

Minnesota Attorney General: Administrative Rules Proceedings

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SF-00006-05 (4/86)

DEPARTMENT : ATTORNE[illegible] ENERAL [illegible] E OF MINNESOTA

Office Memorandum

DATE : September 29, 1989

TO : SARAH G. MULLIGAN
Special Assistant Attorney General
525 Park Street, Suite 500

FROM : MARTHA J. CASSERLY
Special Assistant Attorney General
525 Park Street, Suite 404

PHONE : 296-6839

SUBJECT : In the Matter of the Adopted Rule Relating to the Consolidation of Benefits of Services for Children With Handicaps With Children's Health Plan

The above-referenced rule has been approved as to its legality by the Attorney General on September 29, 1989.

Enclosed is your copy of the approved rule. This office has already filed two copies with the Secretary of State, who will forward one copy to the Revisor of Statutes. The fourth is being retained by this division of the Attorney General's Office for its records.

Also enclosed are any petitions, requests, submissions or comments along with any extra copies of documents which you submitted to the Attorney General.

Your next step is to arrange for publication of the Notice of Adoption in the State Register. In a day or two, you should receive from the Revisor's Office three copies of tne notice of adoption of your rule. You should submit two copies of the Notice of Adoption to the State Register for publication. A permanent rule without a hearing does not become effective until five days after a notice of adoption is published in the State Register in accordance with Minn. Stat. { 14.27. An emergency rule becomes effective five working days after approval by the Attorney General; however, the agency must publish a notice in the State Register in accordance with Minn. Stat. { 14.34.

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

MJC:bbl
Enclosures

cc: William Brown, Chief Judge
MaryAnn Hruby

MJC

RULE REVIEW CHECKLIST

File No. 1627 — Docket No. 05-0009-1620

DATE RECEIVED 9-14-89 — ADOPTED W/O HEARING ✓

REVIEW DATE 9-25-89 — EMERGENCY RULE _____

DUE DATE 9-28-89 — To Revisor: 9-18-89

APPROVED 9-25-89 mjc — REVISOR APPROVED ✓

DISAPPROVED _____ — REVISOR DISAPPROVED _____

WITHDRAWN _____ — FILED W/SEC. OF STATE 9-26-89

RETURNED TO AGENCY _____

✓ Rule as adopted (4 copies)

ND Notice to Solicit Outside Information/Opinion (if applicable)
- _____ Date published in State Register
- _____ Comments

_____ Petition for Adoption of a Rule (if applicable)

_____ Board's Authorizing Resolution
- _____ Date adopted

✓ Proposed Rule
- ✓ Revisor's Certificate

_____ Notice of Intent to Adopt Rule
- 144.05 144.07 Statutory Authority
- yes Small Business Statement
- ND Expenditure of public money statement
- yes Signature - Dated June 16, 1989

✓ Statement of Need and Reasonableness (if applicable)
- ✓ Small Business Statement
- ND Fees - § 16A.128

✓ Affidavit of Mailing Notice of Intent to Adopt Rule
- June 28, 1989 Date 30/25 days before adoption
- ✓ Notice attached
- ✓ Copy of rule or summary attached

_____ Publication in State Register
- July 3, 1989 Date 30/25 days before adoption

✓ 180-day deadline from:
- _____ Effective date of law requiring rule (14.12) (both rules)
- ✓ end of comment period (§ 14.26) (rules without hearing)
- _____ effective date of statutory authority (§ 14.29) (emergency rules)

✓ Resolution Adopting
- _____ Date adopted

_____ Findings of Fact, Conclusions & Order Adopting
- August 28, 1989 Date

✓ Written requests, submissions or comments

✓ Declaration of attorney
- Sarah Mulligan Name of SAAG representing agency

_____ Notice of Submission to Atty. Gen. (if applicable)

_____ Aff. of Mailing Notice to Atty. Gen. (if applicable)

Department of Health

Adopted Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

Rules as Adopted

4705.1600 CONSOLIDATION OF BENEFITS WITH CHILDREN'S HEALTH PLAN.

A consolidated benefit package, including the full range of services covered separately by SCH and the Children's Health Plan (CHP) created under Minnesota Statutes, section 256.936, may be offered to children who meet the eligibility requirements of CHP and have a handicapping condition as defined by SCH. Parts 4705.0100 to 4705.1500 generally apply to the consolidated program, with the modifications in items A to E.

A. Notwithstanding part 4705.0400, applicants are eligible for treatment services only if they meet the requirements specified in Minnesota Statutes, section 256.936, subdivision 1, paragraph (a), and have a handicapping condition as defined in part 4705.0100, subpart 14.

B. Notwithstanding part 4705.0500, subpart 1, applicants must complete the CHP application form and provide additional information that is required to determine medical eligibility for SCH.

C. Notwithstanding part 4705.0600, cost-sharing will not be required except that the CHP enrollment fee specified in Minnesota Statutes, section 256.936, subdivision 4, must be charged to all applicants.

D. Notwithstanding part 4705.0900, the SCH payment limit of $15,000 per 12-month period applies to inpatient care only.

E. Notwithstanding part 4705.1400, subparts 3, 4, and 5, and part 4705.1500, children enrolled in the consolidated program shall be issued an identification card that must be presented to service providers. To be eligible for reimbursement, service providers must be enrolled as Medical

Assistance providers. Prior authorization and billing procedures must be consistent with procedures used by CHP that are applicable to the consolidated program.

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED

SEP 26 1989

Joan Anderson Growe
Secretary of State

APPROVED AS TO FORM AND LEGALITY
September 25 19 89
HUBERT H. HUMPHREY, III
ATTORNEY GENERAL
BY M T Cassedy
SPECIAL ASSISTANT ATTORNEY GENERAL

Department of Health

Proposed Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

Rules as Proposed (all new material)

4705.1600 CONSOLIDATION OF BENEFITS WITH CHILDREN'S HEALTH PLAN.

A consolidated benefit package, including the full range of services covered separately by SCH and the Children's Health Plan (CHP) created under Minnesota Statutes, section 256.936, may be offered to children who meet the eligibility requirements of CHP and have a handicapping condition as defined by SCH. Parts 4705.0100 to 4705.1500 generally apply to the consolidated program, with the modifications in items A to E.

A. Notwithstanding part 4705.0400, applicants are eligible for treatment services only if they meet the requirements specified in Minnesota Statutes, section 256.936, subdivision 1, paragraph (a), and have a handicapping condition as defined in part 4705.0100, subpart 14.

B. Notwithstanding part 4705.0500, subpart 1, applicants must complete the CHP application form and provide additional information that is required to determine medical eligibility for SCH.

C. Notwithstanding part 4705.0600, cost-sharing will not be required except that the CHP enrollment fee specified in Minnesota Statutes, section 256.936, subdivision 4, must be charged to all applicants.

D. Notwithstanding part 4705.0900, the SCH payment limit of $15,000 per 12-month period applies to inpatient care only.

E. Notwithstanding part 4705.1400, subparts 3, 4, and 5, and part 4705.1500, children enrolled in the consolidated program shall be issued an identification card that must be presented to service providers. To be eligible for reimbursement, service providers must be enrolled as Medical

Approved by Revisor

Assistance providers. Prior authorization and billing procedures must be consistent with procedures used by CHP that are applicable to the consolidated program.

Approved
by Revisor _____

Office of the Revisor of Statutes

Administrative Rules

TITLE: Proposed Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

AGENCY: Department of Health

MINNESOTA RULES: Chapter 4705

The attached rules are approved for publication in the State Register

Kathleen M. Traxler
Assistant Revisor

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

DEPARTMENT OF HEALTH

In the Matter of the
Proposed Adoption of the Rule
of the Department of Health
Relating to the Consolidation
of Benefits of Services for
Children with Handicaps with
Children's Health Plan

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

(1) Notice is hereby given that the Minnesota Department of Health (hereinafter "Department") intends to adopt the above-entitled rule without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in Minn. Stat. §§ 14.22 to 14.28 (1988). The statutory authority to adopt the rule is Minn. Stat. §§ 144.05 and 144.07(1).

(2) All persons have 30 days in which to submit comment in support of or in opposition to the proposed rule or any part or subpart of the rule. Comment is encouraged. (3) Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

(4) Any person may make a written request for a public hearing on the rule within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. (6) Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rule addressed, the reason for the request, and any change proposed. (7) If a public hearing is required, the Department will proceed pursuant to Minn. Stat. §§ 14.131 to 14.20 (1988).

(5) Comments or written requests for a public hearing must be submitted to:

David Giese
Section of Maternal and Child Health
Minnesota Department of Health
717 Delaware Street Southeast
P. O. Box 9441
Minneapolis, Minnesota 55440

(8) The proposed rule may be modified if the modifications are supported by data and views submitted to the Department and do not result in a substantial change in the proposed rule as noticed.

(11) The rule proposed for adoption relates to the consolidation of the health care benefits of Services for Children with Handicaps with Children's Health Plan and establishes a single enrollment, care authorization and provider reimbursement process for families whose children meet the eligibility requirements of both programs. Because Services for Children with Handicaps and Children's Health Plan are distinct programs administered by different state agencies it was previously necessary for families to enroll their children in both programs. The requirement for double enrollment, as well as different care authorization and provider reimbursement procedures, created barriers for some families because of the confusion created in dealing with operating policies and procedures that differ greatly between the two programs. Consolidation of the programs will enable qualifying children to receive more easily the combined range of health care benefits. A free copy of the rule is available upon request from David Giese.

(12) 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 David Giese upon request.

(14) Minnesota Statutes section 14.115 requires administrative agencies, when proposing a rule or an amendment to an existing rule, to consider various methods for reducing the impact of the proposed rule or amendment on small businesses and to provide opportunity for small businesses to participate in the rulemaking process. Pursuant to Minn. Stat. § 14.115, subd. 2, the impact on small businesses has been considered in the promulgation of the rule. Anyone wishing to present evidence or argument as to the rule's effect on small businesses may do so. The Department's position regarding the impact of the rule on small businesses is set forth in the Statement of Need and Reasonableness.

(9) If no hearing is required, upon adoption of the rule, the rule and the required supporting documents will be submitted to the Attorney General for review as to legality and form to the extent the form relates to legality. Any person may request notification of the date of submission to the Attorney General. 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 adopted rule must submit the written request to David Giese.

Date: June 16, 1989

for Daniel J. McInerney
Sister Mary Madonna Ashton
Commissioner of Health

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

COMMISSIONER OF HEALTH

IN THE MATTER OF THE PROPOSED ADOPTION OF AMENDMENTS TO MINNESOTA RULES, CHAPTER 4705, GOVERNING ADMINISTRATION OF THE SERVICES FOR CHILDREN WITH HANDICAPS PROGRAM

STATEMENT OF NEED AND REASONABLENESS

The Minnesota Commissioner of Health (hereinafter "commissioner"), pursuant to Minnesota Statutes, sections 14.05 through 14.12 and 14.22 through 14.28, presents facts establishing the need for and reasonableness of the proposed amendments to rules captioned above.

In order to adopt the proposed amendments, the commissioner must demonstrate that she has complied with all the procedural and substantive requirements of rulemaking. Those requirements are that: 1) there is statutory authority to adopt the rule, 2) all necessary procedural steps have been taken, 3) the rules are needed, 4) the rules are reasonable, and 5) any additional requirements imposed by law have been satisfied. This statement demonstrates that the commissioner has met these requirements.

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1. STATUTORY AUTHORITY.

The commissioner's legal authority for adopting these rules is found in Minnesota Statutes, sections 144.05 and 144.07 (1).

2. STATEMENT OF NEED.

The Services for Children with Handicaps (SCH) Program provides financial assistance to assure that children with handicapping, or potentially handicapping, conditions receive appropriate diagnostic and treatment services. SCH's financial assistance is limited to payment for medical services directly related to the handicapping condition that makes the child eligible for the program. Other primary care services are not covered by SCH and, as a result, some children enrolled in the program go without routine well child care or medical treatment for episodic illnesses not related to the child's handicapping condition.

During the 1987 State Legislative Session a new program, known as the Children's Health Plan (CHP), was created. This program, administered by the Department of Human Services, is designed to provide coverage for primary health care services (excluding in-patient care) for children between the ages of one and nine years whose gross family incomes are equal to or less than 185 percent of the federal poverty guidelines and who are not eligible for medical assistance under Minnesota Statutes, Chapter 256B or general assistance medical care under Chapter 256D. CHP thus covers primary care for qualified children, some of whom are also SCH enrollees.

Because SCH and CHP are distinct programs administered by different state agencies, families must enroll their children in both programs in order to receive the combined range of health care

benefits. The requirement for double enrollment creates a barrier for some families because of the confusion created in dealing with operating policies and procedures that differ greatly between the two programs. This barrier could be eliminated if the administrative procedures for SCH and CHP were consolidated and a single enrollment, care authorization and provider reimbursement process is established.

This rule amendment is needed to allow SCH to modify some of its administrative procedures in order to make them consistent with those of CHP for children who meet the eligibility requirements of both programs. After these procedural modifications are made, families will need to enroll only once in order to receive the combined benefits of both programs.

The rule-by-rule justification will explain the need for each part of the rule amendment, as well as justifying the reasons for making these changes.

3. COMPLIANCE WITH PROCEDURAL RULEMAKING REQUIREMENTS.

The commissioner has determined that the amendment of the rules by adding part 4705.1600 is non-controversial and has elected to follow the procedures set forth in Minnesota Statutes, sections 14.05 through 14.12 and 14.22 through 14.28, which provide for an expedited process for the adoption of non-controversial administrative rule changes without the holding of a public hearing.

Procedural Rulemaking Requirements of the Administrative Procedure Act

The commissioner did not seek information or opinions in preparation for adoption of these rule amendments from sources outside the agency and, therefore, did not publish a notice in the State Register pursuant to Minnesota Statutes, section 14.10.

These rules minimize the duplication of statutory language. See Minnesota Statutes, section 14.07, subdivision 3 (1). The implementation of these rules will not require the expenditure of public money by local public bodies of greater than $100,000 in either of the two years following their adoption, nor do the rules have any impact on agricultural land. See Minnesota Statutes, section 14.11. The adoption of these rules will not fix or adjust fees. See Minnesota Statutes, section 16A.128.

As required by Minnesota Statutes, section 14.115, the

commissioner has considered each of the following methods for reducing the impact of these rule amendments on small businesses:

(a) the establishment of less stringent compliance or reporting requirements for small businesses;

(b) the establishment of less stringent schedules or deadlines for compliance or reporting requirements for small businesses;

(c) the consolidation or simplification of compliance or reporting requirements for small businesses;

(d) the establishment of performance standards for small businesses to replace design or operational standards required in the rule; and

(e) the exemption of small businesses from any or all requirements of the rule.

The commissioner has determined that it is not feasible to incorporate any of these methods into the rule amendment because to do so would be centrary to the statutory objectives that are the basis of the proposed rulemaking.

Pursuant to Minnesota Statutes, section 14.23, the commissioner has prepared this statement of need and reasonableness which is available to the public. The commissioner will publish notice of intention to adopt the rules without public hearing in the State Register and mail copies of the notice and proposed rules to persons registered with the Minnesota Department of Health pursuant to Minnesota Statutes, section 14.14, subdivision 1 (a). The notice will include the following statements: a) that the

public have 30 days in which to submit comments on the proposed rule; b) that no public hearing will be held unless 25 or more persons make a written request for a hearing within the 30-day comment period; c) giving information pertaining to the manner in which persons shall request a hearing; d) that the rule may be modified if modifications are supported by data and the views submitted; and e) other information required by Minnesota Statutes, section 14.22.

If 25 or more persons submit to the Minnesota Department of Health a written request for a hearing on the proposed rule, the agency shall proceed under the provisions of Minnesota Statutes, sections 14.131 through 14.20 and notice of the hearing shall be published in the State Register.

If no hearing is required, the commissioner will submit the proposed rule and notice as published, the rule as proposed for adoption, any written comments which have been received, and this statement of need and reasonableness to the Attorney General for approval as to their legality and form to the extent that it relates to legality.

These rules shall become effective five working days after publication of a notice of adoption in the State Register.

4. GENERAL STATEMENT OF REASONABLENESS.

The administrative aspects of SCH and CHP cannot be consolidated unless existing SCH procedures are modified to make them consistent with those of CHP. It is reasonable to make these procedural modifications because they will not in any way restrict eligibility or limit services provided by SCH.

The manner in which children enroll, care is authorized and medical providers are reimbursed will be altered to be consistent with CHP. It is reasonable to make these changes in order to offer the combined health care services of SCH and CHP as a consolidated benefit package administered jointly by both programs.

Minnesota Rules, Chapter 4705 govern only the administration of the SCH Program. The administration of CHP is governed by Minnesota Statutes, section 256.936; no administrative rules have been adopted for this program. Therefore, the proposed rule amendment applies only to the SCH program.

5. RULE-BY-RULE JUSTIFICATION.

While parts 4705.0100 to 4705.1500 generally will apply to the SCH/CHP consolidated program, some modifications must be made. The proposed rule (Part 4705.1600) describes these modifications and identifies the specific parts to which they apply.

Part 4705.1600, paragraph A modifies the application of Part 4705.0400 which defines the eligibility requirements for SCH treatment services. For purposes of the combined SCH/CHP benefit package, the CHP eligibility requirements are added to those of SCH. This results in a new set of eligibility criteria that include the age and family income requirements of CHP as well as the medical eligibility requirements (child having a handicapping condition as defined in part 4705.0100, subpart 14) of SCH. The CHP eligibility requirements are set out in Minnesota Statutes, Section 256.936, subdivision 1 (a). It is reasonable to add the CHP eligibility criteria because they must be imposed in order to offer the combined SCH/CHP benefit package. Moreover, children with handicapping conditions who do not meet CHP's eligibility requirements will continue to be eligible for SCH Program services.

Part 4705.1600, paragraph B pertains to Part 4705.0500, subpart 1 which states that SCH will provide an application form upon request. The SCH and CHP programs have in the past used their own unique application forms. For purposes of the combined SCH/CHP benefit package, the CHP form will be used instead of creating yet another application document. However, it will be necessary for

applicants to provide additional information not previously required by CHP, such as medical records in order to determine if the child's medical condition meets SCH's definition of "handicapping condition." It is reasonable to use this application process because it is less complicated than completing both existing application documents, but will still provide the information necessary to determine if the applicant meets the combined SCH/CHP eligibility requirements.

Part 4705.1600, paragraph C modifies the application of Part 4705.0600 which requires applicants with SCH adjusted incomes above 60 percent of the state gross median income to share in the cost of treatment services. All families who meet the income eligibility requirements of CHP will have SCH adjusted incomes below 60 percent of the state gross median income. However, the CHP annual enrollment fee of $25 per child, prescribed in Minnesota Statutes, Section 256.936, subdivision 4, will apply to the combined SCH/CHP benefit package. It is reasonable that the CHP enrollment fee be charged because it is required by state law and all families eligible for the combined program would still pay the fee to CHP if the enrollment processes remained separate. Thus the rule does not fix or adjust fees within the meaning of Minnesota Statutes, section 16A.128.

Part 4705.1600, paragraph D modifies the application of Part 4705.0900 which provides that, within any 12-month period, SCH will pay no more than $15,000 for the care of an individual. This includes costs for both inpatient and outpatient services. SCH and

CHP both cover certain outpatient services but no cost-effective method exists for separately tracking the reimbursement claims attributable to each program. However, since inpatient care is covered only by SCH, it will be possible to track these reimbursement claims for purposes of applying the $15,000 limit per 12-month period. Therefore, for purposes of the combined SCH/CHP benefit package, the annual expenditure limit will be applied to inpatient care only. It is reasonable to restrict the expenditure limitation to inpatient care because no expenditure limit exists for CHP outpatient services. Applying the $15,000 limit to inpatient care only may result in an increase in SCH benefits for some children enrolled under the combined SCH/CHP benefit package. However, the impact will be minimal because very few SCH families actually reach the annual expenditure limit. It is reasonable to make this change in order to avoid a substantial increase in administrative costs that would be required to establish a system to separately track outpatient claims for SCH.

Part 4705.1600 paragraph E modifies the application of Part 4705.1400, subparts 3, 4, and 5, and Part 4705.1500 which defines the responsibilities between SCH and service providers. For purposes of the combined SCH/CHP benefit package, CHP administrative procedures will be used for authorizing care and processing reimbursement claims. This is reasonable because it provides a uniform and efficient method for providing services to children and for reimbursing service providers. Although not required by SCH, service providers must be enrolled as Medical

Assistance providers in order to be eligible for reimbursement by CHP. Therefore, in order to receive reimbursement for services rendered through the combined SCH/CHP benefit package, providers will be required to be enrolled as Medical Assistance providers. This is reasonable because most of SCH's providers are also enrolled as Medical Assistance providers and this additional requirement will not unduly limit access to SCH covered services.

DATE: 6/16/89

Donnel J McInerney
for Sister Mary Madonna Ashton
Commissioner of Health

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

DEPARTMENT OF HEALTH

In the Matter of the Proposed Adoption of the Rule of the Department of Health Relating to the Consolidation of Benefits of Services for Children with Handicaps with Children's Health Plan

AFFIDAVIT OF MAILING THE NOTICE OF INTENT TO ADOPT A RULE WITHOUT A PUBLIC HEARING AND CERTIFICATE OF MAILING LIST

STATE OF MINNESOTA)
) ss.
COUNTY OF HENNEPIN)

I, Anita Gustafson, being duly sworn says:

I hereby certify that the list of persons and associations who have requested, pursuant to Minn. Stat. SS 14.14, subd. la, and 14.22 or 14.30, that their names be placed on the Department of Health rulemaking mailing list is accurate, complete, and current as of this 28 day of June, 1989.

That on the 28 day of June, 1989, at the City of Minneapolis, County of Hennepin, State of Minnesota, I mailed the attached Notice of Intent to Adopt A Rule Without a Public Hearing by depositing in the United States mail, a copy thereof, with postage prepaid, to all persons and associations on the aforementioned mailing list.

Anita Gustafson
ANITA GUSTAFSON

Subscribed and sworn to before me this
28 day of June, 1989.

Frederick L. King

FREDERICK L. KING
NOTARY PUBLIC - MINNESOTA
WASHINGTON COUNTY
My commission expires Feb. 22, 1991

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Rochester, MN 55902

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Minneapolis, MN 55414

Bob Hamper
Department of Human Services
444 Lafayette Road
St. Paul, MN 55155

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

DEPARTMENT OF HEALTH

In the Matter of the
Proposed Adoption of the Rule
of the Department of Health
Relating to the Consolidation
of Benefits of Services for
Children with Handicaps with
Children's Health Plan

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

Notice is hereby given that the Minnesota Department of Health (hereinafter "Department") intends to adopt the above-entitled rule without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in Minn. Stat. §§ 14.22 to 14.28 (1988). The statutory authority to adopt the rule is Minn. Stat. §§ 144.05 and 144.07(1).

All persons have 30 days in which to submit comment in support of or in opposition to the proposed rule or any part or subpart of the rule. Comment is encouraged. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on the rule within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rule addressed, the reason for the request, and any change proposed. If a public hearing is required, the Department will proceed pursuant to Minn. Stat. §§ 14.131 to 14.20 (1988).

Comments or written requests for a public hearing must be submitted to:

David Giese
Section of Maternal and Child Health
Minnesota Department of Health
717 Delaware Street Southeast
P. O. Box 9441
Minneapolis, Minnesota 55440

The proposed rule may be modified if the modifications are supported by data and views submitted to the Department and do not result in a substantial change in the proposed rule as noticed.

The rule proposed for adoption relates to the consolidation of the health care benefits of Services for Children with Handicaps with Children's Health Plan and establishes a single enrollment, care authorization and provider reimbursement process for families whose children meet the eligibility requirements of both programs. Because Services for Children with Handicaps and Children's Health Plan are distinct programs administered by different state agencies it was previously necessary for families to enroll their children in both programs. The requirement for double enrollment, as well as different care authorization and provider reimbursement procedures, created barriers for some families because of the confusion created in dealing with operating policies and procedures that differ greatly between the two programs. Consolidation of the programs will enable qualifying children to receive more easily the combined range of health care benefits. A free copy of the rule is available upon request from David Giese.

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 David Giese upon request.

Minnesota Statutes section 14.115 requires administrative agencies, when proposing a rule or an amendment to an existing rule, to consider various methods for reducing the impact of the proposed rule or amendment on small businesses and to provide opportunity for small businesses to participate in the rulemaking process. Pursuant to Minn. Stat. § 14.115, subd. 2, the impact on small businesses has been considered in the promulgation of the rule. Anyone wishing to present evidence or argument as to the rule's effect on small businesses may do so. The Department's position regarding the impact of the rule on small businesses is set forth in the Statement of Need and Reasonableness.

If no hearing is required, upon adoption of the rule, the rule and the required supporting documents will be submitted to the Attorney General for review as to legality and form to the extent the form relates to legality. Any person may request notification of the date of submission to the Attorney General. 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 adopted rule must submit the written request to David Giese.

Date: June 16, 1989

for Sister Mary Madonna Ashton
Commissioner of Health

Office of the Revisor of Statutes

Administrative Rules

TITLE: Proposed Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

AGENCY: Department of Health

MINNESOTA RULES: Chapter 4705

The attached rules are approved for publication in the State Register

Kathleen M. Traxler
Assistant Revisor

Department of Health

Proposed Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

Rules as Proposed (all new material)

4705.1600 CONSOLIDATION OF BENEFITS WITH CHILDREN'S HEALTH PLAN.

A consolidated benefit package, including the full range of services covered separately by SCH and the Children's Health Plan (CHP) created under Minnesota Statutes, section 256.936, may be offered to children who meet the eligibility requirements of CHP and have a handicapping condition as defined by SCH. Parts 4705.0100 to 4705.1500 generally apply to the consolidated program, with the modifications in items A to E.

A. Notwithstanding part 4705.0400, applicants are eligible for treatment services only if they meet the requirements specified in Minnesota Statutes, section 256.936, subdivision 1, paragraph (a), and have a handicapping condition as defined in part 4705.0100, subpart 14.

B. Notwithstanding part 4705.0500, subpart 1, applicants must complete the CHP application form and provide additional information that is required to determine medical eligibility for SCH.

C. Notwithstanding part 4705.0600, cost-sharing will not be required except that the CHP enrollment fee specified in Minnesota Statutes, section 256.936, subdivision 4, must be charged to all applicants.

D. Notwithstanding part 4705.0900, the SCH payment limit of $15,000 per 12-month period applies to inpatient care only.

E. Notwithstanding part 4705.1400, subparts 3, 4, and 5, and part 4705.1500, children enrolled in the consolidated program shall be issued an identification card that must be presented to service providers. To be eligible for reimbursement, service providers must be enrolled as Medical

Approved by Revisor

Assistance providers. Prior authorization and billing procedures must be consistent with procedures used by CHP that are applicable to the consolidated program.

Approved
by Revisor _____

Minnesota Rules: Amendments and Additions

NOTICE: How to Follow State Agency Rulemaking in the *State Register*

The ***State Register*** is the official source, and only complete listing, for all state agency rulemaking in its various stages. State agencies are required to publish notice of their rulemaking action in the ***State Register.*** Published every Monday, the ***State Register*** makes it easy to follow and participate in the important rulemaking process. Approximately 75 state agencies have the authority to issue rules. Each agency is assigned specific ***Minnesota Rule*** chapter numbers. Every odd-numbered year the ***Minnesota Rules*** are published. This is a ten-volume bound collection of all adopted rules in effect at the time. Supplements are published to update this set of rules. Proposed and adopted emergency rules do not appear in this set because of their short-term nature, but are published in the ***State Register.***

If an agency seeks outside opinion before issuing new rules or rule amendments, it must publish a NOTICE OF INTENT TO SOLICIT OUTSIDE OPINION in the ***Official Notices*** section of the ***State Register.*** When rules are first drafted, state agencies publish them as **Proposed Rules,** along with a notice of hearing, or notice of intent to adopt rules without a hearing in the case of noncontroversial rules. This notice asks for comment on the rules as proposed. Proposed emergency rules and withdrawn proposed rules are also published in the ***State Register.*** After proposed rules have gone through the comment period, and have been rewritten into their final form, they again appear in the ***State Register*** as **Adopted Rules.** These final adopted rules are not printed in their entirety in the ***State Register,*** only the changes made since their publication as **Proposed Rules.** To see the full rule, as adopted and in effect, a person simply needs two issues of the ***State Register,*** the issue the rule appeared in as proposed, and later as adopted. For a more detailed description of the rulemaking process, see the ***Minnesota Guidebook to State Agency Services.***

The ***State Register*** features partial and cumulative listings of rules in this section on the following schedule: issues 1-13 inclusive; issues 14-25 inclusive; issue 26, cumulative for issues 1-26; issues 27-38 inclusive; issue 39, cumulative for 1-39; issues 40-51 inclusive; and issue 52, cumulative for 1-52. An annual subject matter index for rules appears in August. For copies of the ***State Register,*** a subscription, the annual index, the ***Minnesota Rules*** or the ***Minnesota Guidebook to State Agency Services,*** contact the Print Communications Division, 117 University Avenue, St. Paul, MN 55155 (612) 297-3000 or toll-free in Minnesota 1-800-652-9747.

Issue 1

Jobs & Training Department

3300.0100; .0500; .0601 (proposed) 6

Health Department

4705.1600 (proposed) 4

Peace Officer Standards & Training Board

6700.0100; .0300; .0400; .0401; .0500; .0501; .0600; .0700; .0900; .0902; .1000; .2700-.2704 (adopted) 12

6700.0100 s.5, 9: .1100; .1200; .1201 (repealed) 12

Human Services Department

9500.1100 (adopted) 8

9505.0175; .0260; .0323 (adopted) 8

9500.1070 s.4, 6, 23 (repealed) 8

Proposed Rules

Pursuant to Minn. Stat. §§ 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing, as long as the agency determines that the rules will be noncontroversial in nature. The agency must first publish a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register.* The notice must advise the public:

1. that they have 30 days in which to submit comment on the proposed rules;
2. that no public hearing will be held unless 25 or more persons make a written request for a hearing within the 30-day comment period;
3. of the manner in which persons shall request a hearing on the proposed rules; and
4. that the rule may be modified if the modifications are supported by the data and views submitted.

If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§ 14.14-14.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register.*

Pursuant to Minn. Stat. §§ 14.29 and 14.30, agencies may propose emergency rules under certain circumstances. Proposed emergency rules are published in the *State Register* and, for at least 25 days thereafter, interested persons may submit data and views in writing to the proposing agency.

Department of Health

Proposed Permanent Rules Relating to Services for Children with Handicaps; Consolidation of Benefits

Notice of Intent to Adopt a Rule Without a Public Hearing

NOTICE IS HEREBY GIVEN that the Minnesota Department of Health (hereinafter "Department") intends to adopt the above-entitled rule without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules

without a public hearing in *Minnesota Statutes* §§ 14.22 to 14.28 (1988). The statutory authority to adopt the rule is *Minnesota Statutes* §§ 144.05 and 144.07(1).

All persons have 30 days in which to submit comment in support of or in opposition to the proposed rule or any part or subpart of the rule. Comment is encouraged. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on the rule within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rule addressed, the reason for the request, and any change proposed. If a public hearing is required, the Department will proceed pursuant to *Minnesota Statutes* §§ 14.131 to 14.20 (1988).

Comments or written requests for a public hearing must be submitted to:

David Giese
Section of Maternal and Child Health
Minnesota Department of Health
717 Delaware of Street Southeast
P.O. Box 9441
Minneapolis, Minnesota 55440

The proposed rule may be modified if the modifications are supported by data and views submitted to the Department and do not result in a substantial change in the proposed rule as noticed.

The rule proposed for adoption relates to the consolidation of the health care benefits of Services for Children with Handicaps with Children's Health Plan and establishes a single enrollment, care authorization and provider reimbursement process for families whose children meet the eligibility requirements of both programs. Because Services for Children with Handicaps and Children's Health Plan are distinct programs administered by different state agencies it was previously necessary for families to enroll their children in both programs. The requirement for double enrollment, as well as different care authorization and provider reimbursement procedures, created barriers for some families because of the confusion created in dealing with operating policies and procedures that differ greatly between the two programs. Consolidation of the programs will enable qualifying children to receive more easily the combined range of health care benefits. A free copy of the rule is available upon request from David Giese.

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 David Giese upon request.

Minnesota Statutes section 14.115 requires administrative agencies, when proposing a rule or an amendment to an existing rule, to consider various methods for reducing the impact of the proposed rule or amendment on small businesses and to provide opportunity for small businesses to participate in the rulemaking process. Pursuant to *Minnesota Statutes* § 14.115, subd. 2, the impact on small businesses has been considered in the promulgation of the rule. Anyone wishing to present evidence or argument as to the rule's effect on small businesses may do so. The Department's position regarding the impact of the rule on small businesses is set forth in the Statement of Need and Reasonableness.

If no hearing is required, upon adoption of the rule, the rule and the required supporting documents will be submitted to the Attorney General for review as to legality and form to the extent the form relates to legality. Any person may request notification of the date of submission to the Attorney General. 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 adopted rule must submit the written request to David Giese.

Dated: 16 June 1989

Sister Mary Madonna Ashton
Commissioner of Health

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.

Rules as Proposed (all new material)

4705.1600 CONSOLIDATION OF BENEFITS WITH CHILDREN'S HEALTH PLAN.

A consolidated benefit package, including the full range of services covered separately by SCH and the Children's Health Plan (CHP) created under Minnesota Statutes, section 256.936, may be offered to children who meet the eligibility requirements of CHP and have a handicapping condition as defined by SCH. Parts 4705.0100 to 4705.1500 generally apply to the consolidated program, with the modifications in items A to E.

A. Notwithstanding part 4705.0400, applicants are eligible for treatment services only if they meet the requirements specified in Minnesota Statutes, section 256.936, subdivision 1, paragraph (a), and have a handicapping condition as defined in part 4705.0100, subpart 14.

B. Notwithstanding part 4705.0500, subpart 1, applicants must complete the CHP application form and provide additional information that is required to determine medical eligibility for SCH.

C. Notwithstanding part 4705.0600, cost-sharing will not be required except that the CHP enrollment fee specified in Minnesota Statutes, section 256.936, subdivision 4, must be charged to all applicants.

D. Notwithstanding part 4705.0900, the SCH payment limit of $15,000 per 12-month period applies to inpatient care only.

E. Notwithstanding part 4705.1400, subparts 3, 4, and 5, and part 4705.1500, children enrolled in the consolidated program shall be issued an identification card that must be presented to service providers. To be eligible for reimbursement, service providers must be enrolled as Medical Assistance providers. Prior authorization and billing procedures must be consistent with procedures used by CHP that are applicable to the consolidated program.

Department of Jobs and Training

Proposed Permanent Rules Relating to Youth Employment Program

Notice of Intent to Adopt Rules Without a Public Hearing

NOTICE IS HEREBY GIVEN that the State Department of Jobs and Training intends to adopt the above entitled rules without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in *Minnesota Statutes*, sections 14.22 to 14.28. The Statutory authority to adopt the rule is *Minnesota Statutes*, sections 268.33 which provides the Department with emergency and permanent rulemaking authority to implement sections 268.31 to 268.36.

All persons have 30 days in which to submit comment in support of or in opposition to the proposed rule or any part or subpart of the rule. Comment is encouraged. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on the rule within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rule addressed, the reason for the request, and any change proposed. If a public hearing is required, the Department will proceed pursuant to *Minnesota Statutes* §§ 14.131 to 14.20 (1988).

Comments or written requests for a public hearing must be submitted to:

Kay Tracy
Youth Programs Coordinator
State Job Training Office
690 American Center Building
150 East Kellogg Boulevard
St. Paul, MN 55101
(612) 296-6064

The proposed rules may be modified if the modifications are supported by data and views submitted to the agency and do not result in a substantial change in the proposed rules as they are published following this notice.

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 Kay Tracy at the above address.

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

DEPARTMENT OF HEALTH

In the Matter of the
Proposed Adoption of the
Rule of the Department
of Health Relating to
the Consolidation of Benefits
of Services for Children
with Handicaps with Children's
Health Plan

FINDINGS OF FACT,
CONCLUSIONS, AND ORDER
ADOPTING RULE WITHOUT
A PUBLIC HEARING

(1) Notice of the Department of Health (hereinafter "Department") intent to adopt the above-entitled rule was published in the State Register on July 3, 1989, and was sent by United States mail to all persons on the list maintained by the Department pursuant to Minn. Stat. §§ 14.14, subd. 1a and 14.22 on June 28, 1989. (2) The statement of need and reasonableness was prepared before the Notice of Intent to Adopt Rule Without a Public Hearing was mailed to all persons on the rulemaking mailing list and published in the State Register and was available to the public.

(4) All persons were given the opportunity to submit comment on the rule for 30 days after notice of proposed rulemaking. (5) No requests for a public hearing on the rule were received by the Department.

(6) No submissions or comments on the rule were received by the Department. No requests for notice of submission to the Attorney General were received by the Department.

(7) Based on the comments and evidence in the record before the Department, including the statement of need and reasonbleness which is incorporated herein as the Department's findings, the Department concludes that the above-captioned rule is both needed and reasonable.

(8) NOW, THEREFORE, IT IS HEREBY ORDERED that the rule identified as proposed part 4705.1600 is adopted this 28th day of August, 1989,

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

DEPARTMENT OF HEALTH

In the Matter of the
Proposed Adoption of
Rules of the Department
of Health Relating to
the Consolidation of Benefits
of Services for Children with
Handicaps with Children's Health Plan

DECLARATION OF COUNSEL

I, Sarah G. Mulligan, Special Assistant Attorney General, do hereby declare that I have examined the above-captioned rule and the supporting rulemaking record and that, based on my examination, the Administrative Procedure Act and Minn. Rules ch. 2010 have been followed. Any exceptions are listed below. For Attorney General billing purposes, the four-digit docket client code is 1620.

Dated: September 14, 1989

SARAH G. MULLIGAN
Special Assistant
Attorney General

This is an amendment to combine two programs - SCH governed by MN Rules 4705 and CHP governed by MN Stat 256.936. Amendment applies to SCH

Health - 144.05 144.07 (1)

Authority -

144.05 General Duties of Commissioner Reports
Commissioner of health shall have general authority ... shall be responsible for development and maintenance of an organized system of programs

(b) Plan, facilitate ... support the organization of services for prevention and control of illness and disease and the limitation of disabilities

144.07
The Commissioner may make all rules necessary .. for provisions of this section and sections 144.06 and 144.09 and may amend, alter, or repeal such rules

Does this section include 144.05?

Statement of need and Reasonableness

MN Rules, Chapter 4705 govern SCH. Administration of CHP is governed by MN Stat 256.936, no administrative rule have been adopted for this program (CHP) Proposed rule amendment only applies to SCH

SF-00006-05 (4/86)

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT : ATTORNEY GENERAL - Health

DATE : September 14, 1989

TO : Christie Eller
Assistant Attorney General

FROM : Sarah G. Mulligan SGM
Special Assistant
Attorney General

PHONE : 297-2040

SUBJECT : In the Matter of the Proposed Adoption of Rules of the Department of Health Relating to the Consolidation of Benefits of Services for Children With Handicaps With Children's Health Plan

Enclosed for your review, pursuant to Minn. Stat. § 14.26 (1988) and Minn. Rules pt. 2010.0300 (1989), are the following documents to support the above-referenced rule:

1. Rule as proposed with a certificate of approval as to form by the Revisor of Statutes attached;

2. Notice of Intent to Adopt Rule Without a Public Hearing (as mailed);

3. Statement of Need and Reasonableness;

4. Affidavit of Mailing the Notice of Intent to Adopt Rule Without a Public Hearing;

5. Notice of Intent to Adopt Rule Without a Public Hearing (as published in the State Register);

6. Rule as adopted (original and three copies);

7. Findings of Fact, Conclusions, and Order Adopting Rule Without a Public Hearing; and

8. Declaration of Counsel.

SGM:sv

Enclosures