

**Chapter:** 46

**Session:** 2017 Regular Session

**Topic:** Medical assistance estate claims modifications

**Analyst:** Sarah Sunderman

**Date:** June 5, 2017

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### Overview

Federal and state law require the Department of Human Services (DHS) and local agencies to recover costs that the Medical Assistance (MA) program paid for enrollees through estate recovery. In 2016, the legislature changed Minnesota Statutes, section 256B.15 to limit MA estate recovery to long-term services and supports received on or after January 1, 2014, for persons 55 or older. Recovery prior to January 1, 2014, for persons 55 or older was not limited to long-term care services and supports. This act removes the January 1, 2014, date, bringing the language in line with the revised state plan approved by the Centers for Medicare and Medicaid Services (CMS), and allows MA estate recovery only for long-term services and supports expenses, for estate claims pending or asserted on or after July 1, 2016.

#### Section

- 1** **Policy and applicability.** Amends § 256B.15, subd. 1, paragraph (c). Removes beginning date from MA definition.  
  
Makes this section effective the day following final enactment, and applicable retroactively to estate claims pending on or after July 1, 2016, and to estates of people who died on or after July 1, 2016.
- 2** **Estates subject to claims.** Amends § 256B.15, subd. 1a. Strikes recovery from the estate of a person over 55 years of age for MA services rendered before January 1, 2014. Limits estate recovery claims to the amount of MA paid on behalf of a person who resided in a medical institution, who received general assistance medical care (formerly under chapter 256D), or who received MA long-term services and supports at or after 55 years of age.  
  
Makes section effective the day following final enactment and applicable retroactively to estate claims pending on or after July 1, 2016, and to estates of people who died on or after July 1, 2016.

**Section**

**3** **Limitations on claims.** Amends § 256B.15, subd. 2. Removes limitation on estate recovery for services rendered before January 1, 2014. Specifies that an estate claim must only include:

- (1) the amount of medical assistance rendered to persons 55 or older for long-term services and supports;
- (2) the total amount of medical assistance rendered during a period of institutionalization; and
- (3) the total amount of general assistance medical care (formerly under chapter 256D).

Clarifies that “home and community-based services” includes alternative care services, even when those services receive only state funding.

Makes section effective the day following final enactment and applicable retroactively to estate claims pending on or after July 1, 2016, and to estates of people who died on or after July 1, 2016.