

MINNESOTA STATUTES 1979 SUPPLEMENT

256B.07 MEDICAL ASSISTANCE FOR NEEDY PERSONS

sured person, personal property used as a regular abode by the applicant or recipient, and a lot in a burial plot shall not be considered as resources available to meet medical needs.

[1979 c 309 s 5]

256B.44 Interest expense.

[For text of subd 1, see M.S.1978]

Subd. 2. [Repealed, 1979 c 336 s 18]

[For text of subd 3, see M.S.1978]

256B.47 Rate limits; notice of increases to private paying residents.

[For text of subds 1 to 3, see M.S.1978]

Subd. 4. No increase in nursing home rates for private paying residents shall be effective unless the nursing home notifies the resident or person responsible for payment of the increase in writing 30 days before the increase takes effect.

A nursing home may adjust its rates without giving the notice required by this subdivision when the purpose of the rate adjustment is to: (a) reflect a necessary change in the level of care provided to a resident; or (b) retroactively or prospectively equalize private pay rates with rates charged to medical assistance recipients as required by section 256B.48, subdivision 1, clause (a) and applicable federal law.

[1979 c 35 s 1]

CHAPTER 256D. GENERAL ASSISTANCE ACT

Sec.		Sec.	
256D.03	Responsibility to provide general assistance.	256D.37	New applicants and recipients; provisions for supplemental aid.
256D.07	Time of payment of assistance.		
256D.08	Exclusion from resources.		
256D.36	1973 categorical aid recipients; provisions for supplemental aid.		

256D.03 Responsibility to provide general assistance.

[For text of subd 1, see M.S.1978]

Subd. 2. After December 31, 1979, and before January 1, 1981, state aid shall be paid to local agencies for 60 percent and, after December 31, 1980, for 70 percent of all general assistance grants up to the standards of section 256D.01, subdivision 1, according to procedures established by the commissioner. Any local agency may, from its own resources, make payments of general assistance at a standard higher than that established by the commissioner, without reference to the standards of section 256D.01, subdivision 1.

[For text of subd 3, see M.S.1978]

[1979 c 303 art 2 s 2]

256D.07 Time of payment of assistance.

An applicant for general assistance or medical care authorized by section 256D.03, subdivision 3 shall be deemed presumptively eligible if his application on its face demonstrates that he is within the eligibility criteria established by Laws 1973, Chapter 650, Article 21 and any applicable rules and regulations of the commissioner. The application shall be in writing in the manner and upon the form prescribed by the commissioner and verified by the oath of the applicant or in lieu thereof shall contain the following declaration which shall be signed by the applicant: "I declare that this application has been

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examined by me and to the best of my knowledge and belief is a true and correct statement of every material point." General assistance shall be immediately granted to such presumptively eligible applicant without the necessity of first securing action by the board of the local agency.

If upon verification and due investigation it appears that the applicant provided false information and the false information materially affected his eligibility for general assistance or medical care provided pursuant to section 256D.03, subdivision 3 or the amount of his general assistance grant, the local agency may refer the matter to the county attorney. The county attorney may commence a criminal prosecution or a civil action for the recovery of any general assistance wrongfully received, or both.

[1979 c 237 s 1]

256D.08 Exclusion from resources.

Subdivision 1. In determining eligibility of a family or individual there shall be excluded the following resources:

(1) Property which does not exceed that permitted under the federally aided assistance program known as aid to families with dependent children; provided, however, that the commissioner may provide by rule and regulation more restrictive eligibility standards and levels of payment for general assistance if it is determined that funds available are not adequate to meet projected need; and

(2) Other property, including real or personal property used as a home, which has been determined, in accordance with and subject to limitations contained in rules and regulations promulgated by the commissioner, to be essential to the family or individual as a means of self-support or self-care or which is producing income that is being used for the support of the individual or family. The commissioner shall further provide by rule and regulation for those situations in which property may be retained by the family or individual where there is a reasonable probability that in the foreseeable future the property will be used for the self-support of the individual or family; and

(3) Payments, made pursuant to litigation and subsequent appropriation by the United States Congress, of funds to compensate members of Indian tribes for the taking of tribal land by the federal government.

[For text of subd 2, see M.S.1978]

[1979 c 250 s 2]

256D.36 1973 categorical aid recipients; provisions for supplemental aid.

Subdivision 1. Commencing January 1, 1974, the commissioner shall certify to each local agency the names of all county residents who were eligible for and did receive aid during December, 1973 pursuant to a categorical aid program of old age assistance, aid to the blind, or aid to the disabled. From and after January 1, 1980, until January 1, 1981, the state shall pay 70 percent and the county shall pay 30 percent of the supplemental aid calculated for each county resident certified under this section who is an applicant for or recipient of supplemental security income. After December 31, 1980, the state shall pay 80 percent and the county shall pay 20 percent of the aid. The amount of supplemental aid for each individual eligible under this section shall be calculated pursuant to the formula prescribed in Title II, Section 212 (a) (3) of Public Law 93-66, as amended.

[For text of subd 2, see M.S.1978]

[1979 c 303 art 2 s 3]

256D.37 New applicants and recipients; provisions for supplemental aid.

Subdivision 1. For all applicants for or recipients of supplemental security income who did not receive aid pursuant to any categorical aid program referred to in section 256D.36 during December, 1973, and who make application to the appropriate local

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agency, the local agency shall determine whether the individual meets the eligibility criteria prescribed in subdivision 2. For each individual who meets the relevant eligibility criteria prescribed in subdivision 2, the local agency shall certify to the commissioner the amount of supplemental aid to which the individual is entitled in accordance with all of the standards in effect December 31, 1973, for the appropriate categorical aid program. In computing the amount of supplemental aid under this section, the local agency shall deduct from the gross amount of the individual's determined needs all income, subject to the criteria for income disregards in effect December 31, 1973, for the appropriate categorical aid program. From and after the first of the month in which an effective application is filed, the state and the county shall share responsibility for the payment of the supplemental aid to which the individual is entitled under this section as provided in section 256D.36.

[For text of subd 2, see M.S.1978]

[1979 c 303 art 2 s 4]

CHAPTER 256E. COMMUNITY SOCIAL SERVICES ACT

Sec.		Sec.	
256E.01	Citation.	256E.07	Title XX allocation.
256E.02	Purpose.	256E.08	Duties of county boards.
256E.03	Definitions.	256E.09	Community social service plans.
256E.04	Biennial state plan.	256E.10	Program evaluation.
256E.05	Duties of commissioner of public welfare.	256E.11	Pilot programs.
256E.06	Distribution of state aids.	256E.12	Grants for chronically mentally ill persons.

256E.01 Citation.

Sections 256E.01 to 256E.12 may be cited as the "community social services act."

[1979 c 324 s 1]

256E.02 Purpose.

It is the purpose of the "community social services act" to establish a system of planning for and providing community social services administered by the boards of county commissioners of each county under the supervision of the commissioner of public welfare.

[1979 c 324 s 2]

256E.03 Definitions.

Subdivision 1. For the purposes of sections 256E.01 to 256E.12 the terms defined in this section shall have the meanings given them, unless the context clearly indicates otherwise.

Subd. 2. "Community social services" means services included in the comprehensive annual services plan published by the commissioner of public welfare and social services authorized by sections 245.61 to 245.691, 245.83 to 245.87, 252.21 to 252.27, subdivision 1, 254A.07, 254A.08, 254A.12, 254A.14, 260.251, subdivision 1a, 261.27 and 393.07, subdivision 1. Community social services do not include public assistance programs known as aid to families with dependent children, Minnesota supplemental aid, medical assistance, general assistance, general assistance medical care, or community health services authorized by sections 145.911 to 145.922.

Subd. 3. "Commissioner" means the commissioner of public welfare.

Subd. 4. "State social services plan" means the state social services plan developed pursuant to section 256E.04.

Subd. 5. "County plan" means the community social services plan required by section 256E.09.

Subd. 6. "County board" means the board of county commissioners in each county.