

Revision: HCFA-PM-91 (BPD)
August 1992

OMB No.: 0938

State: Minnesota

Citation

4.18 Recipient Cost Sharing and Similar Charges

42 CFR 447.51
through 447.58

- (a) Unless a waiver under 42 CFR 431.57 applies, deductibles coinsurance rates, and copayments do not exceed the maximum allowable charges under 42 CFR 447.54.

1916(a) and (b)
of the Act

- (b) Except as specified in items 4.18(b)(4), (5), ~~and (6)~~ and (7) below, with respect to individuals covered as categorically needy or as qualified Medicare beneficiaries (as defined in section 1905(p)(1) of the Act) under the plan;

(1) No enrollment fee, premium, or similar charge is imposed under the plan.

(2) No deductible, coinsurance, copayment, or similar charge is imposed under the plan for the following:

- (i) Services to individuals under age 18, or under –

Age 19

Age 20

Age 21

Reasonable categories of individuals who are age 18 or older, but under age 21, to whom charges apply are listed below, if applicable.

- (ii) Services to pregnant women related to the pregnancy or any other medical conditions that may complicate the pregnancy.

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1916(c)	4.18(b)(4)	____ A monthly premium is imposed on pregnant women and infants who are covered under section 1902(a)(10)(A)(ii)(IX) of the Act and whose income equals or exceeds 150 percent of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(c) of the Act are met. Attachment 4.18-D specifies the method the State uses for determining the premium and the criteria for determining what constitutes undue hardship for waiving payment of premiums by recipients.
1902(a)(52) and 1925(b) of the Act	4.18(b)(5)	____ For families receiving extended benefits during a second 6-month period under section 1925 of the Act, a monthly premium is imposed in accordance with sections 1925(b)(4) and (5) of the Act.
1916(d) of the Act	4.18(b)(6)	____ A monthly premium, set on a sliding scale, imposed on Qualified disabled and working individuals who are covered under section 1902(a)(10)(E)(ii) of the Act and whose income exceeds 150 percent (but does not exceed 200 percent_ of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(d) of the Act are met. A TTACHMENT 4.18-E specifies the method and standards the State uses for determining the premium.
<u>1916(g) of the Act</u>	<u>4.18(b)(7)</u>	<u>X</u> <u>Premiums are imposed on individuals under section 1902(a)(10)(A)(ii), subclause XIII, subclause (XV) or subclause (XVI) as described in Attachment 2.6-A.</u>
<u>1916(j) of the Act</u>	<u>4.18(b)(8)</u>	<u>No premium, enrollment fee or similar charge is imposed against an American Indian furnished services directly by the Indian Health Services, an Indian Tribe or Tribal Organization, or an Urban Indian Organization or through referral under contract health services for which payment may be made under Title XIX of the Social Security Act.</u>

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