



The Minnesota Family Planning Program (MFPP)

Certified MFPP Provider Training Guide

Minnesota Health Care Programs (MHCP)

Family planning and other MHCP-enrolled providers must become eligible to provide MFPP services before serving MFPP members.

This guide is **only** intended for MHCP-enrolled providers who are certified, or want to become certified, to determine whether people not currently enrolled in Medical Assistance are presumptively eligible (PE) for MFPP coverage.

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Minnesota Family Planning Program

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Minnesota Family Planning Program

Using This Provider Training Guide

This guide explains policies and procedures for certified MFPP providers who determine presumptive eligibility (PE) for Minnesota Family Planning Program (MFPP) applicants. DHS considers you a certified MFPP provider upon approval of your application and successful review and completion of this training guide. Review this guide in its entirety.

The following reference materials are listed throughout this guide:

- [MFPP Application \(DHS-4740\) \(PDF\)](#) *
- [MFPP Renewal Application \(DHS-5440\) \(PDF\)](#) *
- [MHCP Fact Sheet \(DHS-3182\) \(PDF\)](#) *
- [MFPP Brochure \(DHS-4750\) \(PDF\)](#) *
- [MHCP Income and Asset Guidelines \(DHS-3461A\) \(PDF\)](#)
- [MHCP Authorization to Request Birth Records \(DHS-4841\) \(PDF\)](#)
- [Giving Permission for Someone to Act on My Behalf \(DHS-3437A\)](#)
- Short-Term Approval Notice ([DHS-5701A](#)) (PDF)**
- Short-Term Denial Notice ([DHS-5701B](#)) (PDF) **
- MFPP Rx Form ([DHS-6429](#)) (PDF) **

Review these materials when they are referenced to follow along with guide instructions. You will need these materials to determine PE, help members apply for MFPP coverage, and bill for MFPP-covered services. Certified MFPP providers can order or access these materials on the [MFPP forms, documents and resources](#).

* In stock at DHS or may be ordered online at [DHS Forms Supply](#).

** Non-public document. Access by logging in to [MN-ITS](#).

Refer to the [MHCP Provider Directory](#) to locate health care providers that serve fee-for-service MHCP members.

Minnesota Family Planning Program

Program Overview

MFPP improves access to pre-pregnancy family planning services for eligible Minnesota residents.

MFPP Member Population

MFPP covers low-income Minnesota residents of both genders who are U.S. citizens or eligible noncitizens. MFPP does not have any age restrictions.

MFPP Member Application

People apply for MFPP coverage by doing one of the following:

- Mailing the application to DHS for an eligibility determination for a one-year period
- Submitting the application to a certified MFPP provider for a PE determination and having the provider decide whether the applicant is immediately eligible for PE (also called short-term coverage)

MFPP Provider Certification

Before becoming a certified MFPP provider, you must do the following:

- Be an enrolled MHCP provider and follow the MHCP provider requirements in the [MHCP Provider Agreement \(DHS-4138\) \(PDF\)](#). Failure to follow these requirements may result in disciplinary action or admonishment.
- Follow the requirements listed in the Assurance Statement for MFPP Presumptive Eligibility Providers, found on page 3 of the [MFPP Application Packet \(DHS-4773\) \(PDF\)](#). The assurance statement is an addendum to the MHCP Provider Agreement.
- Follow the requirements in this guide.

To become a certified MFPP provider and make PE determinations, MHCP-enrolled clinics must do the following:

- Complete and submit the [MFPP Provider Application Packet \(DHS-4773\) \(PDF\)](#).
- Ensure that all staff making PE determinations have reviewed this training guide.

DHS will then send you a letter stating whether your clinic was approved or denied as a certified MFPP PE provider.

Clinics **cannot** make PE determinations until DHS approves their certification as an MFPP PE provider and their staff is trained.

Once certified, you must explain the importance of following MFPP guidelines to all staff involved in determining PE. Communicating MFPP guidelines will help you retain MFPP provider status. Refer to the [Violating Provider Agreement](#) subsection under Provider Requirements in the MHCP Provider Manual.

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Provider Resources

- [MFPP provider webpage](#)
- [MN-ITS](#)
- [MFPP program posters \(DHS-4833\) \(PDF\)](#)

For billing questions, contact:

MHCP Provider Call Center
Monday – Friday, 8:00 a.m. – 4:15 p.m.
651-431-2700 or 800-366-5411
TTY: 711

After three business days, if an MHCP Member ID number cannot be verified through MN-ITS,
contact:

MFPP Eligibility Specialists
651-431-3480 or 888-702-9968

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MFPP Eligibility

Presumptive Eligibility (PE)

PE is a temporary period of coverage determined at the point of service by a certified MFPP provider. With minimal declaratory information, the certified MFPP provider must do the following:

- Determine PE for the member.
- Send the applicant's eligibility information to DHS. DHS will determine ongoing eligibility.

Federal anti-kickback laws [prohibit certain types of business transactions](#) or arrangements. Because of this, MFPP-certified providers must not grant PE to a staff member applying for MFPP, regardless of whether the staff member is employed or a volunteer. Federal authority is covered in the [CMS Medicare Program Integrity Manual](#). Do not determine PE for staff members to avoid accusations that such actions fall under the federal anti-fraud provision.

To protect the integrity of PE determinations by MFPP-certified providers, staff members who need a PE determination may choose one of the options below to apply for MFPP:

- Visit another certified MFPP provider for a PE determination
- Submit an [MFPP application \(DHS-4740\) \(PDF\)](#) to DHS for processing:

Mail: Minnesota DHS-MFPP
PO Box 64960
St. Paul, MN 55164-0960
Fax: 651-431-7532
Phone: 651-431-3480 (to follow up on PE determination)

People may submit an [Application for Health Coverage and Help Paying Costs \(DHS-6696\) \(PDF\)](#) through their local [county and tribal agency \(PDF\)](#) for other health care programs, or they may apply online at www.mnsure.org.

Refer to the [How to Determine PE](#) section of this guide for step-by-step instructions on determining presumptive eligibility.

Ongoing MFPP Eligibility

DHS determines ongoing MFPP eligibility. DHS reviews applications and proofs required to determine an applicant's eligibility for one year of coverage. DHS then mails a notice of eligibility or ineligibility to each applicant.

Differences between PE determination and the ongoing eligibility determination include the following:

- To be eligible for ongoing benefits, applicants must provide proof of income and proof of citizenship and immigration status (if not previously verified).
- DHS reviews citizenship and immigration status when determining ongoing eligibility.
- DHS reviews the applicant's income in detail and decides whether to exclude certain types of income.

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Eligibility Renewal

DHS sends a renewal cover letter and [MFPP Renewal \(DHS-5440\) \(PDF\)](#) to enrollees before the end of their twelve-month eligibility period. If an enrollee completes the renewal form, provides appropriate proofs, and returns them along with the renewal cover letter, DHS will redetermine the enrollee's MFPP eligibility for another twelve-month period. DHS may not have the ability to forward returned applications. **Remind all applicants that they must report address changes to DHS within 10 days to prevent missed mailings.**

Dual MFPP and Sage Providers: Determining the Right Program

If you are both a certified MFPP provider and a [Sage screening provider](#) (through the Minnesota Department of Health), determine which program best meets the patient's medical needs. Each program has its own income and eligibility requirements. Take the actions indicated for each demographic.

Patients younger than 40 years old

Enroll the patient in MFPP only and bill MFPP for all services, except when the patient has an abnormal clinical breast exam (CBE) or family history of early breast cancer. Aside from these circumstances, a patient under 40 years old does not need a mammogram.

If the patient has an abnormal CBE or family history of early breast cancer, do the following:

- Enroll the patient in both Sage and MFPP.
- Bill MFPP for the office visit and pap.
- Bill Sage for the mammogram.

Sage will cover any other follow-up necessary for a breast problem.

Sage enrollment will allow for treatment coverage under Medical Assistance basis (MA-BC), if needed.

Patients 40 years old or older and visiting your clinic for family planning

Enroll the patient in both Sage through the Minnesota Department of Health and MFPP, then bill according to the following:

- Bill MFPP for the office visit and pap.
- Bill Sage for the mammogram.

Sage will cover any other follow-up necessary for a breast problem.

Sage enrollment will allow for treatment coverage under Medical Assistance basis (MA-BC), if needed.

Patients 40 years old or older but not visiting your clinic for family planning

Enroll the patient in Sage only and bill Sage for all services.

MFPP enrollees with cervical cancer

If a woman of any age who is enrolled only in MFPP needs treatment for cervical cancer, call Sage for help with enrollment into MA-BC.

Sage Appointment Line: 888-643-2584

Sage FAQ Line: 651-201-5600

MFPP Application

Form: Refer to the [MFPP Application \(DHS-4740\) \(PDF\)](#)

Open the application on a second monitor or print the application to follow along while we go through the application question by question.

Overview of the MFPP Paper Application

Anyone who wants to apply for MFPP short-term or ongoing coverage must complete the most current MFPP application. People cannot use the MFPP application to apply for other MHCP such as Medical Assistance (MA) or MinnesotaCare.

Only one person can apply for MFPP per application. If multiple family members want to apply for MFPP coverage, each must complete a separate MFPP application.

MFPP providers use a portion of the application to determine PE. DHS uses the full application to determine ongoing MFPP eligibility.

If applicants or enrollees want someone else to help them with the MFPP application, and to act on their behalf, they must complete the [Giving Permission for Someone to Act on My Behalf form \(DHS-3437A\) \(PDF\)](#).

- The person acting on the applicant's or enrollee's behalf is called an **authorized representative**. The authorized representative:
 - Must be 18 years old or older
 - Can be a friend, relative or someone else who knows all of the applicant's or enrollee's information
 - Helps the applicant or enrollee fill out forms and provides the applicant's or enrollee's information to DHS
- An applicant or enrollee who has chosen to have an authorized representative can also choose to have all notices sent to the authorized representative.
- Remind all authorized representatives that address changes must be reported to DHS within 10 days to prevent missed mailings.

MFPP Paper Application in Detail

Cover Page

The cover page explains the following:

- Who the program is for
- How the applicant can get short-term coverage (PE)
- How to complete the application
- Who to call if the applicant has questions or needs help
- How the applicant can apply for full medical benefits

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Page 1: The questions on Page 1 are needed to determine MFPP short-term eligibility and ongoing eligibility for MFPP.

Question 1: Personal information

This question asks for basic information used to identify and contact the applicant. It also asks for information that is needed for the PE or ongoing eligibility determination.

- An applicant must provide a name and date of birth.
- A **Social Security number** on page one is optional for people applying for PE
- **Are you pregnant?** Applicants who are pregnant are not eligible for MFPP. An applicant who is not certain she is pregnant can check “No” on the application.
- **Home address; homeless; do you plan to make Minnesota your home?** This information is used to determine if the applicant is a Minnesota resident, or whether an applicant’s circumstances require exceptions to the normal residency rules. Applicants must have a home address in Minnesota, or meet one of the following two exceptions to this rule:
 - An applicant who is homeless does not need to provide a home address but must provide a mailing address.
 - An applicant who is a migrant worker may have a home in another state but must be living in Minnesota when he or she applies.
- **Mailing address:** This information lets DHS know where to send notices. If applicants do not want their notices to go to their home address, they may provide another mailing address. If a mailing address is provided on the application, all notices will be sent to that address. The mailing address may be general delivery, a shelter address or, with approval, the provider’s office if arrangements have been made regarding timely delivery of notices to applicants.
- **Language:** This information helps DHS communicate with the applicant.
- **Ethnicity and race:** These questions are optional. They are used for reporting purposes only.

Question 2: Household size and income information

Question 2a asks for the number of other people who live with the applicant to determine household size. In addition to the applicant, the following people are counted in the applicant’s household if they reside at the same address or are temporarily away from home:

- The applicant’s spouse
- The applicant’s biological, natural, adopted, and stepchildren younger than 19
- If the applicant is under age 19, the following are also included:
 - Biological, natural, or adoptive parents, or stepparents
 - Biological, natural, or adoptive siblings, or stepsiblings under age 19

Question 2b asks for the income of the applicant’s household. We ask this to determine if the applicant is eligible for MFPP PE. Applicants can report their household’s income either as a monthly or yearly amount. The income amount must be clearly labeled as “monthly” or “yearly.” A person’s income includes all the types of taxable income a person would list on a federal 1040 tax return, such as wages, self-employment, and interest income, minus any adjustments. Adjustments are listed on page 3 of the application, under question 10. Applicants do not have to verify income or adjustments for PE.

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Whose income counts

If the applicant	Then
Is under 21 years old:	Applicant only includes his or her own income. DHS counts only the individual's income.
Is 21 years old or older:	Applicant includes the income of everyone he or she counted in question 2a.

Pages 2 – 4: The questions on pages 2 through 4 are needed to determine ongoing MFPP eligibility. People who want to apply for short-term coverage only do not have to complete pages 2 through 4.

Question 3: Social Security number information

The applicant has to provide his or her Social Security number for ongoing benefits unless he or she qualifies for one of the exemptions listed on the application. The Notice of Privacy Practices at the end of the application form explains why we ask for Social Security numbers.

Questions 4-5: Spouse and children information

Questions 4 and 5 ask for detailed information about people living with the applicant, such as the applicant's spouse and children under 19 years old. This information is used to determine household size for ongoing eligibility for MFPP.

Question 6: Tax-filing status

The applicant's tax filing status is used to determine household size for ongoing eligibility for MFPP. People do not have to file taxes or be a tax dependent to be eligible for MFPP. If the applicant indicates he or she does not expect to file an income tax return next year, he or she must answer the questions under 6c.

Questions 7–9: Household income information

Questions 7–9 ask the applicant for all of his or her sources of income and income for anyone listed in questions 4, 5 and 6. Some types of income are not counted; however, DHS can only ensure that income is correctly calculated if we have detailed income information.

Applicants under the age of 21 only have to provide wages and other income information for themselves. They do not need to include wages and income information for any other people listed on the application.

Applicants will need to provide proof of all the income they reported when they submit the full application.

Question 10: Income adjustments

Question 10 asks whether any of the household members pay for certain things that can be subtracted from their gross income for MFPP ongoing eligibility. Applicants will need to provide proof of all the adjustments they reported when they submit the full application.

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Question 11: Educational funds and American Indian or Alaska Native income

Question 11 asks whether anyone in the household has received educational funds that are used for educational purposes, or particular types of American Indian and Alaska Native income. Some types of income are not counted so this information allows DHS to make an accurate eligibility determination. Applicants will need to provide proof of the educational funds or American Indian or Alaska Native income they reported when they submit the full application.

Question 12: Citizenship information

Question 12 asks whether the applicant is a U.S. citizen or U.S. national. DHS uses this information to determine an applicant's ongoing MFPP eligibility. DHS will follow up with the applicant if they need to verify the applicant's citizenship.

Question 13: Immigration status

Applicants who are not a U.S. citizen or U.S. national must provide information on their immigration status. This information is used to determine if the applicant is eligible for ongoing MFPP coverage. DHS will follow up with the applicant if they need to verify the applicant's immigration status.

Question 14: Health insurance information

Applicants can have other health insurance and still be eligible for MFPP. If the applicant has other health insurance, the insurance company becomes the first payer of any health care related claim. Applicants may agree to have DHS contact their other health insurance, or they may tell DHS not to contact their other health insurance.

- Applicants who agree to have DHS contact the other health insurance must supply the requested information or send DHS a copy (front and back) of their health insurance card.
- Applicants who fear physical or emotional harm may not want to have DHS contact their other health insurer. A claim submitted to the other health insurance may generate member notices and an explanation of medical benefits. DHS cannot stop the health insurance company from mailing those member notices. When these notices are sent to the member's home, other people living in the home may get access to the information. To prevent this from happening, applicants may opt out of providing health insurance information by checking the second box. If an applicant opts out of providing information about other health insurance, bill MHCP only for the covered services. If applicants ask whether they should mark the box to opt out of disclosing private health insurance information, explain that the opt-out will protect them if they have a concern about correspondence from their private insurer being sent to their home address. Only MFPP applicants can choose to opt out of providing their other health insurance information.

MHCP never sends an explanation of benefits to enrollees who receive MFPP services.

Question 15: Help with family planning medical bills in the past three months

Applicants can request retroactive MFPP coverage for up to three months before the month they apply. To qualify for MFPP for past months a person must have family planning medical bills for that time and meet all MFPP eligibility rules. Applicants can choose to apply for MFPP coverage to begin one, two or three months before the month they submit the application. Applicants who want to request retroactive MFPP coverage must also indicate if the information they reported on the application was the same for the past months. DHS will contact the applicant if more information is needed to decide if the applicant is eligible for retroactive MFPP coverage.

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Page 5: This page must be completed for both MFPP short-term eligibility and ongoing MFPP eligibility.

Signature

The signature section presents information on fraud investigation release, medical assignment of benefits, medical release and explanations of agreements to which the applicant consents by signing the MFPP application. Without a signature, the application is not complete and certified MFPP providers cannot determine PE.

Notice of Privacy Practices (Page A–B)

The next section of the application is the standard DHS Notice of Privacy Practices. It explains how medical and other private information about the applicant or enrollee will be used, when it will be disclosed, and how he or she can get the information.

All applicants for MFPP have the same rights to privacy as any other applicant for MHCP. These rights are covered under the Minnesota Government Data Practices Act and the federal Health Insurance Portability and Accountability Act (HIPAA), which protect privacy and identify other agencies that can have access to the applicant's or enrollee's information. This section also explains why the information is needed and identifies agencies' responsibilities with the information.

The applicant or enrollee has the right to see his or her collected information and can question the accuracy of this information. Refer these questions to DHS.

If you receive a request for information about a person's MFPP status from a third party, do not confirm or deny that the person has applied for, or is enrolled in, the program. Refer requests for information from third parties to the information privacy official at DHS:

DHS Appeals and Regulations
P.O. Box 64941
St. Paul, MN 55164-0941

If an applicant or enrollee feels his or her privacy rights have been violated, he or she may send a written complaint. The Notice of Privacy Practices explains where to send the complaint, depending on whom the complaint is against. It also explains that an applicant cannot be treated badly, and that services cannot be denied to the applicant because the applicant made a complaint.

Rights and Responsibilities (Page C–E)

This section gives applicants other information they need to know, including the following:

- How DHS uses information about their immigration status
- Their right to fair treatment
- Their right to appeal an agency decision, and how to ask for a hearing
- Rules they must follow
- Their required obligation to cooperate with state and federal reviews
- Their required obligation to report changes within 10 days

How to Determine PE

Step 1: Check Eligibility through MN–ITS

Before making the PE determination

Check eligibility with MN–ITS or the phone-based system to determine whether the applicant is currently on other health care coverage through the state. Applicants enrolled in Medical Assistance (MA) are **not eligible** for MFPP.

Under the MHCP provider agreement, you must verify the applicant’s eligibility before granting PE and re-verify eligibility each time you provide services to an MFPP enrollee.

PE eligibility

Applicants can receive MFPP coverage through PE only once in a 12-month period. If your patient has had PE for MFPP in the past year the message will say, *“This recipient had Minnesota Family Planning Program coverage under PE during the past year.”* If you see or hear this message, that applicant is **not** eligible for MFPP PE again.

Other insurance or third-party liability (TPL)

If an applicant claims he or she does not have other insurance, but MN–ITS verification shows other insurance, or your claim is denied because the applicant has other insurance on an old file, ask the applicant if his or her insurance is still active. If it is not active, call the Provider Call Center with the termination date. Claims will continue to be denied until the provider or applicant notifies DHS of the TPL change.

Step 2: Provide Program Information and the MFPP Application

Forms: Refer to the [MFPP Brochure \(DHS-4750\) \(PDF\)](#) and [MHCP Fact Sheet \(DHS-3182\) \(PDF\)](#).

Once you have established the applicant is not enrolled in MHCP and has not had PE in the last 12 months, give the applicant the MFPP application, the MFPP brochure and the MHCP fact sheet. Advise the applicant of the sections of the application needed for a PE determination (pages 1 and 5 only) and for ongoing benefits (pages 1 **through** 5). The applicant may choose to complete the full application at your office or at home. Advise the applicant to complete all of the pages in the application for ongoing benefits, answer all of the questions to the best of his or her ability, use blue or black ink, and **print clearly**.

When you provide an MFPP application, advise applicants of their responsibility to read the Notice of Privacy Practices and the Notice of Rights and Responsibilities on pages A through E. Give applicants those pages to take with them after completing the application process.

Step 3: Review Application for Completeness

Refer to the [MFPP Application \(DHS-4740\) \(PDF\)](#) and review the application for completeness. If any questions are left unanswered, ask the applicant to answer them. At a minimum, the applicant must complete all of the information on pages 1 and 5 for a PE determination. If the applicant does not qualify for PE, he or she has the option of completing all pages of the application for ongoing MFPP benefits.

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Make sure that the applicant signs the application. The MFPP application is incomplete without the applicant's signature.

Step 4: Determine Presumptive Eligibility (PE)

Determine Minnesota Residency

Review [question 1](#) to see if the applicant meets Minnesota residency requirements. The applicant must provide a Minnesota address, or if homeless, indicate he or she lives in a Minnesota county, and answer the question "Do you plan to make Minnesota your home?"

- People age 21 and older meet the residency requirements if they live in Minnesota and plan to make Minnesota their home.
- People younger than 21 meet the residency requirements if they live in Minnesota. They do not have to answer "yes" to the question "Do you plan to make Minnesota your home?"

Determine Household Size

Review [question 2a](#) to determine the household size for the applicant. See [page 10](#) of this guide for more information about who is counted in an applicant's household.

Determine Income

Review [question 7-9](#) to determine the income for the applicant. See pages 11-12 of this guide for more information about what income to count.

PE Eligibility Determination

If the applicant meets the Minnesota residency requirements and you have determined the applicant's household size and income, compare the income amount listed on the application to the income standard for the household size listed on the [Family size and income limits](#) on page 16 of this guide. (Use either the monthly or annual income) The applicant's income must be equal to or less than the dollar amount listed for the household size to qualify for MFPP PE. Here are two examples to illustrate how this works.

Example 1 – Susan

Susan Johnson applies for MFPP at your office. She states she is 25, married and has no children. This is a household size of two: Susan and her spouse. She lists the combined adjusted gross income for herself and her spouse of \$2,000 per month (or \$24,000 annually). When we look at the chart, we see a household size of two has an annual income limit of **\$35,342**. Susan is under that income standard, and so she is income eligible for MFPP PE.

Example 2 – Gary

Gary applies for MFPP at your office. On the application he states he is 36, is married, lives with his spouse who is pregnant, and has three children ages 4, 9, and 11. Gary's household size is six. Remember, he indicated his spouse is pregnant so she counts as two people in the household size. Gary states on the application the combined monthly income for the household is \$3,852 (\$46,224 annually). The chart shows the monthly income limit for a household of six is **\$6,007**. Gary is income eligible for PE.

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Family size and income limits

Effective July 1, 2020 – June 30, 2021

Family size	Monthly Income Limit*	Annual Income Limit*
1	\$2,180	\$26,158
2	\$2,945	\$35,342
3	\$3,711	\$44,526
4	\$4,476	\$53,710
5	\$5,241	\$62,894
6	\$6,007	\$72,078
7	\$6,772	\$81,262
8	\$7,537	\$90,446
Add'l	+ \$765	+ \$9,184

* A 5 percent disregard is included in each amount listed.

PE Effective Dates

If you determine the applicant is eligible for PE, you must determine when PE coverage begins and ends.

Follow these rules:

- PE coverage begins on the day you approve PE for the applicant.
- PE coverage ends on whichever of these two dates applies:
 - If the applicant does *not* submit a full MFPP application for ongoing MFPP, PE ends the last day of the month following the month in which PE was approved. For example, if PE was approved on February 7, 2020, and the applicant does not submit an application for ongoing MFPP, PE would end on March 31, 2020. (You **do** need to figure out this date. You will put this date on the approval notice.)
 - If the applicant submits a full MFPP application for ongoing MFPP by the last day of the month following the month in which PE was approved, PE ends when DHS processes that full application and determines eligibility for ongoing MFPP. (You **do not** need to figure out this date.)

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Step 5: Provide Notices

Once the PE determination is made, you must give the applicant an approval notice (DHS-5701A) or denial notice (DHS-5701B). These notices are available only in MN–ITS.

Forms: Refer to the Minnesota Family Planning Program Short-Term Approval Notice (DHS-5701A) and the Minnesota Family Planning Program Short-Term Denial Notice (DHS-5701B) in MN–ITS.

Approval Notice

Complete these fields:

- Current Date
- Applicant’s last name, first name, middle name
- Date of birth
- Coverage begin date: The coverage begin date is the date you approve the person for short-term coverage. In most cases this will be the same as the current date.
- Coverage end date: There is a blank space under **“Your short-term coverage ends on whichever of these two dates applies.”** In the blank space, enter the last day of the month after the month short-term coverage was approved. (See **PE Effective Dates** above for more information.)
- Name and phone number of clinic or organization

During the PE period, this approval notice acts as the applicant’s MA ID card. It may take up to three working days before the applicant’s MFPP eligibility can be verified through MN–ITS. Other providers may rely on this notice as proof of coverage, but they may require eligibility to be verified in MN–ITS before providing services.

Denial Notice

Complete these fields:

- Date
- Name of the applicant
- Clinic or organization’s name and phone number

You must indicate the reason for the denial on the notice. If the applicant refused to complete a question or sign the application, check the “Other” box and write that the applicant did not provide the necessary information.

Make a copy of the denial notice and attach the copy to the MFPP application when you submit it to DHS.

Step 6: Provide Other Required Information to the Applicant

Pages A through E of the MFPP Application

Give pages A through E of the MFPP application to the applicant to keep.

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Primary Care Resources

If you have approved PE, you must give the applicant the list of low cost health care resources found on the DHS website: <http://mn.gov/dhs/people-we-serve/adults/health-care/health-careprograms/resources/>.

Explain to the applicant that these providers may be available to provide primary care services at reduced costs that are not covered by MFPP.

Step 7: Notify DHS of the MFPP PE Approval

If the applicant was found eligible, fax page 1 and page 5 of the [MFPP Application \(DHS-4740\) \(PDF\)](#) with the PE enrollee's information to DHS. Do **not** fax page 1 or page 5 if you deny PE.

- Complete the “Provider Use Only” section at the top of the form with your provider information.
- Do **not** complete the “Provider Use Only” boxes if you deny PE.
- The National Provider Identifier (NPI) is private data. Do not add the NPI to the application until **after** you have collected the application from the applicant.
- Fax only page 1 and page 5 of the application for each applicant who is approved for MFPP PE. Fax to DHS at 651-431-7532. Do **not** fax the entire application; this can delay the processing of the PE.

Each provider **must fax PE pages to DHS at least once before the end of each day**. You may fax them more than once a day if you approve many applicants for PE throughout the day.

When MFPP eligibility staff at DHS receive the PE information, they enter it into the state's claim system, which interfaces to MN-ITS. The sooner DHS receives the applicant's information, the sooner you can verify the applicant's MFPP eligibility and MHCP member number. The system will not issue an ID card to applicants unless they are determined eligible for ongoing MFPP coverage. They must present the Short-Term Approval Notice as proof of active PE coverage to other MHCP providers. Other MHCP-enrolled medical or pharmacy providers may not be willing to provide services until they can verify MFPP eligibility.

Step 8: Mail the Application and Other Documents to DHS

For people who complete and provide the full application to you, mail the following documents to DHS within five days of receiving them:

- All MFPP applications, both approved and denied for PE
- Copies of PE denial notices given to applicants
- Any proofs the applicant has given to you
 - You are not required to collect proofs, but if an applicant provides them to you, **attach them to the MFPP application**.
 - Proofs could include pay stubs, passports, birth certificates, driver's licenses, or immigration status documents.
 - **Always send copies and return the originals to the applicant.** Attach all information to the application by **paper-clip. Do not staple it.**

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Note: If the applicant or enrollee provides you with any proofs **after** you have mailed the MFPP application to DHS, make copies of the documents and **write the person's MHCP Member ID number or Social Security number on each document**. Then fax the copies to DHS at 651-431-7532.

Billing of MFPP Services

Refer to the [Minnesota Family Planning Program \(MFPP\)](#) section of the MHCP Provider Manual for information about:

- **Eligible** providers to bill for MFPP services
- **Member** eligibility and confidentiality
- **Covered** Services
- **Billing** instructions