

Minnesota Attorney General: Administrative Rules Proceedings

Copyright Notice:

This material may be protected by copyright law (U.S. Code, Title 17). Researchers are liable for any infringement. For more information, visit www.mnhs.org/copyright.

Version 3
August 20, 2018

SF-00006-03

STATE OF MINNESOTA

DEPARTMENT ATTORNEY GENERAL - 515 DOT

Office Memorandum

TO: LARRY STARNS
Administrative Division
Special Assistant Attorney General

DATE: 7-7-83

FROM: RUTH MICKELSEN
Special Assistant
Attorney General

PHONE: 6-8406

RECEIVED
JUL 8 1983
ATTORNEY GENERAL
ADMINISTRATIVE AGENCIES

SUBJECT: RULE 27

This memo confirms our conversation of July 6 wherein we discussed three minor changes to section F.2 of the amendments to permanent Rule 27. As we agreed in our conversation, the Department will submit to you a second draft which in essence follows the "original draft" with minor modifications. The original draft was abandoned prior to submission to your office due to your informally stated opinion that the original draft would constitute future rulemaking or unlawful delegation and consequently would not be approved. You have now indicated that since submission of Rule 27 to your office, you have further researched and discussed the basis for these legal objections and have concluded that they are without merit. We are therefore returning to the original draft with minor modifications. These language modifications were suggested by the Deputy Commissioner for the Department of Welfare. The purpose of these modifications is to clarify that the cash and asset limitations, the life insurance limitation and the burial expense limitation shall be those of the Medical Assistance program as currently structured and as modified by legislative action in the future.

As these changes do not constitute a substantial change, but merely clarify the Department's original intent, we have agreed that there is no need for the Department to submit new Findings of Fact and Conclusions of Law. It should also be noted that although we received three comments on this rule, none of the comments pertained to these sections. It is well understood by the small segment of the public affected by this rule that the MA standards are applicable.

Thank you for your cooperation and assistance in finalizing these amendments to Rule 27.

RM:lf

Our File No. 430

RULE REVIEW CHECKLIST

DATE RULE RECEIVED 7-1-83
DATE FOR REVIEW 7-11-83
DATE DUE 7-15-83

Adopted w/a hearing _____
Adopted w/o hearing ✓
Temporary rule _____

Approved 7-15 Disapproved _____ Returned to Agency _____

Resubmitted _____ Due _____
Approved _____ Disapproved _____ Returned to Agency _____

Date filed w/Secretary of State 7-18 Revisor approved 7/5/83 disapproved _____

✓ Rule as Adopted

_____ Rule as Proposed

✓ Order Adopting 6.23.83 Date

_____ Notice of Intent to Solicit Outside Opinion

✓ Order for rulemaking
N/A date of Hearing

N/A Certificate of Board's Authorizing Resolution

✓ Notice of rulemaking
? Sufficiency See my comment.

✓ Affidavit of Mailing Notice or rulemaking
5.4.83 At least 30 days prior to ~~hearing~~/adoption

✓ Mailing list Certificate

✓ Publication in State Register
5.9.83. At least 30/~~20~~ days prior to ~~hearing~~/adoption

N/A Hearing Examiner's Report

_____ Chief Hearing Examiner's Report(s)
_____ Approving H.E.'s Report
_____ Approving agency action

✓ Agency's Findings of Fact

N/A LCRAR Report or agency Affidavit

N/A Certificate of Board's Resolution Adopting Rules

N/A Order Approving Incorporation by Reference

✓ Statement of Need and Reasonableness

N/A Petition for Adoption of a Rule

✓ Record (includes transcript or tape, exhibits, comments received by agency, requests for a hearing, and other relevant materials)

✓ Certificate of Compliance w/Rulemaking Procedures

✓ Affidavit of Mailing Notice of Submission to Attorney General

N/A Notice of Submission to the Attorney General

SF-00006-02

STATE OF MINNESOTA

DEPARTMENT ATTORNEY GENERAL

Office Memorandum

TO : LEONARD LEVINE, Commissioner of Welfare DATE: July 15, 1983
Attn: RUTH MICKELSON, Special Assistant Attorney General

FROM : LARRY D. STARNS PHONE: 297-3493
Special Assistant
Attorney General

SUBJECT: In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital, 12 MCAR § 2.027.

Enclosed herewith are the rules you have submitted for approval. These rules have been approved by this office and filed with the Secretary of State. Please note that they have not been filed with the State Register. This must be done promptly by your agency.

Upon receipt and before transmittal to your agency, however, it is important that you recheck these rules as to:

1. Affixation of stamps of the Attorney General and Secretary of State;

2. Coverage by these stamps of all rules submitted; and

3. Inclusion of all pages to the rules in the approved set.

If you have any questions in this regard, please contact me.

Encs.
LDS/las
cc: Ms. Kathy Burek
Mr. Duane Harves

Department of Public Welfare

Support Services Division

Adopted Rule Governing Reimbursement for Cost of Care of Patients of a State Hospital

Rule as Adopted

12 MCAR S 2.027 Reimbursement for cost of care of patients in a state hospital.

A. [Unchanged.]

B. Definitions. For purposes of 12 MCAR S 2.027, the following terms have the meanings given them.

1.-8. [Unchanged.]

9. Inpatient. "Inpatient" or "resident patient" means a person who occupies a bed in a state hospital for the purpose of observation, care, diagnosis, or treatment.

10.-11. [Unchanged.]

12. Outpatient. "Outpatient" or "day care patient" means a person who makes use of diagnostic, therapeutic, counseling, or other services in a state hospital facility or through state hospital personnel but does not occupy a hospital bed overnight.

13.-19. [Unchanged.]

20. Responsible relative. "Responsible relative" means the spouse, the parents of minor children, and in the case of the mentally ill or chemically dependent, the adult children of a patient, in that order of liability for cost of care.

21. [Unchanged.]

C. Determination procedure.

1.-2. [Unchanged.]

3. Financial interview. When a person is interviewed, the department shall:

a. Inform the person that he or she may choose an individual to assist in the determination process and any other contact with the department by authorizing such assistance in writing;

b. Provide the person with an informational pamphlet on cost of care and review with the person how the department determines the charges for the patient's cost of care;

c. Inform the person that financial information obtained from the person will not be released without the person's written consent except pursuant to Minnesota Statutes, ~~sections 15.1611 to 15.1699~~ chapter 13;

d. Inform the person of county, state, and federal financial programs which may assist in paying the cost of care and meeting personal and family needs;

e. Inform the person of the legal obligation to provide sufficient information, required documents, and proof necessary to determine ability to pay and of the consequences of the failure to do so;

f. Provide the person the following forms which the department uses to investigate the person's financial resources: the financial information form, the insurance claim and assignment of insurance benefits form, and the form or forms consenting to the release of information necessary to obtain or verify information about the person's resources; and

g. Request the person to complete and sign the forms provided by the department and to provide verfication of financial information.

4.-9. [Unchanged.]

D. [Unchanged.]

E. Net income; patient.

1.-3. [Unchanged.]

4. Deductions from gross income to arrive at net income. The following items shall be deducted from the patient's monthly gross income:

a.-j. [Unchanged.]

k. A personal needs and clothing allowance of the inpatient in the amount determined in accordance with Minnesota Statutes, section 256B.35 for persons receiving public assistance grants. In addition, a special personal allowance drawn solely from earnings from any productive employment under

an individual plan of rehabilitation or work therapy shall be given to all patients in state hospitals. The special personal allowance shall not exceed $50 per month. This amount shall be adjusted in accordance with the limit established by the department pursuant to Minnesota Statutes, section 256B.36 for persons receiving public assistance grants;

1.-n. [Unchanged.]

F. Property; patient. Property shall be available to pay for the cost of the patient's care to the extent owned by the patient, subject to the exclusions in 1.-6.

1. [Unchanged.]

2. Personal property. The value of the following personal property shall be excluded from consideration as a resource:

a. [Unchanged.]

b. ~~Up to $2,000 in~~ The cash or liquid assets for a single patient and ~~up to $4,000 in~~ the cash or liquid assets for a married couple. ~~These amounts~~ shall be ~~adjusted in accordance with the limits established by the legislature under~~ the standard for medical assistance recipients as provided in Minnesota Statutes, section 256B.06, as from time to time amended;

d.-l. [Reletter as c.-k.]

l. Life insurance owned by the patient ~~up to a cash surrender value of $1,500. This amount~~ shall be ~~adjusted in accordance with the limit established by the legislature under~~ the standard for medical assistance recipients as provided in Minnesota Statutes, section ~~256B.07~~ 256B.06, as from time to time amended;

n. [Reletter as m.]

n. Burial expenses, including a burial lot and a prepaid burial account ~~up to $750 plus $200 accrued interest. These amounts~~, shall be ~~adjusted in accordance with the limits established by the legislature under~~ the standard for medical assistance recipients as provided in Minnesota Statutes, ~~section~~ sections 256B.06 to 256B.07, as from time to time amended.

3.-6. [Unchanged.]

G. Ability to pay; responsible relative.

1.-3. [Unchanged.]

4. Liability of responsible relatives. When the sum of the benefits described in 3. and the patient's other resources pay less than the full cost of care, the ability of each responsible relative to pay shall be determined in the statutory order of liability for cost of care. When two or more responsible relatives have the same order of liability for cost of care, a determination shall be made for each one except that a joint determination shall be made for parents who reside in the same household. This provision applies to parents of a minor child and to the adult children of a mentally ill or chemically dependent patient.

5. Limitations on relative's ability to pay. The ability of a responsible relative to pay shall be determined from the annual gross earnings of the responsible relative subject to the limitations in a.-e.

a. A responsible relative who verifies annual gross earnings of less than $11,000 shall be determined not able to pay the cost of care.

b. No responsible relative who is a resident of Minnesota shall be ordered to pay more than ten percent of the cost of care for each patient except that the responsible relative who has failed to provide the information, documents, and proofs which are necessary to determine ability to pay as required by C.3.f. and g. may be ordered to pay the full per capita cost of care until such time as they are provided.

c. The department may require full payment of the full per capita cost of care for a patient whose parents or parent, spouse, guardian, or conservator do not reside in Minnesota and are financially able to pay as determined by the department.

d. Only the annual gross earnings of the spouse of a patient shall be used to determine the spouse's ability to pay.

e. When a responsible relative is married to a person who is not a responsible relative, only the annual gross

earnings of the responsible relative shall be used to determine the responsible relative's ability to pay.

f. The department may accept from the responsible relatives voluntary payments in excess of ten percent.

6. Determination of relative's ability to pay.

a. A responsible relative who provides the department the information, documents, and proofs necessary to determine ability to pay as provided in C.3.f. and g. shall have his or her ability to pay determined from the table in Exhibit 12 MCAR S 2.027 G.7. For purposes of this table, household size consists of the responsible relative and the responsible relative's dependents living in the responsible relative's household, other than the patient.

b. A responsible relative who chooses not to provide the department the information, documents, and proofs necessary to determine ability to pay as provided in C.3.f. and g. may be determined liable for the full per capita cost of care.

7. Exhibit 12 MCAR S 2.027 G.7. shall be used to determine a relative's ability to pay, as described in 6. when there is a change in the per capita cost of care, the department shall revise Exhibit 12 MCAR S 2.027 G.7. Adjustments shall be made according to the following formula: at each level of annual gross earnings, daily payments equal to ten percent of the per diem for the previous year shall be adjusted to equal either the daily payment at the next lower level of earnings plus 25 percent, or ten percent of the per diem for the current year, whichever is less; successive levels of earnings shall be added to Exhibit 12 MCAR S 2.027 G.7. if needed to incorporate daily payments up to ten percent of the per diem for the current year; the daily payment of a responsible relative whose earnings are above these levels shall be at ten percent of the current per diem.

Exhibit 12 MCAR S 2.027 G.7. [Unchanged.]

8.-9. [Unchanged.]

OFFICE OF THE REVISOR OF STATUTES

Certificate of Approval of Adopted Rules

AR0259

Agency: Department of Public Welfare

Division: Reimbursement Division

Agency Contact: Luanne P. Laurents

Rule Numbers: 12 MCAR S 2.027

Title: Adopted Rule Governing Reimbursement for Cost of Care of Patients of a State Hospital

Type of Rules: Permanent

Incorporations by Reference: None

Duplication of Statutory Language: None

The attached rules are approved as to form.

Steven C. Cross
Revisor of Statutes

Paul M. Marinac
Assistant Deputy Revisor
Phone: 296-0956
Date: July 5, 1983

APPROVED AS TO LEGALITY

July 15, 1983

HUBERT H. HUMPHREY, III
ATTORNEY GENERAL

BY _____
SPECIAL ASSISTANT ATTORNEY GENERAL

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED
JUL 18 1983
Joan Anderson Growe
Secretary of State

9:10 A.M.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital, 12 MCAR § 2.027

ORDER ADOPTING RULES

Notice of the Commissioner's intent to adopt the above-entitled rules without a public hearing was published in the State Register on May 9, 1983, and was sent by United States mail to all persons on the list maintained by the agency pursuant to Minnesota Statutes section 14.14, subdivision 1 on May 4, 1983. After affording interested and affected persons an opportunity to submit comments for 30 days after Notice, receiving fewer than seven written requests for a public hearing within the 30-day comment period, reviewing and considering the comments, and determining the need for and reasonableness of the above-captioned rule,

NOW, THEREFORE, IT IS ORDERED that this rule identified as 12 MCAR § 2.027 is adopted this 23rd day of June, 1983, pursuant to authority vested in me by Minnesota Statutes §256.01.

STATE OF MINNESOTA

Commissioner of Public Welfare

STATE OF MINNESOTA

DEPARTMENT OF PUBLIC WELFARE

In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital (12 MCAR §2.027)

ORDER FOR NOTICE OF INTENT TO ADOPT A RULE WITHOUT A PUBLIC HEARING

IT IS ORDERED this 25 day of April, 1983 that a Notice of Intent to Adopt a Rule Without a Public Hearing in the above-entitled matter be given to all persons who have registered their names with the State Department of Public Welfare for that purpose and be published in the State Register.

STATE OF MINNESOTA



Commissioner of Public Welfare

STATE OF MINNESOTA

DEPARTMENT OF PUBLIC WELFARE

IN THE MATTER OF THE PROPOSED ADOPTION OF RULES OF THE STATE DEPARTMENT OF PUBLIC WELFARE GOVERNING REIMBURSEMENT FOR COST OF CARE OF PATIENTS OF A STATE HOSPITAL (12 MCAR §2.027)

AFFIDAVIT OF MAILING

Wendy Johnson, being first duly sworn, deposes and says:

That on the 4th day of May, 1983, at the City of St. Paul, County of Ramsey, State of Minnesota, she served the attached Notice of Intent to Adopt Rules Without a Public Hearing by depositing in the State of Minnesota Central Mail System for first class mailing, a copy thereof, properly enveloped, with postage prepaid, on all persons and associations who have requested that their names be placed on file with the Department of Public Welfare for the purpose of receiving notice of the proposed adoption of rules by this Department.

Wendy Johnson

Subscribed and sworn to before me

this 4 day of May, 1983.

Connie Thomas

CONNIE THOMAS
NOTARY PUBLIC-MINNESOTA
WASHINGTON COUNTY
MY COMMISSION EXPIRES SEPTEMBER 21, 1989

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

IN THE MATTER OF THE PROPOSED ADOPTION OF RULES OF THE STATE DEPARTMENT OF PUBLIC WELFARE GOVERNING REIMBURSEMENT FOR COST OF CARE OF PATIENTS OF A STATE HOSPITAL (12 MCAR §2.027)

Notice of Intent to Adopt Rules Without a Public Hearing

Notice is hereby given that the State Department of Public Welfare proposes to amend the above-entitled rule without a public hearing. The Commissioner has determined that the proposed amendment of this rule will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes Sections 14.21 to 14.28.

Persons interested in this rule shall have 30 days to submit comments on the proposed rule. The proposed rule may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change in the proposed language.

Unless seven or more persons submit written requests for a public hearing on the proposed rule within the 30-day comment period, a public hearing will not be held. In the event a public hearing is required, the agency will proceed according to the provisions of Minnesota Statutes Section 14.13 to 14.20.

Persons who wish to submit comments or a written request for a public hearing should submit such comments or request by June 8, 1983, to:

Luanne Laurents
Reimbursement Division
Department of Public Welfare
Space Center Building
444 Lafayette Road
St. Paul, MN 55101

Authority for the adoption of this rule is contained in Minnesota Statutes Section 246.51, Subdivision 2 (1982). Additionally, a Statement of Need and Reasonableness that describes the need for and reasonableness of each provision of the proposed rule and identifies the data and information relied upon to support the proposed rule has been prepared and is available upon request from Luanne Laurents, Reimbursement Division, Department of Public Welfare, Space Center Building, 444 Lafayette Road, St. Paul, MN 55101.

Upon adoption of the final rule without a public hearing, the proposed rule, this Notice, the Statement of Need and Reasonableness, all written comments received, and the final Rule as Adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this material to the Attorney General, or who wish to receive a copy of the final amendments as proposed for adoption, should submit a written statement of such request to Luanne Laurents, Reimbursement Division, Department of Public Welfare, Space Center Building, 444 Lafayette Road, St. Paul, MN 55101.

The proposed amendments are considered to be noncontroversial in nature because they incorporate the 1982 amendments to Minnesota Statutes Sections 246.50, Subdivisions 5 and 6; 246.51; and 246.511. In carrying out the responsibility of determining the ability of patients and responsible relatives to pay the cost of care at a Minnesota state hospital, the Commissioner must adhere to statutory provisions. Since this rule specifies the procedures and standards by which such determinations are to be made, it is necessary that the 1982 amendments affecting these determinations be incorporated in the rule.

Fiscal Statement

The implementation of the proposed amendments will not result in any increase in the expenditure of state or local funds. 12 MCAR §2.027 is administered by the Department of Public Welfare and the costs of administration are already included in the Department's budget.

Copies of this Notice and the proposed amendments are available and may be obtained by contacting Luanne Laurents (612/296-2140).

Date: 4/25/83

Leonard W. Levine
Commissioner of Public Welfare

STATE OF MINNESOTA

DEPARTMENT OF PUBLIC WELFARE

IN THE MATTER OF THE PROPOSED ADOPTION OF RULES OF THE STATE DEPARTMENT OF PUBLIC WELFARE GOVERNING REIMBURSEMENT FOR COST OF CARE OF PATIENTS OF A STATE HOSPITAL (12 MCAR §2.027)

CERTIFICATE

I hereby certify that the list of persons, associations, and other interested groups who have requested, pursuant to Minn. Stat. §15.0412, subd. 4, that their names be placed on file with and maintained by the Department of Public Welfare for the purpose of receiving notice of the proposed adoption of rules by this Department is accurate and complete as of 4:00, P.M., this 4th day of May, 1983.

Wendy Johnson

Exhibit 12 MCAR § 2.027 G.7. [Unchanged.]

~~When the annual gross earnings exceed the amount shown in Exhibit 12 MCAR § 2.027 C.7., the daily payment shall be at the statutory limitation of ten percent of the per diem.~~

8.-9. [Unchanged.]

ADOPTED RULES

The adoption of a rule becomes effective after the requirements of Minn. Stat. § 14.13-14.28 have been met and five working days after the rule is published in the *State Register*, unless a later date is required by statutes or specified in the rule.

If an adopted rule is identical to its proposed form as previously published, a notice of adoption and a citation to its previous *State Register* publication will be printed.

If an adopted rule differs from its proposed form, language which has been deleted will be printed with strike outs and new language will be underlined, and the rule's previous *State Register* publication will be cited.

A temporary rule becomes effective upon the approval of the Attorney General as specified in Minn. Stat. § 14.33 and upon the approval of the Revisor of Statutes as specified in § 14.36. Notice of approval by the Attorney General will be published as soon as practicable, and the adopted temporary rule will be published in the manner provided for adopted rules under § 14.18.

Board of Chiropractic Examiners

Adopted Rules Governing Fees for Licensure and License Renewal

The Board of Chiropractic Examiners adopts the following fee increases in accordance with the provisions of Minnesota Statutes, §§ 14.14, subd. 1, 16A.128, 214.06 (1982). All fee increases in the rules have been approved by the Commissioner of Finance.

Rules as Adopted

7 MCAR § 2.004 License application fee.

Applications for licensure must be accompanied by a fee of $75.

7 MCAR § 2.005 Individual annual license renewal.

A. Fee.

~~1.~~ Thirty ~~(30)~~ or more days before January 1 each year, the state board of chiropractic examiners ~~(hereinafter "~~, hereafter board~~")~~, shall mail to the last address on file with the board a license renewal fee notice to each person ~~(hereinafter "~~, hereafter licensee~~")~~, licensed to practice chiropractic within this state.

~~2.~~ The license of each licensee shall expire at midnight on December 31 each year. Subject to the terms of ~~7 MCAR Section 2.005~~ B., the board shall renew the license upon receipt from the licensee of a license renewal fee of ~~$50.00~~75, plus any applicable penalty fee as set forth in 3. ~~below.~~ Each licensee shall submit the license renewal fee to the board no later than January 1 of the year for which the license renewal is requested.

~~3.~~ A licensee shall submit to the board, in addition to the license renewal fee, a penalty fee of $~~5.00~~ per month for each month or portion ~~thereof~~ of a month for which the license renewal fee is in arrears, ~~such~~ the penalty not to exceed $~~50.00~~.

B. [Unchanged.]

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." ADOPTED RULES SECTION — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

601-800	7
801-1000	9
1001-1300	11
1301-1600	13
over 1600	15

TABLE 2

Ratio of Municipal Bonded Debt to Adjusted Assessed Values of Municipalities

Ratio × 100	Point Rating
0-3	3
4-9	5
10-15	7
16-21	9
22-27	11
28-33	13
over 33	15

TABLE 3

Per Capita Buying Income

Percent of Average	Point Rating
0-50	15
51-60	13
61-70	11
71-80	9
81-90	7
91-100	5
101-110	3
over 110	1

~~c.~~ b. Construction loans. The determination of the order of priority for construction loan applications shall ~~be in accordance~~ comply with 6 MCAR § 4.8034 ~~E.2.d. and E.3.c.~~ F., G., H., and I.

FF. Procedural rules and appeals. A request for a hearing, an appeal, or other procedural matter not specifically provided for in this rule is governed by the agency rules of procedure, the rules of the Office of Administrative Hearings, and other applicable laws.

GG. Variances. A person may apply for a variance from any requirement of these rules. The variance shall be applied for and acted upon by the agency in accordance with Minnesota Statutes, section 116.07, subdivision 5, and other applicable statutes and rules.

Department of Public Welfare
Support Services Division

Proposed Adoption of Rule Governing Reimbursement for Cost of Care of Patients of a State Hospital

Notice of Intent to Adopt a Rule without a Public Hearing

Notice is hereby given that the State Department of Public Welfare proposes to adopt the above-entitled rule without a public hearing. The commissioner has determined that the proposed adoption of this rule will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes sections 14.21 to 14.28.

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." ADOPTED RULES SECTION — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

Persons interested in this rule shall have 30 days to submit comment on the proposed rule. The proposed rule may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change in the proposed language.

Unless seven or more persons submit written requests for a public hearing on the proposed rule within the 30-day comment period, the public hearing will not be held. In the event a public hearing is required, the agency will proceed according to the provision of Minnesota Statutes section 14.13 to 14.20.

Persons who wish to submit comments or a written request for a public hearing should submit such comments or request to:

Luanne Laurents
Reimbursement Division
Department of Public Welfare
Space Center Building
444 Lafayette Road
St. Paul, MN 55101

Authority for the adoption of this rule is contained in Minnesota Statutes Section 246.51, subdivision 2 (1982). Additionally, a statement of need and reasonableness that describes the need for and reasonableness of each provision of the proposed rule and identifies the data and information relied upon to support the proposed rule has been prepared and is available from Luanne Laurents, Reimbursement Division, Department of Public Welfare, Space Center Building, 444 Lafayette Road, St. Paul, MN 55101, upon request.

Upon adoption of the final rule without a public hearing, the proposed rule, this notice, the statement of need and reasonableness, all written comments received, and the final rule as adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this material to the Attorney General, or who wish to receive a copy of the final rule as proposed for adoption, should submit a written statement of such request to Luanne Laurents, Reimbursement Division, Department of Public Welfare, Space Center Building, 444 Lafayette Road, St. Paul, MN 55101.

The proposed amendments are considered to be noncontroversial in nature because they incorporate the 1982 amendments to Minnesota Statutes sections 246.50, subdivisions 5 and 6; 246.51 and 246.511. In carrying out the responsibility of determining the ability of patients and responsible relatives to pay the cost of care at a Minnesota state hospital, the commissioner must adhere to statutory provisions. Since this rule specifies the procedures and standards by which such determinations are to be made, it is necessary that the 1982 amendments affecting these determinations be incorporated in the rule.

The implementation of the proposed amendments will not result in any increase in the expenditure of state or local funds. 12 MCAR § 2.027 is administered by the Department of Public Welfare and the costs of administration are already included in the department's budget.

Copies of this notice and the proposed rule are available and may be obtained by contacting Luanne Laurents (612/296-2140).

April 25, 1983

Leonard W. Levine
Commissioner of Public Welfare

Rule as Proposed

12 MCAR § 2.027 Reimbursement for cost of care of patients in a state hospital.

A. [Unchanged.]

B. Definitions. For purposes of 12 MCAR § 2.027, the following terms have the meanings given them.

1.-8. [Unchanged.]

9. Inpatient. "Inpatient" or "resident patient" means a person who occupies a bed in ~~the~~ a state hospital for the purpose of observation, care, diagnosis, or treatment.

10-11. [Unchanged.]

12. Outpatient. "Outpatient" or "day care patient" means a person who makes use of ~~the~~ diagnostic, therapeutic, counseling, or other services ~~of the~~ in a state hospital facility or through state hospital personnel but does not occupy a ~~regular~~ hospital bed~~, as set forth in Minnesota Statutes, section 246.50, subdivision 5~~ overnight.

13.-19. [Unchanged.]

20. Responsible relative. "Responsible relative" means the spouse, the parents of minor children, and in the case of the mentally ill or chemically dependent, the adult children of a patient, in that order of liability for cost of care.

21. [Unchanged.]

C. Determination procedure.

1.-2. [Unchanged.]

3. Financial interview. When a person is interviewed, the department shall:

a. Inform the person that he or she may choose an individual to assist in the determination process and any other contact with the department by authorizing such assistance in writing;

b. Provide the person with an informational pamphlet on cost of care and review with the person how the department determines the charges for the patient's cost of care;

c. Inform the person that financial information obtained from the person will not be released without the person's written consent except pursuant to *Minnesota Statutes*, sections 15.1611 to 15.1699;

d. Inform the person of county, state, and federal financial programs which may assist in paying the cost of care and meeting personal and family needs; ~~and~~

e. ~~Request the person to complete and sign a financial information form provided by the department and to provide verification of financial information~~ Inform the person of the legal obligation to provide sufficient information, required documents, and proof necessary to determine ability to pay and of the consequences of the failure to do so;

f. Provide the person the following forms which the department uses to investigate the person's financial resources: the financial information form, the insurance claim and assignment of insurance benefits form, and the form or forms consenting to the release of information necessary to obtain or verify information about the person's resources; and

g. Request the person to complete and sign the forms provided by the department and to provide verification of financial information.

4.-9. [Unchanged.]

D. [Unchanged.]

E. Net income; patient.

1.-3. [Unchanged.]

4. Deductions from gross income to arrive at net income. The following items shall be deducted from the patient's monthly gross income:

a.-j. [Unchanged.]

k. A personal needs and clothing allowance of the inpatient in the amount determined in accordance with Minnesota Statutes, section 256B.35 for persons receiving public assistance grants. In addition, a special personal allowance drawn solely from earnings from any productive employment under an individual plan of rehabilitation or work therapy shall be given to all patients in state hospitals. The special personal allowance shall not exceed $50 per month. This amount shall be adjusted in accordance with the limit established by the department pursuant to Minnesota Statutes, section 256B.36 for persons receiving public assistance grants;

l.-n. [Unchanged.]

F. Property; patient. Property shall be available to pay for the cost of the patient's care to the extent owned by the patient, subject to the exclusions in 1.-6.

1. [Unchanged.]

2. Personal property. The value of the following personal property shall be excluded from consideration as a resource:

a. [Unchanged.]

b. Up to $2,000 in cash or liquid assets~~,~~ for a single patient and up to $4,000 in cash or liquid assets for a married couple. These amounts shall be adjusted in accordance with the limits established by the legislature under Minnesota Statutes, section 256B.06;

~~c. Up to $4,000 in cash or liquid assets, for a married couple;~~

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." ADOPTED RULES SECTION — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

d.-l. [Reletter as c.-k.]

~~m.~~ l. Life insurance owned by the patient up to a cash surrender value of $1,500. This amount shall be adjusted in accordance with the limit established by the legislature under Minnesota Statutes, section 256B.07;

n. [Reletter as m.]

~~o.~~ n. Burial expenses, including a burial lot and a prepaid burial account up to $750 plus $200 accrued interest. These amounts shall be adjusted in accordance with the limits established by the legislature under Minnesota Statutes, section 256B.07.

3.-6. [Unchanged.]

G. Ability to pay; responsible relative.

1.-3. [Unchanged.]

4. Liability of responsible relatives. When the sum of the benefits described in 3. and the patient's other resources pay less than the full cost of care, the ability of each responsible relative to pay shall be determined in the statutory order of liability for cost of care. When two or more responsible relatives have the same order of liability for cost of care, a determination shall be made for each one except that a joint determination shall be made for parents who reside in the same household. This provision applies to parents of a minor child and to the adult children of a mentally ill or chemically dependent patient.

5. Limitations on relative's ability to pay. The ability of a responsible relative to pay shall be determined from the annual gross earnings of the responsible relative subject to the limitations in a.-e.

a. A responsible relative who verifies annual gross earnings of less than $11,000 shall be determined not able to pay the cost of care.

b. No responsible relative who is a resident of Minnesota shall be ordered to pay more than ten percent of the cost of care for each patient except that the responsible relative who has failed to provide the information, documents, and proofs which are necessary to determine ability to pay as required by C.3.f. and g. may be ordered to pay the full per capita cost of care until such time as they are provided.

c. The department ~~shall~~ may require full payment of the full per capita cost of care for a ~~child if the child's parents both live outside Minnesota~~ patient whose parents or parent, spouse, guardian, or conservator do not reside in Minnesota and are financially able to pay as determined by ~~C.7.~~ the department.

d. Only the annual gross earnings of the spouse of a patient shall be used to determine the spouse's ability to pay.

e. When a responsible relative is married to a person who is not a responsible relative, only the annual gross earnings of the responsible relative shall be used to determine the responsible relative's ability to pay.

f. The department may accept from the responsible relatives voluntary payments in excess of ten percent.

6. Determination of relative's ability to pay.

a. A responsible relative who provides the department ~~a copy of the income tax return filed in the current year~~ the information, documents, and proofs necessary to determine ability to pay as provided in C.3.f. and g. shall have his or her ability to pay determined from the table in Exhibit 12 MCAR § 2.027 G.7. For purposes of this table, household size consists of the responsible relative and the responsible relative's dependents living in the responsible relative's household, other than the patient.

b. A responsible relative who chooses not to provide the department ~~a copy of the income tax return filed in the current year shall be assumed to have an income in excess of $11,000 and to be able to pay the statutory limit of ten percent of the cost of care. The relative shall be requested to sign an agreement to pay the balance of the patient's cost of care up to the ten percent limit~~ the information, documents, and proofs necessary to determine ability to pay as provided in C.3.f. and g. may be determined liable for the full per capita cost of care.

7. Exhibit 12 MCAR § 2.027 G.7. shall be used to determine a relative's ability to pay, as described in 6. when there is a change in the per capita cost of care, the department shall revise Exhibit 12 MCAR § 2.027 G.7. Adjustments shall be made according to the following formula: at each level of annual gross earnings, daily payments equal to ten percent of the per diem for the previous year shall be adjusted to equal either the daily payment at the next lower level of earnings plus 25 percent, or ten percent of the per diem for the current year, whichever is less; successive levels of earnings shall be added to Exhibit 12 MCAR § 2.027 G.7. if needed to incorporate daily payments up to ten percent of the per diem for the current year; the daily payment of a responsible relative whose earnings are above these levels shall be at ten percent of the current per diem.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital, 12 MCAR § 2.027

FINDINGS OF FACT AND CONCLUSIONS

Notice of the Commissioner's intent to adopt the above-entitled rule without a public hearing was published in the State Register on May 9, 1983 and was sent by United States mail to all persons on the list maintained by the agency pursuant to Minnesota Statutes section 14.14, subdivision 1 on May 4, 1983. After affording interested persons an opportunity to submit comments for 30 days after Notice, receiving fewer than seven written requests for a public hearing within the 30-day comment period, reviewing and considering the comments, and determining the need for and reasonableness of the above-captioned rule, I find the following:

The above-entitled rule shall be adopted as proposed, with modifications to sections F.2.b., F.2.l. and F.2.n. These sections establish the amounts of cash or liquid assets, life insurance, and burial expenses that are excluded from consideration as property available to pay the patient's cost of care. Pursuant to the Administrative Division of the Office of the Attorney General, the Department has elected to delete the the language which requires adjustments to these amounts in accordance with the limits established by the legislature, and to substitute language which specifies that the amounts be within the limits established by the legislature. p. 3

An additional modification is being proposed to reflect 1983 legislative changes. Subsequent to the rule's publication in the State Register, the legislature amended Minn. Stat. §§ 256B.06 and 256B.07 (Laws of 1983, Chapter 312, Article 5, Sections 15 and 18). Minn. Stat. § 256B.06 was amended to include a prepaid funeral contract and insurance policies with cash surrender value within the Medical Assistance allowance for cash and liquid assets. Minn. Stat. § 256B.07 was amended to delete reference to insurance policies with cash surrender value and a prepaid funeral contract. Sections F.2.l. and F.2.n. refer to Minn. Stat. § 256B.07 for the limits on the amounts of life insurance and burial expenses that are excluded from consideration. The additional modification to these sections merely changes the citation for these limits from Minn. Stat. § 256B.07 to Minn. Stat. § 256B.06. p. 3

The original rule, as published in the State Register on February 22, 1982 and as currently enforced, uses Medical Assistance standards in section E.4.k. for the amount of the personal needs and clothing allowance. Medical Assistance standards were also used to establish the dollar amounts cited in sections E.4.j., F.2.b., F.2.c., F.2.m., and F.2.o. of the original rule. The change in citation in sections F.2.1. and F.2.n. is necessary to continue conformity with the Medical Assistance standards.

P. 3

The proposed modifications to sections F.2.b., F.2.1., and F.2.n. are reasonable and do not result in a substantial change in the language of the rule.

Note: There were three written comments received on the rule, including two requests for a public hearing. The comments did not result in modification of the rule.

STATE OF MINNESOTA

July 1, 1983
Date

Frances E. Gibenson
Commissioner of Public Welfare

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE
SUPPORT SERVICES BUREAU

IN THE MATTER OF THE PROPOSED AMENDMENTS TO THE DEPARTMENT OF PUBLIC WELFARE RULE GOVERNING REIMBURSEMENT FOR COST OF CARE OF PATIENTS OF A STATE HOSPITAL (12 MCAR § 2.027)

STATEMENT OF NEED AND REASONABLENESS

The Commissioner of Public Welfare believes that the proposed amendments to 12 MCAR § 2.027 are of a noncontroversial nature and therefore may be considered for adoption pursuant to the procedures set forth in Minn. Stat. §§ 14.21 to 14.28. These amendments reflect the 1982 amendments to Minn. Stat. §§ 246.50, subdivision 5 and 6; 246.51; and 246.511.

Laws of 1982 Chapter 641, Article 1 amended Minn. Stat. §§ 246.50, subdivisions 5 and 6, 246.51 and 246.511. Minn. Stat. § 246.50, subd. 5 was amended to include counseling or other service provided in a state hospital facility or through state hospital personnel within the definition of "outpatient" or "day-care". Minn. Stat. § 246.50, subd. 6 was amended to include the children of chemically dependent patients within the definition of "relatives". Minn. Stat. § 246.51, subd. 1 was amended to require the patient or relatives or both to provide the Commissioner with documents and proofs necessary to determine their ability to pay. It further provides that failure to provide sufficient information to determine ability to pay may make the patient or relative or both liable for the full per capita cost of care until sufficient information is provided. Minn. Stat. § 246.511 was amended to permit the Commissioner to accept from responsible relatives voluntary payments in excess of ten percent and to require full payment of the full per capita cost of care in state hospitals for patients whose parent, parents, spouse, guardian or conservator do not reside in Minnesota.

It is the Commissioner's responsibility to determine an individual's ability to pay the cost of care provided at a Minnesota state hospital. The Commissioner also has the responsibility to determine the ability of certain responsible relatives to pay for the care of the patient who is unable to pay the full cost of care. In carrying out these responsibilities, the Commissioner must adhere to statutory provisions concerning the determinations. Rule 27 sets out the specific procedures and standards by which such determinations must be made. It is therefore necessary to incorporate the 1982 amendments affecting the determination of an individual's ability to pay the cost of care provided at a state hospital.

B.9. This section currently defines "inpatient" as a person who occupies a bed in the hospital for the purpose of observation, care, diagnosis, or treatment. The term "resident patient" is not used in Rule 27. Minn. Stat. § 246.50, subd. 5 defines the term "resident patient" to mean a person who occupies a bed while housed in a hospital for obser-

vation, care, diagnosis or treatment but does not use the term "inpatient". The proposed amendment inserts the phrase "or resident patient", and thereby incorporates the term used in the statute. This amendment does not change the meaning of either term. It simply indicates the interchangeability of the two terms for purposes of the rule. It is necessary that the definition of inpatient contained in the rule correspond with the statutory definition. The term "inpatient" is commonly used by hospital personnel and the general public for a person who occupies a hospital bed overnight. It is reasonable to include the statutory term while retaining the term "inpatient".

The Department wishes to clarify that the definition in B.9. applies to inpatients and resident patients of state hospitals only. Therefore, insertion of the work "state" before hospital will limit the definition to patients of a state hospital.

B.12. The proposed amendment to this section, which defines the term "outpatient", parallels the amended statute Minn. Stat. § 246.50, subd. 5. It is necessary and reasonable for the Rule 27 definition of "outpatient" to conform to the 1982 statutory amendment.

B.20. Minn. Stat. § 246.50, subd. 6 as amended in 1982 defines "relatives" as "the spouse, and parents, and in the case of the mentally ill or chemically dependent, children of a patient, in that order of liability for cost of care." The proposed amendment to this section incorporates the statutory change. The Department wishes to bring the rule definition into conformity with the 1982 amendment.

C.3.e. This section states the general provisions which the Department must follow in all interviews. Minn. Stat. § 246.51 was amended in 1982 to require that patients and responsible relatives provide information, documents and proofs necessary to determine ability to pay. The amendment gave the Commissioner the authority to impose the full per capita rate until sufficient information is provided. It is necessary and reasonable that persons on whom a statutory obligation is placed be informed as soon as possible about this obligation and that the responsibility for so informing patients, representatives of patients, and responsible relatives be clearly fixed on the Department. The proposed change of section C.3.e. reflects the 1982 statutory amendments to Minn. Stat. § 246.51.

C.3.f. This section states the specific forms which the Department will use to investigate the financial resources of patients and responsible relatives and thereby obtain sufficient information for the Commissioner to determine ability to pay in compliance with Minn. Stat. § 246.51, subd. 1 as amended in 1982. The section requires the Department to provide these forms to patients, representatives of patients, and responsible relatives at the time of the interview. It is reasonable to specify the forms necessary to comply with the requirement of providing sufficient information. It is also reasonable to clearly specify the Department's obligation to provide such forms.

C.3.g. The proposed amendment to this section reflects the amendment to C.3.f. specifying the forms used by the Department to investigate the financial resources of patients and responsible relatives.

E.4.k. The proposed amendment to this section permits adjustments to the special personal allowance given to patients who have earnings under an individual plan of rehabilitation or work therapy. It requires that adjustments be made in accordance with the limit established for persons receiving public assistance grants, which was the standard used to establish the present limit of $50. It is necessary and reasonable to provide a method for updating the special personal allowance so that an amendment to the rule is not required when the allowance for persons receiving public assistance is changed.

F.2.b., m., and o. The proposed amendments to these sections permit adjustments to the allowances for cash and liquid assets, life insurance, and burial expenses. They require that adjustments be made in accordance with the limits established under the Medical Assistance program, which were used to establish the present allowances. It is necessary and reasonable to provide a method for updating these allowances so that an amendment to the rule is not required when Medical Assistance program standards are changed.

G.4. Minn. Stat. § 246.50, subd. 6 as amended in 1982 includes the children of chemically dependent patients within the definition of "relatives." The proposed amendment to this section incorporates the statutory change. The amendment also clarifies that separate determinations of parents' ability to pay apply only to parents who do not reside in the same household. It is reasonable to jointly consider the resources of parents living in the same household since parental resources are considered together under public assistance programs. It has also been the Department's policy for many years to jointly consider parental resources in determining parents' ability to pay. The change is necessary to clarify the Department's intent to continue its previous policy.

G.5.b. The 1982 amendment to Minn. Stat. § 246.51, subd. 1 removed the limitation on the Department that in no case could a responsible relative who is a resident of Minnesota be ordered to pay more than ten percent of the cost of the patient's care. The amended statute permits the Department to assess liability for the full per capita cost of care in the case of a resident relative who fails to provide the department sufficient information to determine ability to pay. It further states that such failure may make the responsible relative liable for the full per capita cost until such time as sufficient information is provided. The amended statute also requires the responsible relative to provide information, documents and proofs necessary to determine ability to pay. The proposed revision of G.5.b. incorporates the 1982 amendment to Minn. Stat. § 246.51, subd. 1 and is therefore necessary and reasonable. The amended G.5.b. also defines by reference to C.3.f. and g. what information, documents, and proofs are necessary.

G.5.c. The proposed amendment to this section is necessary to bring it into conformance with Minn. Stat. § 246.511 as amended in 1982. The amended statute enlarges the category of responsible relatives and patient representatives whom the Department may require to pay the full per capita cost of care to include the "parent, parents, spouse, guardian or conservator who do not reside in Minnesota." The amended G.5.c. also removes the reference to G.7. and requires that ability to pay the full per capita cost of care be determined by the Department. This change is necessary because G.7. refers only to payments up to ten

percent of the per capita cost of care.

G.5.f. This new section reflects a new provision of Minn. Stat. § 246.511 as amended in 1982 which allows the Commissioner to accept voluntary payments from responsible relatives in excess of ten percent.

G.6.a. The proposed amendment is necessary to bring this section into conformance with Minn. Stat. § 246.51 as amended in 1982. It requires that responsible relatives provide the Department sufficient information, documents and proofs in order to have their ability to pay determined from the Exhibit in G.7.

G.6.b. The proposed amendment to this section removes language which the 1982 amendment to Minn. Stat. § 246.51 has superseded. It allows the Department to assess the full per capita cost of care against a responsible relative who has not provided sufficient information, documents and proofs necessary to determine ability to pay.

G.7. Minn. Stat. § 246.511 limits payments from responsible relatives who are residents of Minnesota to ten percent of the per capita cost of care. The per capita cost of care is determined annually by the Commissioner pursuant to Minn. Stat. § 246.50, subd. 5. Exhibit 12 MCAR § 2.027 G.7. is used to determine the daily payments of responsible relatives based on household size and annual gross earnings. Daily payments in this table increase at each level of earnings up to the statutory limit of ten percent of the per capita cost of care in effect for last fiscal year. Because the cost of care is redetermined annually, it is necessary to provide a method for the Department to revise the table to reflect such changes.

It is reasonable to revise Exhibit 12 MCAR 2.027 G.7. according to the same method used to develop the table. The table was derived from the monthly fee schedule for a family of four published in the Department's "Proposed Comprehensive Title XX Services Program Plan" for October 1, 1981 to December 31, 1982. The cut-off points on the attached table indicate the level of earnings, for each household size, at which entitlement to Title XX services ends. For levels of earnings above these points, it was determined reasonable to increase daily payments by 25 percent at each level.

The Department proposes to continue this method for the purposes of revising Exhibit 12 MCAR § 2.027 G.7., beginning with daily payments equal to ten percent of the cost of care for the previous year. The amended G.7. requires that daily payments at ten percent of the previous year's cost of care be changed to equal either a 25 percent increase in the daily payment at the preceding level of earnings, or ten percent of the current year's cost of care, whichever is less. The amendment also allows the Department to add additional levels of earnings to the table to provide for possible increases in the per capita cost of care that would require daily payments for levels of earnings beyond those in the present table.

7. Exhibit 12 MCAR S 2.027 G.7. shall be used to determine a relative's ability to pay, as described in 6.

Exhibit 12 MCAR S 2.027 G.7.

Daily Payment Based on Ability to Pay According to Household Size and Annual Gross Earnings of Responsible Relatives

Annual Gross Earnings of Responsible Relative	Household Size									
	1	2	3	4	5	6	7	8	9	10
11,000-11,999	.33	0								
12,000-12,999	.45	.33	0							
13,000-13,999	.57	.45	.33	0						
14,000-14,999	.72	.57	.45	.33	0					
15,000-15,999	.87	.72	.57	.45	.33	0				
16,000-16,999	1.05	.87	.72	.57	.45	.33	0			
17,000-17,999	1.23	1.05	.87	.72	.57	.45	.33	0		
18,000-18,999	1.45	1.23	1.05	.87	.72	.57	.45	.33	0	
19,000-19,999	1.81	1.45	1.23	1.05	.87	.72	.57	.45	.33	0
20,000-20,999	2.26	1.67	1.45	1.23	1.05	.87	.72	.57	.45	.33
21,000-21,999	2.82	1.92	1.67	1.45	1.23	1.05	.87	.72	.57	.45
22,000-22,999	3.52	2.17	1.92	1.67	1.45	1.23	1.05	.87	.72	.57
23,000-23,999	4.41	2.45	2.17	1.92	1.67	1.45	1.23	1.05	.87	.72
24,000-24,999	5.51	3.06	2.45	2.17	1.92	1.67	1.45	1.23	1.05	.87
25,000-25,999	6.89	3.82	2.75	2.45	2.17	1.92	1.67	1.45	1.23	1.05
26,000-										

26,999	8.61	4.77	3.05	2.75	2.45	2.17	1.92	1.67	1.45	1.23
27,000-27,999	8.80	5.96	3.37	3.05	2.75	2.45	2.17	1.92	1.67	1.45
28,000-28,999	8.80	7.46	4.21	3.37	3.05	2.75	2.45	2.17	1.92	1.67
29,000-29,999	8.80	8.80	5.26	3.72	3.37	3.05	2.75	2.45	2.17	1.92
30,000-30,999	8.80	8.80	6.57	4.07	3.72	3.37	3.05	2.75	2.45	2.17
31,000-31,999	8.80	8.80	8.21	4.45	4.07	3.72	3.37	3.05	2.75	2.45
32,000-32,999	8.80	8.80	8.80	4.83	4.45	4.07	3.72	3.37	3.05	2.75
33,000-33,999	8.80	8.80	8.80	6.03	4.83	4.45	4.07	3.72	3.37	3.05
34,000-34,999	8.80	8.80	8.80	7.53	5.25	4.83	4.45	4.07	3.72	3.37
35,000-35,999	8.80	8.80	8.80	8.80	5.67	5.25	4.83	4.45	4.07	3.72
36,000-36,999	8.80	8.80	8.80	8.80	6.12	5.67	5.25	4.83	4.45	4.07
37,000-37,999	8.80	8.80	8.80	8.80	7.56	6.12	5.67	5.25	4.83	4.45
38,000-38,999	8.80	8.80	8.80	8.80	8.80	7.56	6.12	5.67	5.25	4.83
39,000-39,999	8.80	8.80	8.80	8.80	8.80	8.80	7.56	6.12	5.67	5.25
40,000-40,999	8.80	8.80	8.80	8.80	8.80	8.80	8.80	7.56	6.12	5.67
41,000-41,999	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80	7.56	6.12
42,000-42,999	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80	7.56
43,000-43,999	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80	8.80

When the annual gross earnings exceed the amount shown in Exhibit 12 MCAR S 2.027 G.7., the daily payment shall be at the statutory limitation of ten percent of the per diem.

8. Verification of financial information.

a. The annual gross earnings of a relative and the number of dependents of a relative shall be verified from the relative's Minnesota state income tax return or, in the case of a relative who is not a resident of Minnesota and does not file a Minnesota state income tax return, from the United States income tax return.

b. The amount of the premium paid by the relative to provide dependent hospital and medical insurance coverage for the patient shall be verified.

9. Clothing and personal needs allowance of a minor. The parents of a patient who is an unmarried, dependent child shall be responsible for meeting the patient's clothing and personal

In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital, 12 MCAR § 2.027

STATEMENT OF COMPLIANCE WITH RULEMAKING PROCEDURES

I, Special Assistant Attorney General Ruth Mickelsen, do hereby declare that I have examined the proposed rules and all related documents and that, based on my examination and my personal familiarity with the applicable procedures, the Administrative Procedure Act, the rules of the Office of Administrative Hearings, and the rules of the Attorney General have been followed. Any exceptions are noted below.

Ruth Mickelsen

Special Assistant
Attorney General

Dated: June 24, 1983

In the Matter of the Proposed Adoption of Rules of the State Department of Public Welfare Governing Reimbursement for Cost of Care of Patients of a State Hospital, 12 MCAR § 2.027

AFFIDAVIT OF MAILING NOTICE OF SUBMISSION TO THE ATTORNEY GENERAL

STATE OF MINNESOTA)
) SS
COUNTY OF RAMSEY)

Wendy Johnson, being first duly sworn deposes and says:

That as of this 23rd day of June, 1983, no persons or associations have requested notice of when the rules in the above-entitled matter are submitted to the Attorney General. Therefore, no mailing has been made announcing submittal to the Attorney General.

Wendy Johnson

Subscribed and sworn to before me this 23 day of June, 1983.

Margaret Holt

MARGARET HOLT
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
My Comm. Expires Sept. 22, 1984