(c) the estate of a deceased victim if the estate has incurred economic loss;

(d) any other person who has incurred economic loss by purchasing any of the products, services, and accommodations described in section 299B.02, clause (7), (a) (i) and (a) (ii) for a victim;

(e) the guardian, guardian ad litem, conservator or authorized agent of any of these persons.

Sec. 2. Minnesota Statutes 1974, Chapter 299B, is amended by adding a section to read:

[299B.071] ATTORNEYS FEES; LIMITATION FOR REPRESENTATION BEFORE BOARD. The board may limit the fee charged by any attorney for representing a claimant before the board.

Approved June 2, 1975.

CHAPTER 247—H.F.No.1074
[Coded in Part]

An act relating to public welfare; establishing a lien on certain causes of action accruing to recipients of medical assistance; authorizing the assignment of insurance proceeds and the subrogation to the commissioner of public welfare of the rights of any recipient of medical assistance having private health care coverage; amending Minnesota Statutes 1974, Chapters 62A, by adding a section; 62C, by adding a section; 64A, by adding a section; 256B, by adding sections; and Sections 64A.23; 256B.02, by adding a subdivision; 256B.06, Subdivision 1; and 393.10, Subdivision 2.

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

Section 1. Minnesota Statutes 1974, Chapter 62A, is amended by adding a section to read:

[62A.045] PUBLIC WELFARE; MEDICAL ASSISTANCE; PRIVATE COVERAGE; PAYMENTS TO WELFARE RECIPIENTS. No policy of accident and sickness insurance issued or renewed after August 1, 1975, shall contain any provision denying or reducing benefits because services are rendered to an insured or dependent who is eligible for or receiving medical assistance pursuant to chapter 256B.

Sec. 2. Minnesota Statutes 1974, Chapter 62C, is amended by adding a section to read:

[62C.141] PAYMENTS TO WELFARE RECIPIENTS. After August 1, 1975, no service plan corporation shall deliver, issue for delivery, changes or additions indicated by underline deletions by strikeout.
ery, or renew any subscriber's contract which contains any provision denying or reducing benefits because services are rendered to a subscriber or dependent who is eligible for or receiving medical assistance pursuant to chapter 256B.

Sec. 3. Minnesota Statutes 1974, Chapter 64A, is amended by adding a section to read:

[64A.221] PAYMENT TO WELFARE RECIPIENTS. After August 1, 1975, no association authorized to do business in this state which provides or pays for any health care benefits shall issue any certificate which contains any provision denying or reducing benefits because services are rendered to a certificate holder or beneficiary who is eligible for or receiving medical assistance pursuant to chapter 256B.

Sec. 4. Minnesota Statutes 1974, Section 64A.23, is amended to read:

64A.23 BENEFITS NOT ATTACHABLE. Except as provided in chapter 256B, the money or other benefits, charity, relief, or aid to be paid, provided, or rendered by any association authorized to do business under this chapter shall, neither before nor after being paid, be liable to attachment, garnishment, or other process and shall not be seized, taken, appropriated, or applied by any legal or equitable process or operation of laws to pay any debt or liability of a certificate holder or of any beneficiary named in a certificate, or of any person who may have any right thereunder.

Sec. 5. Minnesota Statutes 1974, Section 393.10, Subdivision 2, is amended to read:

Subd. 2. PUBLIC WELFARE; MEDICAL ASSISTANCE LIEN. Such—the county board or county welfare board may perfect and enforce its lien by following the procedures set forth in sections 514.69, 514.70 and 514.71, except that it shall have 180 days from the date when the last item of medical, surgical or hospital care was furnished in which to file its lien. Provided, however, that no lien pursuant to this section shall be effective as to any payment made prior to the time that the lien is filed.

Sec. 6. Minnesota Statutes 1974, Chapter 256B, is amended by adding a section to read:

[256B.042] THIRD PARTY LIABILITY. Subdivision 1. When the state agency provides, pays for or becomes liable for medical care, it shall have a lien for the cost of the care upon any and all causes of action which accrue to the person to whom the care was furnished, or to his legal representatives, as a result of the injuries which necessitated the medical care.

Subd. 2. The state agency may perfect and enforce its lien by fol...
following the procedures set forth in sections 514.69, 514.70 and 514.71, except that it shall have one year from the date when the last item of medical care was furnished in which to file its verified lien statement, and the statement shall be filed with the appropriate clerk of court in the county of financial responsibility. The verified lien statement shall contain the following: the name and address of the person to whom medical care was furnished, the date of injury, the name and address of the vendor or vendors furnishing medical care, the dates of the service, the amount claimed to be due for the care, and, to the best of the state agency's knowledge, the names and addresses of all persons, firms or corporations claimed to be liable for damages arising from the injuries. This section shall not affect the priority of any attorney's lien.

Sec. 7. Minnesota Statutes 1974, Chapter 256B, is amended by adding a section to read:

[256B.37] PRIVATE INSURANCE POLICIES. Subdivision 1. Upon furnishing medical assistance to any person having private health care coverage, the state agency shall be subrogated, to the extent of the cost of medical care furnished, to any rights the person may have under the terms of any private health care coverage. The right of subrogation does not attach to benefits paid or provided under private health care coverage prior to the receipt of written notice of the exercise of subrogation rights by the carrier issuing the health care coverage.

Subd. 2. To recover under this section, the attorney general, or the appropriate county attorney, acting upon direction from the attorney general, may institute or join a civil action against the carrier of the private health care coverage.

Sec. 8. Minnesota Statutes 1974, Chapter 256B, is amended by adding a section to read:

[256B.39] AVOIDANCE OF DUPLICATE PAYMENTS. Billing statements forwarded to recipients of medical assistance by vendors seeking payment for medical care rendered shall clearly state that reimbursement from the state agency is contemplated.

Sec. 9. Minnesota Statutes 1974, Section 256B.02, is amended by adding a subdivision to read:

Subd. 9. "Private health care coverage" means any plan regulated by chapters 62A, 62C or 64A. Private health care coverage also includes any self-insurance plan providing health care benefits.

Sec. 10. Minnesota Statutes 1974, Section 256B.06, Subdivision 1, is amended to read:

256B.06 ELIGIBILITY REQUIREMENTS. Subdivision 1. Medical
assistance may be paid for any person:

(1) Who is eligible for or receiving public assistance under the aid to families with dependent children program; or

(2) Who is eligible for or receiving supplemental security income for the aged, blind and disabled; or

(3) Who except for the amount of income or resources would qualify for supplemental security income for the aged, blind and disabled, or aid to families with dependent children and is in need of medical assistance; or

(4) Who is under 21 years of age and in need of medical care that neither he nor his relatives responsible under sections 256B.01 to 256B.26 are financially able to provide; or

(5) Who is residing in a hospital for treatment of mental disease or tuberculosis and is 65 years of age or older and without means sufficient to pay the per capita hospital charge; and

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

(7) Who alone, or together with his spouse, does not have equity in real property in excess of $15,000; and

(8) Who, if single, does not have more than $750 in cash or liquid assets or, if married, whose cash or liquid assets do not exceed $1,000 plus $150 for each additional legal dependent; and

(9) Who has or anticipates receiving an annual income not in excess of $2,600 for a single person, or $3,250 for two family members (man and wife, parent and child, or two siblings), plus $625 for each additional legal dependent, or who has income in excess of these maxima and in the month of application (or during the three months prior to the month of application) incurs expenses for medical care that total more than one-half of the annual excess income in accordance with the regulations of the state agency. In such excess income cases, eligibility shall be limited to a period of six months beginning with the first of the month in which these medical obligations are first incurred.

Who has continuing monthly expenses for medical care that are more than the amount of his excess income, computed on a monthly basis, in which case eligibility may be established before the total income obligation referred to in the preceding paragraph is incurred, and medical assistance payments may be made to cover the monthly unmet medical need. In licensed nursing home and state hospital cases, both excess income and income over and above that required for justified needs are to be applied to the cost of institutional care; and

Changes or additions indicated by underline deletions by strikeout
(10) Who has applied or agrees to apply all proceeds received or receivable by him or his spouse from health and accident insurance policies-private health care coverage on to the costs of medical care for himself, his spouse, and children. The state agency may require from any applicant or recipient of medical assistance the assignment of any rights accruing under private health care coverage. Any rights or amounts so assigned shall be applied against the cost of medical care paid for under this chapter. Any assignment shall not be effective as to benefits paid or provided under private health care coverage prior to receipt of the assignment by the person or organization providing the benefits.

Approved June 2, 1975.

CHAPTER 248—H.F.No.1167

An act relating to motor vehicles; registration and taxation; authorizing the transfer of number plates issued to a vehicle used in driver education courses in public schools to another vehicle used for the same purposes; amending Minnesota Statutes 1971, Section 168.12, Subdivision 1, as amended.

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

Section 1. Minnesota Statutes 1971, Section 168.12, Subdivision 1, as amended by Laws 1973, Chapter 218, Section 7, is amended to read:

Subdivision 1. MOTOR VEHICLES; DRIVER EDUCATION VEHICLE PLATES; NUMBER PLATES; VISIBILITY, PERIODS OF ISSUANCE. The registrar, upon such approval and payment, issues to the applicant the number plates required by law, bearing an abbreviation of the state name and the number assigned. The number assigned may be a combination of a letter or sign with figures. The color of the plates and the color of the abbreviation of the state name and the number assigned shall be in marked contrast. The plates shall be lettered, spaced, or distinguished to suitably indicate the registration of the vehicle according to the regulations of the registrar, and when a vehicle is registered on the basis of total gross weight, the plates issued shall clearly indicate by letters or other suitable insignia the maximum gross weight for which the tax has been paid. These number plates shall be so treated as to be at least 100 times brighter than the conventional painted number plates. When properly mounted on an unlighted vehicle, these number plates, when viewed from a vehicle equipped with standard headlights, shall be visible for a distance of not less than 1,500 feet and readable for a distance of not less than 110 feet. At the end of the registration periods in effect immediately before April 2, 1965, and for subsequent registration periods, the registrar shall issue these number plates for the following periods:

Changes or additions indicated by underline deletions by strikeout