

HOUSE RESEARCH

Bill Summary

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Subject: MA Coverage for Persons Needing Breast or Cervical Cancer Treatment
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Overview

This bill establishes medical assistance coverage for people who need treatment for breast or cervical cancer and meet other eligibility criteria. The bill also establishes presumptive eligibility for medical assistance for these people.

Section

- 1 **Certain persons needing treatment for breast or cervical cancer.** Adds subd. 10 to § 256B.057. Allows medical assistance to be paid for a person who has been screened for breast or cervical cancer under the CDC's early detection program; needs treatment for breast or cervical cancer; meets the income eligibility guidelines for the Minnesota breast and cervical cancer control program; is under age 65; is not otherwise eligible for MA; and is not otherwise covered by health insurance. Specifies that MA covers only services provided during the time the person is being treated for cancer. Specifies that a person is eligible even if the person does not meet specified MA income and asset eligibility criteria.
- 2 **Presumptive eligibility for certain persons needing treatment for breast or cervical cancer.** Adds § 256B.0637. Makes MA available during a presumptive eligibility period for persons eligible for MA under section 1. Specifies that presumptive eligibility begins on the date the local agency determines that the person meets the eligibility criteria based on preliminary information, and ends on the date a determination is made as to eligibility. If an application for MA is not submitted by the last day of the month following the month during which the determination is made, makes presumptive eligibility end on the last day of the month.
- 3 **Limitation of choice.** Amends § 256B.69, subd. 4. Allows the commissioner to exempt from prepaid medical assistance, persons eligible for MA under section 1.
- 4 **Appropriation.** Makes a blank appropriation from the general fund to the commissioner of human services for administrative costs associated with implementing section 1.