

Revision: HCFA-PM-95-3 (MB)
MAY 1995

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State/Territory: Minnesota

(b) Adjustments or Recoveries

The State complies with the requirements of section 1917(b) of the Act and regulations at 42 CFR 433.366(h) – (i).

Adjustments or recoveries for Medicaid claims correctly paid are as follows:

(1) For permanently institutionalized individuals, adjustments or recoveries are made from the individual's estate or lien imposed because of medical assistance paid on behalf of the individual for services provided in a nursing facility, ICF/MR, or other medical institution.

X Adjustments or recoveries are made for all other medical assistance paid on behalf of the individual.

(2) The State determines "permanent institutional status" of individuals under the age of 55 other than those with respect to whom it imposes liens on real property under §1917(a)(1)(B) (even if it does not impose those liens).

(3) For any individual who received medical assistance at age 55 or older, adjustments or recoveries of payments are made from the individual's estate for nursing facility services, home and hospital and prescription drug services.

X In addition to adjustment or recovery of payments for services listed above, payments are adjusted or recovered for other services under the State plan as listed below:

All medical assistance (MA) services except as specified in (b)(4).

(4) Limitation on Estate Recovery – Medicare Cost Sharing

(i) Medical assistance for Medicare cost sharing is protected from estate recovery for individuals qualified for a Medicare Savings Program group under 1902(a)(10)(E). This protection extends to the Medicare cost sharing benefits for each group under 1902(a)(10)(E) with dates of service on or after January 1, 2010: for QMB, Part A and B premiums, deductibles and coinsurance; for SLMB and QI, Part B premiums; and for QDWI, Part A premiums. The date of service for Medicare deductibles and coinsurance for QMB individuals is the date the request for payment is received by the State Medicaid agency. The date of service for Medicare Part A or B premiums is the date the State Medicaid Agency pays the premium. Individuals qualified for a Medicare Savings Program group under 1902(a)(10)(E) as QMB and SLMB individuals who also qualify for full Medicaid benefits under another eligibility group, receive the same estate recovery protection as stated above for QMB and SLMB individuals.

(ii) The exemption applies to a qualified individual under 1902(a)(10)(E) who is age 55 or older.

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October 1987

OMB No: 0938-0193

State: Minnesota

Citation

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| <p>455.103
44 FR 41644
1902(a)(38)
100-93, sec. 8(f)</p> | <p>4.31 <u>Disclosure of Information by Providers and Fiscal Agents</u>
The Medicaid agency has established procedures for the disclosure of information by providers and fiscal agents as specified in 42 CFR P.L. 455.104 through 455.106 and sections 1128(b)(9) and 1902(a)(38) of the Act.</p> |
| <p>435.940 - 435.960
52 FR 5967</p> | <p>4.32 <u>Income and Eligibility Verification System</u>
(a) The Medicaid agency has established a system for income and eligibility verification in accordance with the requirements of 42 CFR 435.940 through 435.960.

(b) Attachment 4.32-A describes, in accordance with 42 CFR 435.948(a)(6), the information that will be requested in order to verify eligibility or the correct payment amount and the agencies and the State(s) from which that information will be requested.

(c) <u>The State has an eligibility determination system that provides for data matching through the Public Assistance Reporting Information System (PARIS), or any successor system, including matching with medical assistance programs operated by other States. The information that is requested will be exchanged with States and other entities legally entitled to verify title XIX applicants and individuals eligible for covered title XIX services consistent with applicable PARIS agreements.</u></p> |

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State Minnesota

Citation	Groups Covered
1902 (a)(10)(E)(i), 1905(p) and <u>1860D-14(a)(3)(D)</u> of the Act	<p>A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (continued)</p> <p>25. Qualified Medicare beneficiaries –</p> <ul style="list-style-type: none">a. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);b. Whose income does not exceed 100 percent of the Federal poverty level; andc. Whose resources do not exceed twice <u>three times</u> the maximum standard under SSI, <u>adjusted annually by the increase in the consumer price index.</u> <p>(Medical assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)</p>
1902(a)(10)(E)(ii) 1905(a) and 1905(p)(3)(A)(i) of the Act	<p>26. Qualified disabled and working individuals --</p> <ul style="list-style-type: none">a. Who are entitled to hospital insurance benefits under Medicare Part A under section 1818A of the Act;b. Who income does not exceed 200 percent of the Federal poverty level; andc. Whose resources do not exceed twice the maximum standard under SSI.d. Who are not otherwise eligible for medical assistance under Title XIX of the Act. <p>(Medical assistance for this group is limited to Medicare Part A premiums under section 1818A of the Act.)</p>

State Minnesota

Citation	Groups Covered
1902(a)(10)(E)(iii), 1905(p)(3)(A)(ii) and <u>1860D-14(a)(3)(D)</u> of the Act	A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (continued) 27. Specified low-income Medicare beneficiaries – a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act); b. Whose income for calendar years 1993 and 1994 exceeds the income level in 25(b), but is less than 110 percent of the Federal poverty level, and whose income for calendar years beginning 1995 is less than 120 percent of the Federal poverty level; and c. Whose resource do no exceed twice <u>three times</u> the maximum standard under SSI, <u>adjusted annually by the increase in the consumer price index.</u>

State Minnesota

Citation

Groups Covered

- A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (continued)
- 1634(e) of the Act
28. a. Each person to whom SSI benefits by reason of disability are not payable for any month solely by reason of clause (i) or (v) of Section 1611(e)(3)(A) shall be treated, for purposes of title XIX, as receiving SSI benefits for the month.
- X b. The State applies more restrictive eligibility
- Individuals whose eligibility for SSI benefits are based solely on disability who are not payable for any months solely by reason of clause (i) or (v) of Section 1611(e)(3)(A), and who continue to meet the more restrictive requirements for Medicaid eligibility under the State plan, are eligible for Medicaid as categorically needy.
- 1902(a)(10)(eE)(iv),
1905(p)(3)(a)(ii) and
1860D-14(a)(3)(D)
29. Qualifying Individuals - 1
- a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act), but not otherwise eligible for Medicaid;
- b. ~~Who would qualify for coverage under A.25 of Attachment 2.2-A as Qualified Medicare beneficiaries, but has income which is at least 120% but is less than 135% of the Federal poverty level.~~
- c. Whose resources do not exceed ~~twice~~ three times the maximum standard under SSI, adjusted annually by the increase in the consumer price index.
- (Medical assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)

Citation	Condition or Requirement
	<p>7. Resource Standard -- Medically Needy</p> <p>a. Resource standards are based on family size.</p> <p>b. A single standard is employed in determining resource eligibility for all groups/</p> <p>c. In 1902(f) States, the resource standards are more restrictive than in 7(b) above for –</p> <p>_____ Aged _____ Blind _____ Disabled</p> <p>Supplement 2 to Attachment 2.6-A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7(c), Supplement 2 so indicates.</p>
1902(a)(10)(C)(i) of the Act	
1905(p)(1)(D C) and (p)(2)(B) 1860D-14(a)(3)(D)	<p>8. Resource Standard – Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries, <u>and Qualifying Individual beneficiaries.</u></p> <p>For qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act and specified low-income Medicare beneficiaries covered under section 1902(a)(10)(E)(iii) of the Act, <u>and Qualifying Individual beneficiaries,</u> the resource standard is twice <u>three times</u> the SSI standard, <u>adjusted annually by the increase in the consumer price Index.</u></p>
1905(s) of the Act	<p>9. Resource Standard – Qualified and Working Individuals</p> <p>For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individuals or a couple (in the case of an individual with a spouse) is twice the SSI resource standard.</p>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: MINNESOTA
MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER §1902(r)(2) OF THE ACT

POLICY	HOW POLICY IS MORE LIBERAL	GROUPS TO WHICH POLICY IS APPLIED
Auto exclusion. Exclude one vehicle for each person that uses a vehicle for employment or for seeking employment.	AFDC has an auto exclusion of \$1,500.	Medically needy families with children. §§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii).
Additional property disregard. Exclude \$9,000 in property not subject to other exclusions for one person, and exclude \$19,000 for two or more people.	AFDC applies a \$1,000 asset limit to families.	Medically needy families with children. §§1902(a)(10)(C)(i)(III) and 1905(a)(ii)
Child assets. Exclude all assets established under the Uniform Gift to Minors Act, and the child-owned portion of an account held jointly by an adult and child.	AFDC has no similar property exclusion.	Medically needy families and children. §§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii).
Household goods and personal effects exclusion. Exclude such items as pets, furniture, clothing, jewelry, appliances, and other tools and equipment used in the home.	SSI excludes: 1 wedding ring and 1 engagement ring per individual regardless of value; prosthetic devices (wheelchairs, hospital beds, etc.) required by a person's physical condition; and \$2,000 in total equity for all other household goods and personal effects.	Qualified medicare beneficiaries. §1902(a)(10)(E)(i). Qualified disabled working individuals. §1902(a)(10)(E)(ii). Services limited medicare beneficiaries. §1902(a)(10)(E)(iii). Qualified individuals. §1902(a)(10)(E)(iv). Optional categorically needy -aged, blind, and disabled. §1902(a)(10)(A)(ii). Medically needy -aged, blind, and disabled. §1902(a)(10)(C)(i)(III)
Homestead exclusion. Exclude the homestead of a person residing in a long term care facility if it is used as the residence of the person's: -Sibling who lived in the home for at least 1 year immediately before the date of the client's admission to the long term care facility and who has an equity interest in the home; or -Adult child or grandchild who lived in the home for at least 2 years immediately before the date of the client's admission to the long term care facility and who provided verifiable care to the client to permit the client to live at home instead of the long term care facility.	SSI has no similar exclusion	Qualified medicare beneficiaries. §1902(a)(10)(E)(i). Qualified disabled working individuals. §1902(a)(10)(E)(ii). Services limited Specified low-income medicare beneficiaries. §1902(a)(10)(E)(iii). Qualified individuals. §1902(a)(10)(E)(iv). Optional categorically needy -aged, blind, and disabled. §1902(a)(10)(A)(ii). Medically needy -aged, blind, and disabled. §1902(a)(10)(C)(i)(III).
Additional Asset Exclusion: For one child living with a disabled or elderly individual, exclude an additional \$3,000, and \$200 for each additional child; for each child living with a disabled or elderly couple, exclude an additional \$200.	SSI has no such exclusions.	Mandatory categorically needy aged, blind and disabled under §1902(f) Optional categorically needy -aged, blind, and disabled. §1902(a)(10)(A)(ii). Medically needy -aged, blind, and disabled. §1902(a)(10)(C)(i)(III).
Resource Exclusion for Children. Exclude all resources.	AFDC has no similar exclusion. SSI has no similar exclusion	Qualified children. §1902(a)(10)(A)(I)(III). All optional categorically needy children. §1902(a)(10)(A)(ii)(I) and 1905(a)(i) §1902(a)(10)(A)(ii)(IV) and 1905(a)(i) §1902(a)(10)(A)(ii)(VIII) §1902(a)(10)(A)(ii)(XV) Medically needy children. §§1902(a)(10)(C)(i)(III), 1905(a)(i)
Resource Exclusion for Qualified Pregnant Women. Exclude all resources.	AFDC has no similar exclusion.	Qualified pregnant women. §1902(a)(10)(A)(i)(III)

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: MINNESOTA
MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER §1902(r)(2) OF THE ACT

POLICY	HOW POLICY IS MORE LIBERAL	GROUPS TO WHICH POLICY IS APPLIED
<p>Reduction of Excess Assets. Allow disregard of excess assets in the month of application if the applicant reduces such assets by payment of health services bills that would otherwise be paid by medical assistance, or by another action other than a transfer for less than fair market value.</p> <p>Allow disregard of excess assets in the three month retroactive period if the applicant reduces excess assets by designating a burial fund of up to \$1500 for each eligible family member, or by paying health service bills not payable by a third party and incurred in the retroactive month(s) for which eligibility is sought.</p>	<p>SSI has no similar disregard and AFDC had no similar disregard.</p>	<p>All categorically eligible groups covered under the State Plan, §1902(a)(10)(A)(i) and (ii). All medically needy groups covered under the State Plan, §1902(a)(10)(C).</p>
<p>Spouse Asset Exclusion: Do not count or deem assets of the ineligible spouse to the disabled person.</p>	<p>SSI deems assets of the ineligible spouse to the disabled applicant or recipient.</p>	<p>TWWIIA Basic Coverage Group. §1902(a)(10)(A)(ii)(XV).</p>
<p>Retirement/Medical Benefits Exclusion: Exclude the following assets of the employed disabled person: retirement accounts including individual accounts, 401(k) plans, 403(b) plans, Keogh plans, pension plans, and medical expense accounts through the employer.</p>	<p>SSI has no similar exclusions.</p>	<p>TWWIIA Basic Coverage Group. §1902(a)(10)(A)(ii)(XV).</p>
<p>Dual-eligible Property Exclusion. Disregard \$8,000 the difference between three times the SSI asset limit and \$10,000 in nonexcluded assets for an individual, and \$15,000 the difference between three times the SSI asset limit and \$18,000 for a couple.</p>	<p>SSI allows \$2,000 in nonexcluded assets for an individual, and \$3,000 for a couple; and Medicaid requires an asset standard of three times the SSI limit.</p>	<p>Qualified medicare beneficiaries §1902(a)(10)(E)(i). Specified low-income medicare beneficiaries §1902(a)(10)(E)(iii). Qualifying ied Individuals §1902(a)(10)(E)(iv).</p>
<p>Transition Disregard for Disabled Individuals Who Were Working. For individuals who become ineligible for the TWWIIA Basic Coverage Group under §1902(a)(10)(A)(ii)(XV) due to loss of earnings, and who qualify for Medicaid under another category, continue to disregard for 12 consecutive months the assets allowed and excluded under the TWWIIA Basic Coverage Group, §1902(a)(10)(A)(ii)(XV).</p>	<p>SSI has no similar disregard</p>	<p>Mandatory categorically needy aged, blind and disabled using more restrictive criteria under §1902(f) Optional categorically needy aged and disabled groups: §1902(a)(10)(A)(ii). Medically needy aged, blind, and disabled. §1902(a)(10)(C)(i)(III); and 1905(a). Families under §1931 Medically needy -families and children. §§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii). Reasonable categories of children in Supplement 1 to Attachment 2.2-A. §§1905(a)(i), 1902(e), 1902(m), 1902(a)(10)(C)(i)(III), 1915(c) and 1905(a)(i).</p>

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
 State: MINNESOTA
 MORE LIBERAL METHODS OF TREATING RESOURCES
 UNDER §1902(r)(2) OF THE ACT

POLICY	HOW POLICY IS MORE LIBERAL	GROUPS TO WHICH POLICY IS APPLIED
<p>Retirement Assets. Exclude IRA's, 401(k) plans, 403(b) plans, Keogh plans and other individually-owned pension and retirement funds.</p>	<p>AFDC has no similar property exclusion.</p>	<p>Optional categorically needy -families and children: §§1902(a)(10)(A)(ii)(<u>I</u>), 1905(a)(i) and 1905(a)(ii). §§1902(a)(10)(A)(ii)(<u>IV</u>) and 1905(a)(ii) Medically needy -families and children. §§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii).</p>
<p>Settlements. Exclude court-ordered settlements up to \$10,000.</p>	<p>AFDC has no similar property exclusion.</p>	<p>Optional categorically needy -families and children: §§1902(a)(10)(A)(ii)(<u>I</u>), 1905(a)(i) and 1905(a)(ii). §§1902(a)(10)(A)(ii)(<u>IV</u>) and 1905(a)(ii) Medically needy -families and children. §§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii).</p>

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