

1.1 A bill for an act
1.2 relating to human services; allowing persons with life-threatening medical
1.3 conditions to spend down excess income under MinnesotaCare; amending
1.4 Minnesota Statutes 2006, section 256L.07, subdivision 1, by adding a
1.5 subdivision.

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

1.7 Section 1. Minnesota Statutes 2006, section 256L.07, subdivision 1, is amended to read:

1.8 Subdivision 1. **General requirements.** (a) Children enrolled in the original
1.9 children's health plan as of September 30, 1992, children who enrolled in the
1.10 MinnesotaCare program after September 30, 1992, pursuant to Laws 1992, chapter 549,
1.11 article 4, section 17, and children who have family gross incomes that are equal to or
1.12 less than 150 percent of the federal poverty guidelines are eligible without meeting
1.13 the requirements of subdivision 2 and the four-month requirement in subdivision 3, as
1.14 long as they maintain continuous coverage in the MinnesotaCare program or medical
1.15 assistance. Children who apply for MinnesotaCare on or after the implementation date
1.16 of the employer-subsidized health coverage program as described in Laws 1998, chapter
1.17 407, article 5, section 45, who have family gross incomes that are equal to or less than 150
1.18 percent of the federal poverty guidelines, must meet the requirements of subdivision 2 to
1.19 be eligible for MinnesotaCare.

1.20 (b) Families enrolled in MinnesotaCare under section 256L.04, subdivision 1, whose
1.21 income increases above 275 percent of the federal poverty guidelines, are no longer
1.22 eligible for the program and shall be disenrolled by the commissioner. Individuals enrolled
1.23 in MinnesotaCare under section 256L.04, subdivision 7, whose income increases above
1.24 175 percent of the federal poverty guidelines are no longer eligible for the program and
1.25 shall be disenrolled by the commissioner. For persons disenrolled under this subdivision,

MinnesotaCare coverage terminates the last day of the calendar month following the month in which the commissioner determines that the income of a family or individual exceeds program income limits.

(c) Notwithstanding paragraph (b), children may remain enrolled in MinnesotaCare if ten percent of their gross individual or gross family income as defined in section 256L.01, subdivision 4, is less than the premium for a six-month policy with a \$500 deductible available through the Minnesota Comprehensive Health Association. Children who are no longer eligible for MinnesotaCare under this clause shall be given a 12-month notice period from the date that ineligibility is determined before disenrollment. The premium for children remaining eligible under this clause shall be the maximum premium determined under section 256L.15, subdivision 2, paragraph (b).

(d) Notwithstanding paragraphs (b) and (c), and subdivision 7, parents are not eligible for MinnesotaCare if gross household income exceeds \$25,000 for the six-month period of eligibility.

Sec. 2. Minnesota Statutes 2006, section 256L.07, is amended by adding a subdivision to read:

Subd. 7. Persons with life-threatening medical conditions; excess income.
Notwithstanding subdivision 1, paragraph (b), a person who has excess income is eligible for MinnesotaCare if the person has expenses for medical care for a life-threatening, ongoing medical condition that are more than the amount of the person's excess income, computed by deducting incurred medical expenses from the excess income to reduce the excess to the income standard for the appropriate eligibility category specified in section 256L.04. The person shall elect to have the medical expenses deducted at the beginning of a one-month budget period or at the beginning of a six-month budget period. The commissioner shall allow persons eligible for assistance on a one-month spenddown basis under this subdivision to elect to pay the monthly spenddown amount in advance of the month of eligibility to the state agency in order to maintain eligibility on a continuous basis. If the recipient does not pay the spenddown amount on or before the last business day of the month, the recipient is ineligible for this option for the following month. The local agency shall code the Medicaid Management Information System (MMIS) to indicate that the recipient has elected this option. The state agency shall convey recipient eligibility information relative to the collection of the spenddown to providers through the Electronic Verification System (EVS). A recipient electing advance payment must pay the state agency the monthly spenddown amount on or before noon on the last business day of the month in order to be eligible for this option in the following month. For purposes

3.1 of this subdivision, "life-threatening, ongoing medical condition" means a condition
3.2 listed as a presumptive condition for purposes of obtaining coverage under the Minnesota
3.3 Comprehensive Health Association.