association regulated under chapter 64B. This section does not apply to policies designed primarily to provide coverage payable on a per diem, fixed indemnity or nonexpense incurred basis, or policies that provide only accident coverage.

Subd. 2. REQUIRED COVERAGE. If a policy, plan, certificate, or con-

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tract referred to in subdivision 1 issued or renewed after August 1, 1988, provides coverage for services provided by a private duty nurse or personal care assistant to a ventilator-dependent person in the person's home, it must provide coverage for up to 120 hours of services provided by a private duty nurse or personal care assistant to the ventilator-dependent person during the time the ventilator-dependent person is in a hospital licensed under chapter 144. The personal care assistant or private duty nurse shall perform only the services of communicator or interpreter for the ventilator-dependent patient during a transition period of up to 120 hours to assure adequate training of the hospital staff to communicate with the patient and to understand the unique comfort, safety and personal care needs of the patient.

Sec. 4. Minnesota Statutes 1987 Supplement, section 62A.27, is amended to read:

#### 62A.27 COVERAGE FOR ADOPTED CHILDREN.

~~No An individual or group policy or plan of health and accident insurance regulated under this chapter or chapter 64B, subscriber contract regulated under chapter 62C, or health maintenance contract regulated under chapter 62D, providing coverage for more than one person may be issued or renewed in this state after August 1, 1983, unless the policy, plan, or contract covers that provides coverage to a Minnesota resident must cover adopted children of the insured, subscriber, or enrollee on the same basis as other dependents. Consequently, the policy or plan shall not contain any provision concerning preexisting condition limitations, insurability, eligibility, or health underwriting approval concerning adopted children.~~

The coverage required by this section is effective from the date of placement for the purpose of adoption and continues unless the placement is disrupted prior to legal adoption and the child is removed from placement.

#### Sec. 5. [243.255] PRIVATE INSURANCE POLICIES; SUBROGATION.

Subdivision 1. DEFINITIONS. As used in this section:

(a) "Commissioner" means the commissioner of corrections;

(b) "Inmate" means a person who has been sentenced to incarceration in a state or local correctional facility, including persons committed in accordance with section 631.425 or released for employment under section 241.26; and

(c) "Private insurance coverage" means coverage for medical care or services under any insurance plan regulated by chapter 62A, 62C, 62D, 64B, or 65B. Private insurance coverage also includes any self-insurance plan providing medical care or services.

Subd. 2. SUBROGATION RIGHTS. When the commissioner or a county agency provides medical care or services pursuant to section 241.021, subdivision 4, or any rule adopted under it to any inmate having private insurance

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coverage, the commissioner or county agency shall be subrogated, to the extent of the cost of services provided, to any rights the inmate may have under the terms of any private insurance coverage. This provision supersedes any inconsistent policy provision.

Subd. 3. CIVIL ACTION. The county attorney may institute a civil action against the carrier of the private insurance coverage to recover under this section on behalf of the county agency.

Subd. 4. POLICY EXCLUSIONS PROHIBITED. The provisions of section 62A.044 apply to this section.

Sec. 6. EFFECTIVE DATES.

Sections 1 and 3 are effective August 1, 1988, and apply to policies issued or renewed on or after that date. Section 4 is effective the day following final enactment.

Approved April 26, 1988

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CHAPTER 657—S.F.No. 1686

*An act relating to the state muffin; designating the blueberry muffin as the state muffin; proposing coding for new law in Minnesota Statutes, chapter 1.*

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

Section 1. [1.1496] STATE MUFFIN.

The blueberry muffin is adopted as the official muffin of the state of Minnesota.

Approved April 26, 1988

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CHAPTER 658—S.F.No. 1711

*An act relating to local government; regulating certain Carlton county employee benefits; permitting Aitkin county regulation of certain public land interests.*

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

Section 1. AITKIN COUNTY PUBLIC LAND ORDINANCES.

Subdivision 1. REGULATION. The Aitkin county board of commissioners may regulate by ordinance the use of lands that are adjacent to public waters

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