

SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION

S.F. No. 959

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DATE	D-PG	OFFICIAL STATUS
02/07/2019	295	Introduction and first reading Referred to Health and Human Services Finance and Policy

- 1.1 A bill for an act
- 1.2 relating to health care; requiring certain medical assistance enrollees upon eligibility
- 1.3 renewal to receive services through fee-for-service; amending Minnesota Statutes
- 1.4 2018, section 256B.056, subdivision 7a.
- 1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
- 1.6 Section 1. Minnesota Statutes 2018, section 256B.056, subdivision 7a, is amended to read:
- 1.7 Subd. 7a. **Periodic renewal of eligibility.** (a) The commissioner shall make an annual
- 1.8 redetermination of eligibility based on information contained in the enrollee's case file and
- 1.9 other information available to the agency, including but not limited to information accessed
- 1.10 through an electronic database, without requiring the enrollee to submit any information
- 1.11 when sufficient data is available for the agency to renew eligibility.
- 1.12 (b) If the commissioner cannot renew eligibility in accordance with paragraph (a), the
- 1.13 commissioner must provide the enrollee with a prepopulated renewal form containing
- 1.14 eligibility information available to the agency and permit the enrollee to submit the form
- 1.15 with any corrections or additional information to the agency and sign the renewal form via
- 1.16 any of the modes of submission specified in section 256B.04, subdivision 18.
- 1.17 (c) An enrollee who is terminated for failure to complete the renewal process may
- 1.18 subsequently submit the renewal form and required information within four months after
- 1.19 the date of termination and have coverage reinstated without a lapse, if otherwise eligible
- 1.20 under this chapter. An enrollee who is terminated under this paragraph and subsequently
- 1.21 submits a renewal form shall receive services through the fee-for-service system until the
- 1.22 enrollee's next eligibility redetermination.

2.1 (d) Notwithstanding section 256B.69, upon renewal, any enrollee who has not received
2.2 any health care service in the previous year shall not be enrolled in a managed care plan or
2.3 county-based purchasing plan upon renewal and shall receive services through the
2.4 fee-for-service system until the next eligibility redetermination.

2.5 (e) Notwithstanding paragraph (a), individuals eligible under subdivision 5 shall be
2.6 required to renew eligibility every six months.