# Behavioral Health Fund Eligibility Guidelines for State Fiscal Year 2023

Local agencies (contracted American Indian tribes and Minnesota counties) are responsible for determining Behavioral Health Fund financial eligibility. Use the following information to determine Behavioral Health Fund eligibility from July 1, 2022, to June 30, 2023. Refer to Minnesota Statutes, 254B.04, subdivision 1 and Minnesota Rules 9530.7000 to 9530.7030 for more information.

Individuals are determined eligible for and entitled to services paid for by the Behavioral Health Fund in one of two ways. The first way is by meeting eligibility standards for any one of the three programs below. Enrollment is not required.

- Minnesota Family Investment Program (Minnesota Statutes, chapter 256J)
- Medical Assistance (Minnesota Rules, parts 9505.0010 to 9505.0150)
- General Assistance, general assistance medical care, or work readiness (<u>Minnesota Rules, parts 9500.1200 to 9500.1318</u>).

The second way is when a local agency determines an individual's eligibility using the household size and household income limitations, per Minnesota Statutes, chapter <u>256B.056</u>. <u>Subd.4</u>, in the table below. This subdivision references only household size and household income limitations, not complete and entire Medicaid eligibility criteria.

**Note**: Individuals who have commercial insurance that covers 100% of treatment costs, or who are enrolled in a state-contracted managed care organization for the dates of treatment, are not eligible for Behavioral Health Fund services. Individuals who are enrolled in Medicaid do not need further eligibility determination or enrollment.

Household size	Household income limit for MA parents, caretaker relative, children age 19-20, adults without children (133% of the federal poverty guidelines)	Household income limit for MA children age 2-18 (275% of the federal poverty guidelines)	Household income limit for MA pregnant women (278% of the federal poverty guidelines)
1	\$18,074	\$37,372	N/A
2	\$24,352	\$50,352	\$50,901
3	\$30,629	\$63,332	\$64,023
4	\$36,907	\$76,312	\$77,145
5	\$43,185	\$89,292	\$90,266
6	\$49,462	\$102,272	\$103,388
7	\$55,740	\$115,252	\$116,509
8	\$62,017	\$128,232	\$129,631
Each additional person	\$6,277	\$12,980	\$13,121

There is no asset test for the three groups in the table above to access Behavioral Health Fund services.

#### **Direct Access:**

Local agencies are responsible for determining client financial eligibility for Behavioral Health Fund services using the above entitlement standards, and for notifying both the provider and the client. Providers are able to check MN-ITS for client Medicaid and Behavioral Health Fund eligibility/enrollment.

No state funds are available to pay for treatment for people who do not meet these income standards.

### Client BHF Eligibility/Commercial Insurance and PMAP/MinnesotaCare Enrollment

#### **Direct Access:**

As of the date of the comprehensive assessment, local agencies determine the client's Behavioral Health Fund eligibility, including presence of a third party liability (TPL – commercial insurance). Clients who have third party paying less than 100% of the recommended treatment costs continue to be eligible. Enter the information into MMIS TPL Resource File.

The substance use disorder provider will first bill the third party, and submit denials and record of payment to DHS. The Behavioral Health Fund will pay up to the allowed fee for service (FFS) rate for substance use disorder services not reimbursed by the third party.

Use MMIS or MN-ITS to determine if the client is enrolled in a Minnesota Pre-paid Health Plan with a state-contracted managed care organization. The organization is responsible for all substance use disorder treatment services for current enrollees. Counties providing assessment services for managed care organization-enrolled clients must coordinate placement with the organization. The organization is responsible for providing appropriate substance use disorder treatment services. Within the first week of each month, treatment providers are responsible for reviewing the current eligibility status of admitted clients, and for contacting the new placing authority in a timely manner.

Institutions for mental disease and hospital-based inpatient service providers are no longer an exception to this procedure.

## INCOME ELIGIBLITY DETERMINATION FOR BEHAVIORAL HEALTH FUND

For eligibility determinations, use the amount of money reported and verified as current income as of the date of Rule 25/comprehensive assessment. Income must be:

- · Calculated prospectively to cover one year
- Calculated for the household, as defined below, but does not include income of minors, unless the
  minor is seeking services under Minnesota Statutes, <u>Section 144.343</u> and <u>144.347</u>, and then only the
  income of the minor is included.

See Minnesota Rules, Part 9530.7000, Subpart 13 for specific information.

### **INCOME INCLUDES:**

- Cash wages or salaries
- Cash from self-employment (net after allowable IRS deductions)
- Periodic cash receipts from estates or trusts
- Cash payments from dividends, interest, rent, royalties
- Regular payments from the following sources:
  - Social Security
  - Railroad Retirement
  - Unemployment compensation
  - Union funds
  - Veteran's benefits
  - o Minnesota Family Investment Program

- Supplemental Security Income
- General Assistance
- Training stipends
- Alimony (if the person receives it)
- Military family allotments
- Child support (if the person receives it)

### INCOME DOES NOT INCLUDE:

- Gifts
- Tax refunds
- Inheritances
- Capital gains
- Non-cash benefits
- Compensation for injury (such as worker's compensation, veteran injured while in active duty)

- Cash assets drawn down or withdrawn from a bank
- Earnings or profits from the sale of a house, car, etc.
- Savings accounts
- Amounts related to the Cobell Settlement
- Court Ordered Child Support and Health Insurance Payments – see below.

Court-ordered child support and health insurance premium payments – that are paid by the client – are deductions from the client's household income.

## HOUSEHOLD SIZE DETERMINATION FOR BEHAVIORAL HEALTH FUND

If the client is adult, then the household size includes the following persons living in the same dwelling unit:

- Client
- Client's spouse
- Client's minor-aged children
- Client's spouse's minor-aged children.

If the client is a minor child, then the household size includes:

- Client
- Client's parents (birth or adoptive)
- Client's minor-aged siblings.

Household size also includes a person listed above who is in out-of-home placements, if one of the persons listed above is contributing to the cost of care of that person in out-of-home placement.

### HOUSEHOLD SIZE DOES NOT INCLUDE:

- Persons who have no legal relationship to the client
- Unmarried partners
- Step-parents, unless the minor child is adopted.