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Authors:	Huntley and others
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Analyst:	Randall Chun, 651-296-8639

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Overview

This bill sets timelines for providers to submit information if they assist GAMC applicants with their initial applications, and reduces the inpatient hospital deductible for GAMC enrollees eligible only for inpatient hospital coverage.

Section

- **1 General assistance medical care; eligibility.** Amends § 256D.03, subd. 3. Requires health care providers, who act on behalf of a GAMC applicant unable to provide the information necessary for initial application due to a medical condition or disability, to provide the county agency or DHS with provider identification and a temporary unique identifier by the end of the next business day. (Current law does not specify a timeline for providing this information).
- 2 General assistance medical care; services. Amends § 256D.03, subd. 4. Lowers the inpatient hospital deductible from \$1,000 to \$100, for GAMC enrollees who are eligible only for GAMC inpatient hospital coverage. (These are individuals with incomes above 75 percent but not exceeding 175 percent of the federal poverty guidelines, with net assets not exceeding \$10,000 for a household of one and \$20,000 for a household of two or more, who apply during an inpatient hospitalization.)