DEPARTMENT OF HUMAN SERVICES

Bulletin

NUMBER 21-21-04

DATE April 28, 2021

OF INTEREST TO

County Directors

Social Services Supervisors and Staff

Financial Assistance Supervisors and Staff

Tribal Chairpersons and Tribal Health Directors

Health Care Eligibility Operations (HCEO) Managers, Supervisors and Staff

ACTION/DUE DATE

Effective May 1, 2021. Please read and follow issued instructions.

EXPIRATION DATE

April 28, 2023

DHS Explains Redetermination and Closure of MHCP for Enrollees Not Validly Enrolled due to Fraud or Agency Error

TOPIC

Redetermination and closure of Minnesota Health Care Programs (MHCP) for enrollees who are not validly enrolled due to fraud or agency error.

PURPOSE

This bulletin describes redetermination and closure policies of MHCP during the COVID-19 public health emergency for enrollees who are not validly enrolled due to fraud or agency error.

CONTACT

County, tribal agencies and DHS workers should submit Medical Assistance (MA) and MinnesotaCare policy questions via HealthQuest.

All others should direct MA and MinnesotaCare questions to:

Health Care Eligibility and Access (HCEA) Division PO Box 64989 540 Cedar Street St. Paul, MN 55164-0989

SIGNED

MATT ANDERSON Assistant Commissioner/State Medicaid Director Health Care Administration

TERMINOLOGY NOTICE

The terminology used to describe people we serve has changed over time. The Minnesota Department of Human Services (DHS) supports the use of "People First" language.

Page 2 **I. Background**

On April 29, 2020, the Department of Human Services (DHS) (hereafter referred to as "DHS" or "we") published <u>Bulletin #20-21-02</u>, announcing temporary eligibility policy changes to Minnesota Health Care Programs (MHCP) to ensure enrollees maintain coverage during the COVID-19 public health emergency (PHE). We announced that for the duration of the COVID-19 PHE, enrollees would remain covered, unless the enrollee died, is no longer a state resident or voluntarily requested case closure. Subsequently, we issued <u>Bulletin #20-21-10</u> and <u>Bulletin #20-21-13</u> which announced additional changes requiring action during the COVID-19 PHE.

The Centers for Medicare & Medicaid Services (CMS) published an interim final rule, effective November 2, 2020, which reinterprets section 6008(b)(3) of the Families First Coronavirus Response Act (FFCRA), including the requirement that states seeking the temporary enhanced federal funding maintain enrollees' coverage through the end of the month in which the COVID-19 PHE ends. The new rule defines "validly enrolled" and requires states to redetermine eligibility and end continued coverage for enrollees who are not validly enrolled due to fraud or agency error.

This bulletin describes which enrollees are not validly enrolled due to fraud or agency error, and directs county, tribal and DHS workers to redetermine eligibility and end coverage for these enrollees with advance notice.

The policy changes in this bulletin apply to all MinnesotaCare populations and the following Medical Assistance (MA) populations and subprograms:

- Medical Assistance for Families with Children and Adults (MA-FCA)
- Medical Assistance for People Age 65 and Older, Blind or Disabled (MA-ABD)
- Medical Assistance for Employed Persons with Disabilities (MA-EPD)
- Medical Assistance for Long-Term Care (MA-LTC)
- Medical Assistance under the TEFRA Option
- Medical Assistance Northstar Care for Children
- Medical Assistance for the Treatment of Breast and Cervical Cancer (MA-BC)
- Medical Assistance for People Receiving Services at the Center for Victims of Torture (MA-CVT)
- Medicare Savings Programs (MSP): Qualified Medicare Beneficiaries (QMB), Service Limited Medicare Beneficiaries (SLMB), Qualified Individuals (QI) and Qualified Working Disabled (QWD)
- Emergency Medical Assistance (EMA)
- Minnesota Family Planning Program (MFPP)

II. Policy

Effective May 1, 2021, current MA and MinnesotaCare enrollees who are validly enrolled based on a determination of eligibility, must remain continuously covered during the PHE, unless the enrollee died, is no longer a state resident, requests voluntary closure, or is disenrolled for a reason described in Bulletins <u>#20-21-10</u> or <u>#20-21-13</u>. Generally, an enrollee is considered validly enrolled, unless an agency determines the enrollee is not validly enrolled due to fraud or agency error.

Certain enrollees who are not validly enrolled may be closed. MA or MinnesotaCare enrollees are not validly enrolled due to fraud or agency error (as specified in section A and B) when their current MA or MinnesotaCare coverage was incorrectly granted under one of the following circumstances:

- At a redetermination or renewal that continued the MA or MinnesotaCare enrollee's current coverage, with a certification period that began before March 18, 2020
- At the enrollee's most recent application, or most recent redetermination that newly moved them into MA or MinnesotaCare

An enrollee whose current MA or MinnesotaCare coverage was determined correctly is validly enrolled, even if a previous period of coverage was approved due to fraud or agency error.

Beginning May 1, 2021, workers must redetermine eligibility for an MA or MinnesotaCare enrollee who is not validly enrolled due to fraud or agency error using the enrollee's current, corrected and verified information. If determined ineligible, close MA or MinnesotaCare following proper advance notice of closure with appeal rights. See the Eligibility Policy Manual (EPM) <u>Section 1.3.1.5 MHCP Notices</u>. If determined eligible for another program, enroll the person in that program following standard policies and procedures.

A. Not validly enrolled due to fraud

An enrollee is not validly enrolled due to fraud if both of the following are true:

- The enrollee or the representative committed fraud to obtain MA or MinnesotaCare.
- The enrollee or the representative was convicted of that fraud by a Minnesota court of law.

An enrollee's representative may be an application filer, authorized representative or anyone else who submitted information on the enrollee's behalf to help them obtain coverage.

Only fraud, as evidenced by a fraud conviction in a Minnesota court of law, can be used to decide an enrollee is not validly enrolled due to fraud. Evidence of potential foul play, reported by a fraud department or otherwise discovered, is not sufficient to consider an enrollee not validly enrolled due to fraud. An administrative finding also does not constitute that an enrollee is not validly enrolled due to fraud.

We are developing additional policy with regard to MA and MinnesotaCare enrollees who are not validly enrolled due to enrollee abuse and will issue this at a later date.

B. Not validly enrolled due to agency error

An enrollee is not validly enrolled due to agency error if a county or tribal servicing agency, a person who works for or contracts with an agency, or DHS made a mistake in processing information relevant to an eligibility determination, and as a result, the enrollee has MA or MinnesotaCare coverage he or she is not eligible for. An agency error also includes when a DHS eligibility or enrollment system did not correctly process information and incorrectly granted or maintained program eligibility or coverage.

An error made by an application filer, an applicant, an enrollee, authorized representative or any other party who does not work for or contract with a servicing agency or DHS, is not an agency error.

Page 4 III. Action Required

Effective May 1, 2021, county, tribal and DHS workers must follow the policies outlined in this bulletin and corresponding instructions issued after its publication. DHS will issue instructions through SIR announcements, video conferences, ONEsource and other communications.

IV. Legal Reference

Code of Federal Regulations, title 42, section 433.400(b)

Americans with Disabilities Act (ADA) Advisory

This information is available in accessible formats for people with disabilities by calling 651-297-3862 or toll free at 800-657-3672, or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.