

1.1 Senator moves to amend S.F. No. 5282 as follows:

1.2 Page 6, after line 3, insert:

1.3 "Sec. 6. Minnesota Statutes 2023 Supplement, section 252.27, subdivision 2a, is amended
1.4 to read:

1.5 Subd. 2a. **Contribution amount.** (a) The natural or adoptive parents of a minor child,
1.6 not including a child determined eligible for medical assistance without consideration of
1.7 parental income under the Tax Equity and Fiscal Responsibility Act (TEFRA) option or a
1.8 child accessing home and community-based waiver services, must contribute to the cost of
1.9 services used by making monthly payments on a sliding scale based on income, unless the
1.10 child is married or has been married, parental rights have been terminated, or the child's
1.11 adoption is subsidized according to chapter 259A or through title IV-E of the Social Security
1.12 Act. The parental contribution is a partial or full payment for medical services provided for
1.13 diagnostic, therapeutic, curing, treating, mitigating, rehabilitation, maintenance, and personal
1.14 care services as defined in United States Code, title 26, section 213, needed by the child
1.15 with a chronic illness or disability.

1.16 (b) For households with adjusted gross income equal to or greater than 275 percent of
1.17 federal poverty guidelines, the parental contribution shall be computed by applying the
1.18 following schedule of rates to the adjusted gross income of the natural or adoptive parents:

1.19 (1) if the adjusted gross income is equal to or greater than 275 percent of federal poverty
1.20 guidelines and less than or equal to 545 percent of federal poverty guidelines, the parental
1.21 contribution shall be determined using a sliding fee scale established by the commissioner
1.22 of human services which begins at 1.65 percent of adjusted gross income at 275 percent of
1.23 federal poverty guidelines and increases to 4.5 percent of adjusted gross income for those
1.24 with adjusted gross income up to 545 percent of federal poverty guidelines;

1.25 (2) if the adjusted gross income is greater than 545 percent of federal poverty guidelines
1.26 and less than 675 percent of federal poverty guidelines, the parental contribution shall be
1.27 4.5 percent of adjusted gross income;

1.28 (3) if the adjusted gross income is equal to or greater than 675 percent of federal poverty
1.29 guidelines and less than 975 percent of federal poverty guidelines, the parental contribution
1.30 shall be determined using a sliding fee scale established by the commissioner of human
1.31 services which begins at 4.5 percent of adjusted gross income at 675 percent of federal
1.32 poverty guidelines and increases to 5.99 percent of adjusted gross income for those with
1.33 adjusted gross income up to 975 percent of federal poverty guidelines; and

(4) if the adjusted gross income is equal to or greater than 975 percent of federal poverty guidelines, the parental contribution shall be 7.49 percent of adjusted gross income.

If the child lives with the parent, the annual adjusted gross income is reduced by \$2,400 prior to calculating the parental contribution. If the child resides in an institution specified in section 256B.35, the parent is responsible for the personal needs allowance specified under that section in addition to the parental contribution determined under this section. The parental contribution is reduced by any amount required to be paid directly to the child pursuant to a court order, but only if actually paid.

(c) The household size to be used in determining the amount of contribution under paragraph (b) includes natural and adoptive parents and their dependents, including the child receiving services. Adjustments in the contribution amount due to annual changes in the federal poverty guidelines shall be implemented on the first day of July following publication of the changes.

(d) For purposes of paragraph (b), "income" means the adjusted gross income of the natural or adoptive parents determined according to the previous year's federal tax form, except, effective retroactive to July 1, 2003, taxable capital gains to the extent the funds have been used to purchase a home shall not be counted as income.

(e) The contribution and the potential for a civil action for failure to make the contributions shall be explained in writing to the parents at the time eligibility for services is being determined, and the parents must acknowledge receipt of the written explanation by signing an acknowledgement of receipt. The contribution shall be made on a monthly basis effective with the first month in which the child receives services. Annually upon redetermination or at termination of eligibility, if the contribution exceeded the cost of services provided, the local agency or the state shall reimburse that excess amount to the parents, either by direct reimbursement if the parent is no longer required to pay a contribution, or by a reduction in or waiver of parental fees until the excess amount is exhausted. All reimbursements must include a notice that the amount reimbursed may be taxable income if the parent paid for the parent's fees through an employer's health care flexible spending account under the Internal Revenue Code, section 125, and that the parent is responsible for paying the taxes owed on the amount reimbursed.

(f) The monthly contribution amount must be reviewed at least every 12 months; when there is a change in household size; and when there is a loss of or gain in income from one month to another in excess of ten percent. The local agency shall mail a written notice 30 days in advance of the effective date of a change in the contribution amount. A decrease in

the contribution amount is effective in the month that the parent verifies a reduction in income or change in household size.

(g) Parents of a minor child who do not live with each other shall each pay the contribution required under paragraph (a). An amount equal to the annual court-ordered child support payment actually paid on behalf of the child receiving services shall be deducted from the adjusted gross income of the parent making the payment prior to calculating the parental contribution under paragraph (b).

(h) The contribution under paragraph (b) shall be increased by an additional five percent if the local agency determines that insurance coverage is available but not obtained for the child. For purposes of this section, "available" means the insurance is a benefit of employment for a family member at an annual cost of no more than five percent of the family's annual income. For purposes of this section, "insurance" means health and accident insurance coverage, enrollment in a nonprofit health service plan, health maintenance organization, self-insured plan, or preferred provider organization.

Parents who have more than one child receiving services shall not be required to pay more than the amount for the child with the highest expenditures. There shall be no resource contribution from the parents. The parent shall not be required to pay a contribution in excess of the cost of the services provided to the child, not counting payments made to school districts for education-related services. Notice of an increase in fee payment must be given at least 30 days before the increased fee is due.

(i) The contribution under paragraph (b) shall be reduced by \$300 per fiscal year if, in the 12 months prior to July 1:

(1) the parent applied for insurance for the child;

(2) the insurer denied insurance;

(3) the parents submitted a complaint or appeal, in writing to the insurer, submitted a complaint or appeal, in writing, to the commissioner of health or the commissioner of commerce, or litigated the complaint or appeal; and

(4) as a result of the dispute, the insurer reversed its decision and granted insurance.

For purposes of this section, "insurance" has the meaning given in paragraph (h).

A parent who has requested a reduction in the contribution amount under this paragraph shall submit proof in the form and manner prescribed by the commissioner or county agency, including but not limited to the insurer's denial of insurance, the written letter or complaint of the parents, court documents, and the written response of the insurer approving insurance.

4.1 The determinations of the commissioner or county agency under this paragraph are not rules
4.2 subject to chapter 14.

4.3 Sec. 7. Minnesota Statutes 2022, section 252.27, subdivision 3, is amended to read:

4.4 Subd. 3. **Civil actions.** If the parent fails to make appropriate reimbursement as required
4.5 in subdivisions 2a and 2b, the attorney general, at the request of the commissioner, may
4.6 institute or direct the appropriate county attorney to institute civil action to recover the
4.7 required reimbursement. The attorney general must not institute or direct the appropriate
4.8 county attorney to institute civil action to recover the required reimbursement unless the
4.9 commissioner or the local agency possesses the signed acknowledgement of a written
4.10 explanation of the required contributions and the potential for a civil action for failure to
4.11 make the contributions. The attorney general must seek dismissal or direct the appropriate
4.12 county attorney to seek dismissal of any pending civil actions to recover reimbursement
4.13 from parents of children who have accessed home and community-based services, and must
4.14 not seek enforcement or direct the appropriate county attorney not to seek enforcement of
4.15 a judgment against the parents of children who have accessed home and community-based
4.16 services.

4.17 Sec. 8. Minnesota Statutes 2023 Supplement, section 256B.14, subdivision 2, is amended
4.18 to read:

4.19 Subd. 2. **Actions to obtain payment.** (a) The state agency shall promulgate rules to
4.20 determine the ability of responsible relatives to contribute partial or complete payment or
4.21 repayment of medical assistance furnished to recipients for whom they are responsible. All
4.22 medical assistance exclusions shall be allowed, and a resource limit of \$10,000 for
4.23 nonexcluded resources shall be implemented. Above these limits, a contribution of one-third
4.24 of the excess resources shall be required. These rules shall not require payment or repayment
4.25 when payment would cause undue hardship to the responsible relative or that relative's
4.26 immediate family. These rules do not apply to parents of children whose eligibility for
4.27 medical assistance was determined without deeming of the parents' resources and income
4.28 under the Tax Equity and Fiscal Responsibility Act (TEFRA) option or to parents of children
4.29 accessing or who have accessed home and community-based waiver services.

4.30 (b) The county agency shall give the responsible relative notice of the amount of the
4.31 payment or repayment. If the state agency or county agency finds that notice of the payment
4.32 obligation was given to the responsible relative, but that the relative failed or refused to
4.33 pay, a cause of action exists against the responsible relative for that portion of medical

5.1 assistance granted after notice was given to the responsible relative, which the relative was
5.2 determined to be able to pay. No cause of action exists against the parents of children
5.3 accessing or who have accessed home and community-based waiver services. The state
5.4 agency or county agency must seek dismissal of any pending civil actions to recover
5.5 payments or repayments from parents of children who have accessed home and
5.6 community-based services, and must not seek enforcement of any judgments against the
5.7 parents of children who have accessed home and community-based services.

5.8 (c) The action may be brought by the state agency or the county agency in the county
5.9 where assistance was granted, for the assistance, together with the costs of disbursements
5.10 incurred due to the action.

5.11 (d) In addition to granting the county or state agency a money judgment, the court may,
5.12 upon a motion or order to show cause, order continuing contributions by a responsible
5.13 relative found able to repay the county or state agency. The order shall be effective only
5.14 for the period of time during which the recipient receives medical assistance from the county
5.15 or state agency."

5.16 Renumber the sections in sequence and correct the internal references

5.17 Amend the title accordingly