- 1 Department of Human Services
- 2 Adopted Permanent Rules Relating to Family Planning
- 3 9505.5300 APPLICABILITY.
- 4 Parts 9505.5300 to 9505.5325 govern the Minnesota Family
- 5 Planning Program Section 1115 Demonstration Project. The
- 6 demonstration project is a Medicaid waiver demonstration project
- 7 approved by the Centers for Medicare and Medicaid Services to
- 8 provide federally approved contraception management services to
- 9 eligible low-income persons.
- 10 9505.5305 DEFINITIONS.
- 11 Subpart 1. Scope. The terms used in parts 9505.5300 to
- 12 9505.5325 have the meanings given them in this part.
- Subp. 2. Applicant. "Applicant" means a person who
- 14 submits a written demonstration project application to the
- 15 department for a determination of eligibility for the
- 16 demonstration project.
- 17 Subp. 3. Certified family planning services provider.
- 18 "Certified family planning services provider" means a family
- 19 planning services provider that meets the requirements of part
- 20 9505.5315, subpart 1.
- 21 Subp. 4. Commissioner. "Commissioner" means the
- 22 commissioner of human services or the commissioner's designee.
- Subp. 5. Contraception management services.
- 24 "Contraception management services" means a scope of family
- 25 planning services limited to initiating or obtaining an
- 26 enrollee's contraceptive method and maintaining effective use of

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- 1 that method.
- Subp. 6. Countable income. "Countable income" means the
- 3 income, including deemed income, used to determine a person's
- 4 eligibility for the demonstration project.
- 5 Subp. 7. County agency. "County agency" has the meaning
- 6 given in Minnesota Statutes, section 256B.02, subdivision 6.
- 7 Subp. 8. Demonstration project. "Demonstration project"
- 8 means the Minnesota Family Planning Program Section 1115
- 9 Demonstration Project, Project Number 11-W-00183/5.
- 10 Subp. 9. Department. "Department" means the Minnesota
- 11 Department of Human Services.
- 12 Subp. 10. Enrollee. "Enrollee" means a person enrolled in
- 13 the demonstration project.
- 14 Subp. 11. Family planning services provider. "Family
- 15 planning services provider" includes the providers listed in
- 16 part 9505.0280, subpart 3, and clinical nurse specialists,
- 17 laboratories, ambulatory surgical centers, federally qualified
- 18 health centers, Indian Health Services, public health nursing
- 19 clinics, and physician assistants who are authorized providers
- 20 under part 9505.0195.
- Subp. 12. Family size. "Family size" means the number of
- 22 people used to determine a person's income standard. The family
- 23 size includes the person and the following people who live with
- 24 the person: the person's spouse, the biological and adoptive
- 25 children of the person who are under age 21, and the biological
- 26 and adoptive children of the person's spouse who are under age
- 27 21.

- 1 Subp. 13. Minnesota health care program. "Minnesota
- 2 health care program" means medical assistance under Minnesota
- 3 Statutes, chapter 256B, general assistance medical care under
- 4 Minnesota Statutes, section 256D.03, and MinnesotaCare under
- 5 Minnesota Statutes, chapter 256L.
- 6 Subp. 14. Presumptive eligibility. "Presumptive
- 7 eligibility" means the temporary period of eligibility for the
- 8 demonstration project that is determined at the point of service
- 9 by a certified family planning services provider.
- 10 Subp. 15. Qualified noncitizen eligible for medical
- 11 assistance with federal financial participation. "Qualified
- 12 noncitizen eligible for medical assistance with federal
- 13 financial participation" means a person that meets the
- 14 requirements of Minnesota Statutes, section 256B.06, subdivision
- 15 4.
- 16 Subp. 16. Resident. "Resident" means a person who meets
- 17 the requirements in part 9505.0030.
- 18 9505.5310 DEMONSTRATION PROJECT ELIGIBILITY, APPLICATION,
- 19 ENROLLMENT, AND DOCUMENTATION.
- 20 Subpart 1. General eligibility. The eligibility and
- 21 coverage requirements in this subpart apply to applicants and
- 22 enrollees.
- A. Except as provided in subpart 2, an applicant or
- 24 enrollee must meet the following requirements to be eligible for
- 25 the demonstration project:
- 26 (1) be a citizen of the United States or a
- 27 qualified noncitizen eligible for medical assistance with

- 1 federal financial participation; (2) be a Minnesota resident; 2 (3) be 15 years of age or older and under age 50; 3 (4) have countable income at or below 200 percent 4 of the federal poverty quidelines for the family size. 5 Countable income is determined according to the income rules 6 applied in eligibility determinations for families and children 7 8 in the medical assistance program according to Minnesota Statutes, section 256B.056, and United States Code, title 42, 9 10 chapter 7, subchapter XIX, section 1396u-1, as follows: 11 (a) income includes all categories of earned 12 and unearned income used in eligibility determinations for 13 families and children under the medical assistance program; 14 (b) income does not include any categories 15 of income that are excluded for purposes of determining 16 eligibility for families and children in the medical assistance 17 program; 18 (c) income methodologies, such as earned income deductions and disregards, used to determine eligibility 19 20 for families and children in the medical assistance program according to Minnesota Statutes, section 256B.056, subdivisions 21 22 la and lc, do not apply to the determination of countable income; and 23 (d) income deeming requirements used to
- 24 determine eligibility for families and children in the medical 25 assistance program apply, except that for a person under age 21, 26 27

- 1 person;
- 2 (5) not be pregnant;
- 3 (6) not be enrolled in the Minnesota health care
- 4 program or other health service program administered by the
- 5 department; and
- 6 (7) not be an institutionalized individual as
- 7 described under Code of Federal Regulations, title 42, sections
- 8 435.1008 and 435.1009.
- 9 B. Participation in the demonstration project does
- 10 not require the consent of anyone other than the applicant.
- 11 C. Asset requirements do not apply to applicants and
- 12 enrollees.
- D. Applicants and enrollees must report available
- 14 third-party coverage and cooperate with the department in
- 15 obtaining third-party payments. The department shall waive this
- 16 requirement if the applicant or enrollee states that reporting
- 17 third-party coverage could violate the applicant's or enrollee's
- 18 privacy.
- 19 Subp. 2. Presumptive eligibility. Services covered under
- 20 the demonstration project may be provided during a presumptive
- 21 eligibility period.
- 22 A. A certified family planning services provider will
- 23 screen a person for demonstration project eligibility using
- 24 preliminary information provided by the person. A person who,
- 25 based on the preliminary information, appears to meet the
- 26 eligibility requirements in part 9505.5310, subpart 1, item A,
- 27 subitems (2) to (6), is presumptively eligible for the

- 1 demonstration project.
- 2 B. The presumptive eligibility period begins the
- 3 first day of the month that a certified family planning services
- 4 provider determines that a person is presumptively eligible.
- 5 The presumptive eligibility period ends the last day of the
- 6 month following the month that the certified family planning
- 7 services provider determines that a person was presumptively
- 8 eligible.
- 9 C. A person determined presumptively eligible must
- 10 comply with part 9505.5310, subpart 1, item D.
- 11 D. A person may receive presumptive eligibility once
- 12 during a 12-month period.
- 13 Subp. 3. Enrollment. An applicant must apply for the
- 14 demonstration project using forms provided by the department.
- 15 A. The department or county agency must determine an
- 16 applicant's eligibility for the demonstration project within 45
- 17 days of receipt of a completed application.
- B. Except as provided in item C, eligibility begins
- 19 the first day of the month of application. If a completed
- 20 application form is submitted within 30 days of the request, the
- 21 month of application includes the month the department or county
- 22 agency receives a written request for the demonstration project
- 23 consisting of at least the name of the applicant, a means to
- 24 locate the applicant, and the signature of the applicant.
- 25 C. A person who is eligible under subparts 1 and 2
- 26 and files a demonstration project application during the
- 27 presumptive eligibility period is eligible for ongoing coverage

- 1 on the first day of the month following the month that
- 2 presumptive eligibility ends.
- 3 Subp. 4. Application and documentation. The application
- 4 and documentation requirements in this subpart apply to all
- 5 applicants and enrollees.
- A. An enrollee is eligible for the demonstration
- 7 project for one year regardless of changes in income or family
- 8 size. Eligibility will end prior to the annual renewal if the
- 9 enrollee:
- 10 (1) dies;
- 11 (2) is no longer a Minnesota resident;
- 12 (3) voluntarily terminates eligibility;
- 13 (4) enrolls in the Minnesota health care program
- 14 or other health service program administered by the department;
- 15 (5) reaches 50 years of age;
- 16 (6) becomes pregnant;
- 17 (7) becomes an institutionalized individual under
- 18 Code of Federal Regulations, title 42, sections 435.1008 and
- 19 435.1009; or
- 20 (8) is no longer a citizen of the United States
- 21 or a qualified noncitizen eligible for medical assistance with
- 22 federal financial participation.
- B. Applicants and enrollees must document their
- 24 income at application.
- 25 C. Enrollees must complete an annual application on
- 26 forms provided by the department.
- D. Applicants and enrollees must provide

- 1 documentation of immigration status at application. The
- 2 department or county agency will verify applicant and enrollee
- 3 immigration status according to Minnesota Statutes, section
- 4 256.01, subdivision 18.
- 5 E. Applicants and enrollees must report a change in
- 6 an eligibility factor to the department or county agency within
- 7 ten days of learning about the change. Applicants and enrollees
- 8 who fail to report a change that would have resulted in
- 9 ineligibility for the demonstration project will be disenrolled
- 10 from the demonstration project and will be ineligible for the
- 11 demonstration project for a period of 12 months following the
- 12 date of disenrollment. If the only unreported change is a
- 13 pregnancy, applicants and enrollees will not be subject to the
- 14 12 months ineligibility period, but pregnant applicants and
- 15 enrollees will be disenrolled from the demonstration project and
- 16 may reapply for the demonstration project following the end of
- 17 the pregnancy.
- 18 F. Applicants and enrollees must provide information,
- 19 documents, and any releases requested by the department or
- 20 county agency that are necessary to verify eligibility
- 21 information. An applicant or enrollee who refuses to authorize
- 22 verification of an eligibility factor, including a Social
- 23 Security number, is not eligible for the demonstration project,
- 24 except as provided in Code of Federal Regulations, title 42,
- 25 section 435.910(h)(2).
- 26 G. Applicants must document citizenship as required
- 27 by the federal Deficit Reduction Act of 2005, Public Law

- 1 109-71. Persons screened for presumptive eligibility under
- 2 subpart 2 are not required to document citizenship.
- 3 H. An applicant may withdraw an application according
- 4 to the provisions of part 9505.0090, subpart 4.
- 5 Subp. 5. Enrollment. To be considered for Minnesota
- 6 health care program eligibility, an enrollee must complete the
- 7 department's health care application. Applicants and enrollees
- 8 shall not use a demonstration project application form to apply
- 9 for the Minnesota health care program. People who complete the
- 10 department's health care application and are determined
- ll ineligible for the Minnesota health care program, either at
- 12 application or during enrollment, may authorize a demonstration
- 13 project eligibility determination using the information provided
- 14 in the department's health care application and updated at
- 15 required intervals.
- 16 Subp. 6. Confidentiality. Private data about persons
- 17 screened for eligibility, applicants, and enrollees must be
- 18 disclosed according to the provisions of the following statutes
- 19 and rules:
- A. part 1205.0500 and Minnesota Statutes, chapter 13;
- 21 B. Minnesota Statutes, section 144.335;
- 22 C. Minnesota Statutes, section 144.343;
- D. Code of Federal Regulations, title 45, parts 160,
- 24 162, and 164; and
- 25 E. other applicable state and federal laws, statutes,
- 26 rules, and regulations affecting the collection, storage, use,
- 27 and dissemination of protected, private, and confidential health

- 1 and other information.
- Subp. 7. Notices. Applicants and enrollees may arrange to
- 3 receive notices in a manner other than having notices mailed to
- 4 the applicant's or enrollee's home address.
- 5 9505.5315 PROVIDERS OF FAMILY PLANNING SERVICES.
- 6 Subpart 1. Certified family planning services provider
- 7 requirements. To become a certified family planning services
- 8 provider, a family planning services provider must:
- 9 A. sign the business associate agreement;
- B. complete required training;
- 11 C. provide information about presumptive eligibility
- 12 to interested persons;
- D. help interested persons complete demonstration
- 14 project applications and forms;
- 15 E. use the department's eligibility verification
- 16 system to verify a person screened for demonstration project
- 17 eligibility does not receive Minnesota health care program
- 18 coverage;
- 19 F. determine presumptive eligibility;
- 20 G. give required notices to a person screened for
- 21 eligibility;
- 22 H. promptly forward completed applications and forms
- 23 to the department; and
- 24 I. cooperate with department application tracking and
- 25 program evaluation activities.
- Subp. 2. Covered services. The demonstration project
- 27 covers contraception management services and certain additional

- 1 medical diagnosis or treatment services that are provided within
- 2 the context of a visit for contraception management services.
- 3 All services covered by the demonstration project are listed in
- 4 Attachment B of the Centers for Medicare and Medicaid Services
- 5 Special Terms and Conditions for the Minnesota Family Planning
- 6 Program Section 1115 Demonstration, Project Number 11-W-00183/5
- 7 and its amendments, which are incorporated by reference. This
- 8 document can be found at the Minnesota Law Library, Judicial
- 9 Center, 25 Rev. Dr. Martin Luther King Jr. Blvd., Saint Paul,
- 10 Minnesota 55155. Attachment B is subject to frequent change.
- 11 Subp. 3. Payment for services. Family planning services
- 12 providers are paid for covered services as follows:
- A. No cost-sharing requirements apply to services
- 14 provided under the demonstration project.
- B. Payments will be made on a fee-for-service basis
- 16 to providers for services provided under the demonstration
- 17 project.
- 18 C. All covered services provided during the
- 19 presumptive eligibility period according to part 9505.5310,
- 20 subpart 2, will be reimbursed.
- 21 D. The demonstration project is the payer of last
- 22 resort. The demonstration project will not cover drugs that are
- 23 covered under Medicare Part D as defined in the Medicare
- 24 Prescription Drug, Improvement, and Modernization Act of 2003,
- 25 Public Law 108-173, section 1860D-2(e), for individuals eligible
- 26 for drug coverage as defined in the Medicare Prescription Drug,
- 27 Improvement, and Modernization Act of 2003, Public Law 108-173,

- 1 section 1860D-1(a)(3)(A).
- 2 E. Parts 9505.2160 to 9505.2245, regarding
- 3 surveillance and integrity review, apply to services provided
- 4 under parts 9505.5300 to 9505.5325.
- 5 9505.5325 APPEALS.
- 6 Subpart 1. Notice. The commissioner must follow the
- 7 notification procedures in part 9505.0125 if the commissioner
- 8 denies, suspends, reduces, or terminates eligibility or covered
- 9 health services, except as provided in subpart 3.
- 10 Subp. 2. Appeal process. A person aggrieved by a
- 11 determination or action of the commissioner under parts
- 12 9505.5300 to 9505.5325 may appeal the department's or county
- 13 agency's determination or action according to Minnesota
- 14 Statutes, section 256.045, except as provided in subpart 3.
- Subp. 3. Denial of presumptive eligibility. There is no
- 16 right of appeal for a denial of presumptive eligibility.