

taining classified schools and situated along the border of Wisconsin, exempting such school districts from Laws 1963, Chapter 547.

Be it enacted by the Legislature of the State of Minnesota:

Section 1. **Common school districts; continued operation.**
Subdivision 1. The common school districts situated along the border of the state of Minnesota and the state of Wisconsin which have, for the preceding twenty-five years, prior to the effective date of this act been educating pupils of their district in school districts in Wisconsin may continue to operate as common school districts after July 1, 1965, notwithstanding that any of such school districts do not maintain classified schools. Such school districts are not subject to the terms and provisions of Laws 1963, Chapter 547.

Subd. 2. The provisions of subdivision 1 shall remain in effect as long as the school district does not discontinue the practice of education for their district as described in subdivision 1.

Sec. 2. The provisions of this act shall expire July 1, 1969.

Approved May 25, 1965.

CHAPTER 740—S. F. No. 702

[Coded]

An act relating to medical assistance for aged persons; amending Laws 1963, Chapter 595, Section 2, Subdivisions 3 and 8, and Sections 5, 6, 7, and 8, Section 18, Subdivision 1, and Section 20.

Be it enacted by the Legislature of the State of Minnesota:

Section 1. Laws 1963, Chapter 595, Section 2, Subdivision 3, is amended to read:

[256A.02] Medical assistance; aged persons. Subd. 3. “County of *financial responsibility*” means the county wherein the applicant resides at the time he becomes eligible for medical care hereunder:

(1) *For an applicant who resides in this state, the county in which he last resided for one year without receiving public assistance. If he does not have one year of unexcluded time, the county in which he resided for the longest period of unexcluded time.*

(2) *For an applicant who has not resided in this state for a*

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full year, the county in which he has resided the longest time without receiving public assistance.

(3) For an applicant who has not resided in this state for any period of time without receiving public assistance, the county in which he resides at the time of making application.

(4) For the purposes of paragraphs (1) and (2) of this subdivision 3, any period of time an applicant spends in a hospital, sanatorium, rest home, nursing home, boarding home, or similar institution, as defined in Minnesota Statutes 1961, Section 144.50, shall be excluded in determining the county of financial responsibility.

(5) Any person who does not meet the requirements of (1), (2), (3), or (4) above shall be the financial responsibility of the county in which he has resided for the longest period of time during the year preceding the filing of his application, whether that year is excluded or non-excluded time.

Sec. 2. Laws 1963, Chapter 595, Section 2, Subdivision 8, is amended to read:

Subd. 8. "Medical assistance" or "medical care" means payment of part or all of the cost of the following care and services for individuals 65 years of age or older who are not recipients of old age assistance but whose income and resources are insufficient to meet all of such cost:

- (1) In patient hospital services;
- (2) Skilled nursing home services;
- (3) Physicians' services;
- (4) Out patient hospital or clinic services;
- (5) Home health care services;
- (6) Private duty nursing services;
- (7) Physical therapy and related services;
- (8) Dental services;
- (9) Laboratory and x-ray services;
- (10) The following if prescribed by a licensed practitioner: drugs, eyeglasses, dentures and prosthetic devices;
- (11) Diagnostic, screening, and preventive services; and
- (12) Any other medical care or remedial care recognized under state law;

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except that such term does not include any such payment with respect to:

(a) Care or services for any individual who is an inmate of a public institution; except as a patient in a medical institution; or any individual who is a patient in an institution for tuberculosis or mental diseases; or

(b) Care or services for any individual, who is a patient in a medical institution as a result of a diagnosis of tuberculosis or psychosis; with respect to any period after the individual has been a patient in such an institution; as a result of such diagnosis; for 42 days.

Sec. 3. Laws 1963, Chapter 595, Section 5, is amended to read:

Sec. 5. [256A.05] **Eligibility.** Medical assistance to the aged may be paid to any person who:

(a) is 65 years of age or over;

(b) resides in Minnesota or, if absent from the state, is deemed to be a resident of Minnesota in accordance with regulations of the state agency;

(c) has alone or, if married, together with his spouse an equity in real property not in excess of \$15,000; *provided, however, that if any person has an equity in real property which is not occupied by such person or, if married, by his spouse and which does not produce a reasonable return, such person's anticipated annual income under clause (e) of this section shall be considered to be increased by such amount as the county agency shall determine, pursuant to regulations of the state agency, to be a reasonable annual return for such equity in real property;*

(d) if single, does not have more than \$750 in cash or other liquid assets or, if married, he and his spouse together do not have more than \$1,000 in cash or other liquid assets;

(e) if single, has *gross anticipated annual income not exceeding \$1,800 annually or, if married, he and his spouse together have gross combined anticipated annual income not exceeding \$2,400 annually, in either case as defined by regulation of the state agency.*

(f) has, or his spouse has, or he and his spouse together have, *or others in their behalf have, in the period of 12 months preceding his application, and in each period of 12 months following his application, spent or become obligated to spend not less than \$200 for medical care for himself, or for himself and his spouse, for*

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premiums on health care insurance covering himself, *or himself and his spouse*, or for any combination thereof; provided, however, that a county agency, in its discretion, *may permit eligibility of an applicant who has not met shall waive* the requirements of this paragraph, *when authorized so to do by regulations of the state agency*, if he the applicant and his spouse do not have sufficient resources or income to enable them reasonably so to do; and;

(g) has spent all proceeds received, and has agreed to expend all proceeds receivable, by him or his spouse from health and accident insurance policies on medical care for himself and his spouse, if any.

Sec. 4. Laws 1963, Chapter 595, Section 6, is amended to read:

Sec. 6 [256A.06] **Exceptions to eligibility requirements.** A county agency, in its discretion, *may shall, when authorized by regulations of the state agency*, permit eligibility of an applicant having liquid assets in excess of the amount set out above when liquidation of such assets would cause undue hardship. Household goods and furniture in use in the home, wearing apparel, insurance policies the cash surrender value of which does not exceed \$1,000 per person, and a lot in a burial ground shall not be considered in determining whether or not an applicant has met the requirement of section 5 hereof.

Sec. 5. Laws 1963, Chapter 595, Section 7, is amended to read:

Sec. 7. [256A.07] **Application, filing and form.** An applicant for medical assistance hereunder, *or a person acting in his behalf*, shall file his application with a county agency in such manner and form as shall be prescribed by the state agency.

Sec. 6. Laws 1963, Chapter 595, Section 8, is amended to read:

Sec. 8. [256A.08] **Verification.** All statements in the application shall be sworn to or affirmed by the applicant, *the recipient, or the person acting in his behalf*, certifying that all facts set forth therein are true in every material respect. *Any applicant, any recipient, or any person acting on behalf of either shall produce, and swear to or affirm the truth of, whatever evidence is determined by a county agency, in conformity with regulations of the state agency, to be available and necessary to establish either initial or continuing eligibility hereunder.* Any applicant, *or any recipient, or any person acting on behalf of either*, shall have the right to produce any evidence that he desires and be represented by a friend or counsel.

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Sec. 7. Laws 1963, Chapter 595, Section 18, Subdivision 1, is amended to read:

Sec. 18. [256A.18] **False statements; transfer of property.** Subdivision 1. Any person who obtains or attempts to obtain, by means of a willfully false statement or representation, by impersonation or by any other fraudulent device, medical assistance to which he is not entitled; or transfers any real or personal property for the purpose of, or with the intent of, obtaining or remaining eligible to obtain medical assistance hereunder shall be ineligible for medical assistance hereunder and shall be guilty of a gross misdemeanor. Any person, or such person's spouse if living with such person, who within three years immediately preceding the date of application for medical assistance *hereunder* has transferred *or who while receiving medical assistance hereunder transfers* any real or personal property *to any person without receiving a reasonable consideration therefor* shall be presumed to have done so in order to become *or remain* eligible for medical assistance hereunder *and said applicant. Such person or such person and his spouse shall have the burden of proving before the proper agency or court to the satisfaction of the county agency to which application is made* that the transfer was not for the purpose of qualifying under this act *becoming or remaining eligible for medical assistance hereunder and did not deprive such person or such person and his spouse of a resource that might otherwise have been used to meet his or their current needs.*

Sec. 8. Laws 1963, Chapter 595, Section 20, is amended to read:

Sec. 20. [256A.20] **Division of cost.** The cost of medical assistance paid by each county of *financial* responsibility shall be borne as follows:

(a) Payments shall be made by the state to the county for that portion of medical assistance paid by the federal government and the state on or before the 20th day of each month for the succeeding month upon requisition from the county as to the amount required for the succeeding month. The expense of assistance not paid by federal funds available for that purpose, shall be shared equally by state and county;

(b) Federal funds available for administrative purposes shall be distributed between the state and the county in the same proportion that expenditures were made.

Approved May 25, 1965.

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