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State of Minnesota

HOUSE OF REPRESENTATIVES

A bill for an act

relating to human services; specifying procedures for the disenrollment of medical

NINETY-THIRD SESSION

H. F. No. 914

01/26/2023 Authored by Noor, Richardson, Reyer, Hassan, Liebling and others
The bill was read for the first time and referred to the Committee on Health Finance and Policy

1.3	assistance and MinnesotaCare enrollees; providing 12-month continuous medical
1.4	assistance eligibility for certain eligibility categories; providing continuous medical
1.5	assistance eligibility for children up to age six; amending Minnesota Statutes 2022,
1.6	sections 256B.04, by adding a subdivision; 256B.056, subdivision 7.
1.7	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.8	Section 1. Minnesota Statutes 2022, section 256B.04, is amended by adding a subdivision
1.9	to read:
1.10	Subd. 26. Disenrollment under medical assistance and MinnesotaCare. (a) The
1.11	commissioner shall regularly update mailing addresses and other contact information for
1.12	medical assistance and MinnesotaCare enrollees in cases of returned mail and nonresponse
1.13	using information available through managed care and county-based purchasing plans, state
1.14	health and human services programs, and other sources.
1.15	(b) The commissioner shall not disenroll an individual from medical assistance or
1.16	MinnesotaCare in cases of returned mail until the commissioner makes at least two attempts
1.17	by phone, email, or other methods to contact the individual. The commissioner may disenroll
1.18	the individual after providing no less than 30 days for the individual to respond to the most
1.19	recent contact attempt.
1.20	Sec. 2. Minnesota Statutes 2022, section 256B.056, subdivision 7, is amended to read:
1.21	Subd. 7. Period of eligibility. (a) Eligibility is available for the month of application
1.22	and for three months prior to application if the person was eligible in those prior months.
1.23	A redetermination of eligibility must occur every 12 months.

Sec. 2. 1

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2.1	(b) Notwithstanding any other law to the contrary:
2.2	(1) a child six years of age and older but under 21 years of age who is determined eligible
2.3	for medical assistance must remain eligible for a period of 12 months; and
2.4	(2) a child under six years of age who is determined eligible for medical assistance must
2.5	remain eligible through the month in which the child reaches six years of age.
2.6	(c) A child's eligibility under paragraph (b) may be terminated earlier if:
2.7	(i) the child or the child's representative requests voluntary termination of eligibility;
2.8	(ii) the child ceases to be a resident of this state;
2.9	(iii) the child dies; or
2.10	(iv) the agency determines eligibility was erroneously granted at the most recent eligibility
2.11	determination due to agency error or fraud, abuse, or perjury attributed to the child or the
2.12	child's representative.
2.13	(b) (d) For a person eligible for an insurance affordability program as defined in section
2.14	256B.02, subdivision 19, who reports a change that makes the person eligible for medical
2.15	assistance, eligibility is available for the month the change was reported and for three months
2.16	prior to the month the change was reported, if the person was eligible in those prior months.
2.17	EFFECTIVE DATE. This section is effective July 1, 2024, or upon federal approval,
2.18	whichever is later. The commissioner of human services shall notify the revisor of statutes
2.19	when federal approval is obtained.

Sec. 2. 2