

9505.5240 REPORTS; EXCLUSION FROM PARTICIPATION.

Subpart 1. **Quarterly reports to state agencies.** The commissioner shall submit quarterly reports to the commissioners of management and budget, labor and industry, and commerce identifying the providers and health maintenance organizations in compliance with parts 9505.5200 to 9505.5240. The commissioner shall submit a master report of participating providers and HMOs on April 1 of each year and shall submit subsequent quarterly amendments. The commissioner shall publish in the State Register notice of the availability of the reports. The reports must be in a format mutually agreeable to the affected agencies.

Subp. 2. **Notice of noncompliance.** If the commissioner has reason to believe a participating provider or health maintenance organization is not in compliance with parts 9505.5200 to 9505.5240, the commissioner shall notify the provider or HMO in writing of the alleged noncompliance. The notice must state that the commissioners listed in subpart 1 will be notified and the provider or health maintenance organization will be excluded from participating in the other state health care programs listed in part 9505.5210, subpart 14, unless evidence of compliance is provided within 30 days.

Subp. 3. **Exclusion for noncompliance.** The commissioner shall consider evidence provided in response to a notice of alleged noncompliance. Within 30 days after receiving evidence provided, the commissioner shall notify the provider or health maintenance organization whether compliance has been demonstrated. If no evidence was submitted within 30 days of the notice under subpart 2, or the commissioner determines the provider or HMO is not in compliance, the commissioner shall remove the provider or HMO from the list of participating providers and HMOs in the next subsequent quarterly report.

Subp. 4. **Reinstatement.** The commissioner shall reinstate on the list of participating providers and health maintenance organizations in the quarterly report under subpart 1 an excluded provider or HMO that demonstrates compliance with parts 9505.5200 to 9505.5240.

Statutory Authority: *MS s 256B.0644*

History: *18 SR 2651; L 2008 c 204 s 42; L 2009 c 101 art 2 s 109*

Published Electronically: *January 14, 2010*