

January 25, 2022

**VIA EMAIL ONLY**

Nancy Breems  
Secretary of State, Elections Division  
180 State Office Building  
100 Rev Dr Martin Luther King Jr Blvd  
St. Paul, Minnesota 55155-1299  
[official.documents@state.mn.us](mailto:official.documents@state.mn.us)

**Re: *In the Matter of the Notice of Proposed Amendments to Rules  
Governing the Administration and Operation of the Minnesota  
Department of Veterans Affairs***  
**OAH 21-9054-37589; Revisor R-4659**

Dear Ms. Breems:

Enclosed for filing is an electronic copy of the above-entitled adopted rules.

Please send the agency copy of the rules to:

Eric Eversman  
Policy Analyst  
Minnesota Department of Veterans Affairs  
20 W 12th St  
Saint Paul, MN 55155

If you have any questions regarding this matter, please contact Denise Collins at (651) 361-7875, [denise.collins@state.mn.us](mailto:denise.collins@state.mn.us) or via facsimile at (651) 539-0310.

Sincerely,



Michelle Severson  
Legal Assistant

Enclosures  
cc: Eric Eversman (via email)

Date Filed: January 26, 2022  
Document Number: 221888  
Office of the Minnesota  
Secretary of State, Steve Simon

# Office of the Revisor of Statutes

## Administrative Rules



**TITLE:** Adopted Permanent Rules Relating to Veterans Programs and Services

**AGENCY:** Department of Veterans Affairs

**REVISOR ID:** R-4659

**MINNESOTA RULES:** Chapter 9055

**INCORPORATIONS BY REFERENCE:**

Part 9055.0315: The schedule of maximum monthly allowances is incorporated by reference, is updated and published annually by the commissioner in January of each year, and is available in the State Law Library, at the Minnesota Department of Veterans Affairs, Veterans Service Building, St. Paul, Minnesota 55155, or on the Minnesota Department of Veterans Affairs website at <https://mn.gov/mdva/>.

The attached rules are approved for  
filing with the Secretary of State

A handwritten signature in cursive script, appearing to read "Betty Dilks".

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Betty Dilks  
Assistant Revisor

Date Filed: January 26, 2022  
Document Number: 221888  
Office of the Minnesota  
Secretary of State, Steve Simon

1.1 **Department of Veterans Affairs**

1.2 **Adopted Permanent Rules Relating to Veterans Programs and Services**

1.3 **9055.0150 PURPOSE.**

1.4 This chapter provides the procedures followed by the Minnesota Department of Veterans  
1.5 Affairs, Programs and Services Division and sets forth the eligibility requirements and the  
1.6 proofs and evidence necessary for a person to establish a right to benefits and services  
1.7 provided by law. The commissioner must interpret this chapter to give meaning to Minnesota  
1.8 Statutes, chapters 196 and 197.

1.9 **9055.0160 DEFINITIONS.**

1.10 Subpart 1. **Scope.** The definitions in this part apply to this chapter.

1.11 Subp. 2. **Acute medical condition.** "Acute medical condition" means a diagnosis,  
1.12 illness, or injury of abrupt onset, or when the clinical effects of an existing medical condition  
1.13 are most intense. An acute medical condition is accompanied by distinct symptoms requiring  
1.14 urgent or short-term care but tend to get better once treated and are generally curable. An  
1.15 acute medical condition includes severe recurrences of chronic medical conditions and  
1.16 invasive medical procedures and treatments that require a period of recovery.

1.17 Subp. 3. **Addendum.** "Addendum" means a modification of an item or expense that  
1.18 the commissioner has approved and is part of a veterans relief grant.

1.19 Subp. 4. **Adult child.** "Adult child" means a child of a veteran who:

1.20 A. ~~is unmarried~~ a biological child of a veteran, was legally adopted before the age  
1.21 of 18 years, or is a stepchild who acquired that status before the age of 18 years;

1.22 B. is a member of the veteran's household or was a member of the veteran's  
1.23 household at the time of the veteran's death;

1.24 C. ~~who~~ is over the age of 18 years; ~~and~~

D. before reaching the age of 18 years, becomes permanently incapable of self-support or who after reaching the age of 18 years and until completion of education or training, but not after reaching the age of 23 years, is pursuing a course of instruction at an education institution; and

E. is unmarried.

Subp. 5. **Appeal.** "Appeal" means a written statement from an applicant or a recipient who is expressing disagreement with a decision made by the commissioner and is requesting to have the decision re-evaluated by the commissioner.

Subp. 6. **Applicant.** "Applicant" means a person who has submitted an application for benefits from the state soldiers' assistance program to the commissioner and whose application has not been approved, denied, or voluntarily withdrawn.

Subp. 7. **Armed forces.** "Armed forces" means the United States Army, Navy, Marine Corps, Air Force, Space Force, and Coast Guard, including the reserve components.

Subp. 8. **Authorized representative.** "Authorized representative" means a person who is legally authorized to act on another person's behalf in matters involving assistance from the commissioner.

Subp. 9. **Basic needs.** "Basic needs" means the minimum requirements of personal sustenance to include food, clothing, shelter, utilities, transportation costs, and other items of which the loss, or lack of, is determined by the commissioner to pose a direct, immediate threat to the health or safety of the applicant or recipient.

Subp. 10. **Business records.** "Business records" means copies of daily, weekly, or monthly ledgers, income and expense statements, invoices, itemized receipts, purchase orders, copies of customer receipts, transportation logs, canceled checks, copies of business savings and checking account statements, federal and state tax filings, and a completed monthly self-employment worksheet.

3.1 Subp. 11. **Child.** "Child" means a child of a veteran who:

3.2 A. is ~~unmarried~~ a biological child of a veteran, was legally adopted before the age  
3.3 of 18 years, or is a stepchild who acquired that status before the age of 18 years;

3.4 B. is a member of the veteran's household or was a member of the veteran's  
3.5 household at the time of the veteran's death; ~~and~~

3.6 C. is under the age of 18 years; and

3.7 D. is unmarried.

3.8 Subp. 12. **Chronic medical condition.** "Chronic medical condition" means a diagnosis,  
3.9 illness, or condition that develops slowly; and may progress in severity over an extended  
3.10 period with frequent recurrences; ~~and may have any number of warning signs or no signs~~  
3.11 ~~at all.~~

3.12 Subp. 13. **Commissioner.** "Commissioner" means the commissioner of the Minnesota  
3.13 Department of Veterans Affairs or another department employee who has delegated authority  
3.14 from the commissioner.

3.15 Subp. 14. **Contingency operations.** "Contingency operations" means a military  
3.16 operation designated by the United States Secretary of Defense as an operation in which  
3.17 members of the armed forces are or may become involved in military actions, operations,  
3.18 or hostilities against an enemy of the United States or against an opposing military force  
3.19 outside of the United States.

3.20 Subp. 15. **County veterans service officer.** "County veterans service officer" means  
3.21 a veteran who meets the qualifications of Minnesota Statutes, section 197.601, and is  
3.22 appointed by a county in Minnesota to assist persons in applying for veterans benefits.  
3.23 County veterans service officer also includes assistant county veterans service officers.

4.1 Subp. 16. **Date of application.** "Date of application" means either the day the  
4.2 application for a benefit is signed by the applicant, or the day the application is received by  
4.3 the commissioner if the application is received more than 30 days after it is signed by the  
4.4 applicant.

4.5 Subp. 17. **Department.** "Department" means the Minnesota Department of Veterans  
4.6 Affairs.

4.7 Subp. 18. **Dependent.** "Dependent" means any of the following household members  
4.8 of a living or deceased veteran:

4.9 A. ~~the veterans~~ veteran's spouse;

4.10 B. a child;

4.11 C. an adult child; or

4.12 D. a parent who if financially dependent upon the veteran or veteran's spouse and  
4.13 is residing with the household or was residing with the household at the time of the veteran's  
4.14 death.

4.15 Subp. 19. **Determination of eligibility.** "Determination of eligibility" means the  
4.16 process of collecting and reviewing information to determine an applicant's or a recipient's  
4.17 eligibility for assistance.

4.18 Subp. 20. **Documentation.** "Documentation" means a written or printed presentation  
4.19 of information provided by a third party.

4.20 Subp. 21. **Extended federal active duty.** "Extended federal active duty" means active  
4.21 duty that is expected to last more than 30 days and is in support of contingency operations.

4.22 Subp. 22. **Financially dependent.** "Financially dependent" means the income and  
4.23 assets of a ~~person or persons do not exceed limits established by the commissioner~~ dependent

5.1 parent or dependent parents are less than the limits provided in the schedule of maximum  
5.2 monthly allowances.

5.3 Subp. 23. **Financial self-sufficiency.** "Financial self-sufficiency" means an applicant's  
5.4 or a recipient's current or projected monthly household income or household assets are or  
5.5 will be sufficient to afford the applicant's or recipient's basic needs.

5.6 Subp. 24. **Health insurance.** "Health insurance" means medical, dental, optical, and  
5.7 prescription drug insurance.

5.8 Subp. 25. **Household.** "Household" means an applicant and the applicant's dependents  
5.9 or a recipient and the recipient's dependents who as a group are eligible to receive benefits  
5.10 from a state soldiers' assistance program activity, and whose collective needs and combined  
5.11 income and assets are considered when determining eligibility for benefits and calculating  
5.12 benefit amounts.

5.13 Subp. 26. **Joint liability.** "Joint liability" means two or more persons are responsible  
5.14 for the cost of an item or expense and each person is responsible for up to the full amount  
5.15 of the item or expense.

5.16 Subp. 27. **Long-term disability benefit.**

5.17 A. "Long-term disability benefit" means any public or private benefit or entitlement  
5.18 that provides income on a regular recurring basis to a person ~~experiencing a disabling due~~  
5.19 to a medical condition, and has a benefit duration of more than one year or is designated  
5.20 by the entity administering the benefit administrator or entitlement as being ~~long-term a~~  
5.21 long-term benefit or entitlement.

5.22 B. Long-term disability benefits include:

5.23 (1) pension benefits from the United States Department of Veterans Affairs;

5.24 (2) Social Security Disability Insurance (~~SSDI~~);

- 6.1 (3) public or private long-term disability insurance;
- 6.2 (4) Supplemental Security Income ~~(SSI)~~;
- 6.3 (5) workers' compensation paid to the recipient ~~that has~~ as a cash benefit;
- 6.4 (6) disability compensation from the United States Department of Veterans
- 6.5 Affairs for a 100 percent service-connected disability rating or disability compensation paid
- 6.6 for individual unemployability; ~~and~~
- 6.7 (7) military disability benefits from the United States Department of Defense
- 6.8 for a 100 percent service-connected disability rating;
- 6.9 (8) state, local, and federal government disability benefits; and
- 6.10 ~~(7) (9)~~ other long-term sources of income paid to a person ~~experiencing a~~
- 6.11 ~~disabling~~ due to a medical condition.

6.12 Subp. 28. **Long-term maintenance benefit.**

6.13 A. "Long-term maintenance benefit" means any public or private benefit or

6.14 entitlement that provides income on a regular recurring basis to a person and has a benefit

6.15 ~~period greater than six months~~ duration of more than one year or is designated by the entity

6.16 administering the benefit or entitlement ~~administrator~~ as being a long-term benefit or

6.17 entitlement.

6.18 B. Long-term maintenance benefits include:

- 6.19 (1) long-term disability ~~benefit~~ benefits;
- 6.20 (2) disability compensation for a less than 100 percent service-connected
- 6.21 disability rating, dependent indemnity compensation, and survivors pension, from the United
- 6.22 States Department of Veterans Affairs;

(3) military disability benefits from the United States Department of Defense for a less than 100 percent service-connected disability rating;

~~(3)~~(4) Social Security retirement and survivor benefits;

(5) railroad retirement and survivor benefits;

(6) state, local, and federal government retirement and survivor benefits;

~~(4)~~(7) ~~public and~~ private retirement and survivor benefits; and

~~(5)~~(8) other long-term sources of income paid to a person as a public or private benefit or entitlement.

Subp. 29. **Medical condition.** "Medical condition" means a diagnosis, illness, injury, medical procedure, or treatment that is ~~properly~~ documented by a licensed provider. Medical conditions ~~may be~~ are either acute or chronic.

Subp. 30. **Military discharge papers; or equivalent.**

A. "Military discharge papers" means any form or document issued to a person by the United States Department of Defense at the time of the person's release from active duty, separation from the armed forces, or discharge from the armed forces.

B. "Or equivalent" means documentation from the National Archives (Form 13038) that certifies a person's military service and discharge from the armed forces.

Subp. 31. **Nontraditional housing agreement.** "Nontraditional housing agreement" means an arrangement for shelter between persons in which the living space provided for shelter is within the primary residence of one of the persons.

Subp. 32. **Once-per-lifetime basis.** "Once-per-lifetime basis" means that the benefit ~~may be~~ is used only once in a person's lifetime regardless of the benefit amount expended when the benefit is used.

8.1 Subp. 33. **Parent.** "Parent" means a person who is a biological, adoptive, or stepparent  
8.2 of a veteran or veteran's spouse.

8.3 Subp. 34. **Recipient.** "Recipient" means a person who is approved for a benefit from  
8.4 a state soldiers' assistance program activity.

8.5 Subp. 35. **Schedule of maximum monthly allowances.** "Schedule of maximum  
8.6 monthly allowances" means:

8.7 A. the maximum monthly household income limits and maximum household asset  
8.8 limits for a state soldiers' assistance program activity; and

8.9 B. the benefit amounts provided under a state soldiers' assistance program activity.

8.10 Subp. 36. **Shared expense.** "Shared expense" means an expense that is shared between  
8.11 a person who is eligible to receive benefits from the state soldiers' assistance program and  
8.12 a person who is not eligible to receive benefits.

8.13 Subp. 37. **Shared household.** "Shared household" means a household, plus other  
8.14 persons residing with the household who are not eligible to receive benefits from the state  
8.15 soldiers' assistance program.

8.16 Subp. 38. **Shared item.** "Shared item" means an item for which the cost of the item  
8.17 is shared between a person who is eligible to receive benefits from the state soldiers'  
8.18 assistance program and a person who is not eligible to receive benefits.

8.19 Subp. 39. **Short-term disability benefit.**

8.20 A. "Short-term disability benefit" means any public or private benefit or entitlement  
8.21 that provides income on a regular recurring basis to a person due to a ~~disabling~~ medical  
8.22 condition and that has a benefit duration of not more than one year or is designated by the  
8.23 entity administering the benefit or entitlement administrator as being ~~short term~~ a short-term  
8.24 benefit or entitlement.

B. Short-term disability benefits include:

(1) short-term disability insurance of any type;

(2) workers' compensation paid to the recipient as a cash benefit that ~~are~~ is expected to last less than one year; and

(3) other short-term sources of income paid to a person due to a ~~disabling~~ medical condition.

Subp. 40. **Spouse.** "Spouse" means a person legally married to a veteran, as recognized by the state of Minnesota.

Subp. 41. **State soldiers' assistance funding.** "State soldiers' assistance funding" means money appropriated by law for the purposes of Minnesota Statutes, sections 197.03 to 197.07, and includes other money as designated pursuant to Minnesota Statutes, section 196.05, subdivision 1, clause (5).

Subp. 42. **State soldiers' assistance program.** "State soldiers' assistance program" means a group of individual program activities established under this part and administered by the commissioner to provide benefits to an eligible person and members of the eligible person's household.

Subp. 43. **State soldiers' assistance program activity.** "State soldiers' assistance program activity" means an individual program within the state soldiers' assistance program that provides a specific type of benefit.

Subp. 44. **Surviving dependent.** "Surviving dependent" means a dependent of a deceased veteran.

Subp. 45. **Surviving spouse.** "Surviving spouse" means a person who was legally married, as recognized by the state of Minnesota, to a veteran at the time of the veteran's death and who has not remarried.

10.1 Subp. 46. **United States Department of Defense.** "United States Department of  
10.2 Defense" means the executive branch department of the federal government of the United  
10.3 States charged with coordinating and supervising all agencies and functions of the  
10.4 government concerned directly with national security and the United States armed forces.

10.5 Subp. 47. **United States Department of Veterans Affairs.** "United States Department  
10.6 of Veterans Affairs" means the federal executive branch agency that administers federal  
10.7 benefits under United States Code, title 38, for veterans, veterans' dependents, and veterans'  
10.8 survivors.

10.9 Subp. 48. **Utilities.** "Utilities" ~~mean~~ means natural gas and electric charges, landline  
10.10 or cellular telephone service, Internet service, bulk fuel charges, water and sewer charges,  
10.11 and sanitation charges for a recipient and members of the recipient's household.

10.12 Subp. 49. **Vendor and contractor.** "Vendor and contractor" ~~mean~~ means a provider  
10.13 of goods or services.

10.14 Subp. 50. **Veteran.** "Veteran" means a person who has met the requirements as  
10.15 provided in Minnesota Statutes, section 197.447.

10.16 **9055.0180 VETERANS CLAIMS DIVISION.**

10.17 Subpart 1. **Purpose of division.** The veterans claims division is a division of the  
10.18 department and must act as the agent for a veteran or a veteran's dependents, or both, if the  
10.19 veteran or veteran's dependents are residents of Minnesota and have a claim against the  
10.20 United States for benefits arising out of or by reason of the veteran's service in the armed  
10.21 forces.

10.22 Subp. 2. **Representation.** The veterans claims division must represent a veteran or a  
10.23 veteran's dependents, or both, upon request and without charge. The veterans claims division  
10.24 must provide claims representation on behalf of federally recognized veterans organizations

11.1 who have requested in writing that the commissioner provided such services to a veteran  
11.2 or a veteran's dependents, or both.

11.3 Subp. 3. **Termination.** The veterans claims division must terminate its representation  
11.4 of a person who:

11.5 A. appoints another individual to represent the person's claim;

11.6 B. threatens the personal safety of department employees;

11.7 C. disrupts the operations of any department office; or

11.8 D. takes any action that is deemed detrimental to the person's claim.

11.9 Subp. 4. **Federal law to govern procedure.** The veterans claims division must operate  
11.10 in accordance with Code of Federal Regulations, title 38, chapter 1, sections 14.626 to 14.37,  
11.11 in the representation of a veteran, or a veteran's dependents, or both, and the presentation  
11.12 of a claim.

11.13 Subp. 5. **Contested claims not accepted.** The veterans claims division must not  
11.14 represent more than one party to an action or claim based on one person's eligibility.

11.15 **9055.0190 STATE SOLDIERS' ASSISTANCE PROGRAM.**

11.16 A. The commissioner must administer the state soldiers' assistance program in  
11.17 accordance with this chapter and Minnesota Statutes, chapters 196 and 197.

11.18 B. An individual eligible to receive benefits from the state soldiers' assistance  
11.19 program includes:

11.20 (1) a veteran;

11.21 (2) a veteran's dependent;

11.22 (3) a member of the armed forces called from reserve status to extended  
11.23 federal active duty under Minnesota Statutes, section 196.05, subdivision 1, clause (9); and

12.1 (4) a dependent of a member of the armed forces called from reserve status  
12.2 to extended federal active duty under Minnesota Statutes, section 196.05, subdivision 1,  
12.3 clause (9).

12.4 C. A surviving spouse who has remarried is not eligible for benefits from the state  
12.5 soldiers' assistance program regardless of the outcome of the subsequent marriage.

12.6 D. An individual is not eligible for benefits from the state soldiers' assistance  
12.7 program if the individual is:

12.8 (1) incarcerated;

12.9 (2) civilly committed under Minnesota Statutes, chapter 253D; or

12.10 (3) civilly committed to an inpatient program under Minnesota Statutes,  
12.11 chapter 253B, for longer than 30 days.

12.12 **9055.0200 STATE SOLDIERS' ASSISTANCE FUNDING.**

12.13 The commissioner must use state soldiers' assistance funding to provide benefits from  
12.14 the state soldiers' assistance program and to fulfill the duties and responsibilities of Minnesota  
12.15 Statutes, chapters 196 and 197.

12.16 **9055.0210 VETERANS BENEFITS DIVISION.**

12.17 The veterans benefits division must assist the commissioner in administering the state  
12.18 soldiers' assistance program and in carrying out the duties of Minnesota Statutes, chapters  
12.19 196 ~~ad~~ and 197.

12.20 **9055.0220 RULES; PURPOSE; AND APPLICABILITY.**

12.21 Subpart 1. **Purpose.** Parts 9055.0190 to 9055.0455:

12.22 A. ~~(1)~~ provide the policies and procedures the commissioner must follow in  
12.23 administering the state soldiers' assistance program; and disbursing state soldiers' assistance  
12.24 funding; and

13.1            B. ~~(2)~~ set forth the eligibility requirements and the proofs and evidence necessary  
13.2 to establish a person's right to benefits provided by the state soldiers' assistance program.

13.3            Subp. 2. **Applicability.** Parts 9055.0190 to 9055.0455 establish the rights and  
13.4 responsibilities of the following parties in the administration of the state soldiers' assistance  
13.5 program:

13.6            A. the ~~Minnesota Department of Veterans Affairs~~ department;

13.7            B. veterans and dependents of veterans;

13.8            C. members of the armed forces called from reserve status to extended federal  
13.9 active duty during a time of war or national emergency and the dependents of members of  
13.10 the armed forces;

13.11           D. county veterans service officers;

13.12           E. medical, dental, and optical providers;

13.13           F. public and private social service agencies; and

13.14           G. vendors and contractors providing services under state soldiers' assistance  
13.15 program guidelines.

13.16           **9055.0270 STATE SOLDIERS' ASSISTANCE PROGRAM; WHO CAN APPLY.**

13.17           Subpart 1. **Application for benefits.**

13.18           A. Subject to the requirements of part 9055.0290, any of the following individuals  
13.19 may apply for benefits from the state soldiers' assistance program:

13.20                (1) a veteran;

13.21                (2) a surviving spouse of a veteran; and

13.22                (3) a member of the armed forces called from reserve status to extended  
13.23 federal active duty per Minnesota Statutes, section 196.05, subdivision 1, clause (9).

14.1 B. The order in which applicants of a household ~~may~~ must apply for benefits is  
14.2 as follows:

14.3 (1) if an applicant's eligibility is based on a veteran's service:

14.4 (a) the veteran or the veteran's authorized representative must apply first,  
14.5 if able;

14.6 (b) if the veteran is deceased, then the surviving spouse of the veteran  
14.7 or the surviving spouse's authorized representative ~~may~~ must apply; and

14.8 (c) if none of the individuals in unit (a) or (b) are able to apply, then the  
14.9 veteran's dependents or the authorized representative of the veteran's dependents ~~may~~ must  
14.10 apply;

14.11 (2) if an applicant's eligibility is based on a member of the armed forces  
14.12 serving on extended federal active duty:

14.13 (a) the member of the armed forces or the member's authorized  
14.14 representative must apply first, if able;

14.15 (b) if neither individual in unit (a) is able to apply, then the spouse of  
14.16 the member of the armed forces or the spouse's authorized representative ~~may~~ must apply;  
14.17 and

14.18 (c) if none of the individuals in unit (a) or (b) are able to apply, then the  
14.19 dependents of the member of the armed forces or the dependents' authorized representative  
14.20 ~~may~~ must apply.

14.21 C. The initial applicant is responsible for applying for benefits on behalf of the  
14.22 remaining members of the household.

14.23 D. All applicants under this part must apply for benefits using a standard  
14.24 application prescribed by the commissioner.

15.1 E. An eligible child, as defined in Minnesota Statutes, section 197.75, subdivision  
15.2 1, paragraph (d), may apply on their own behalf for education benefits under the surviving  
15.3 children and spouses education assistance program activity.

15.4 F. A surviving spouse of a veteran who remarries is not eligible to receive benefits  
15.5 from the state soldiers' assistance program, but the surviving spouse may apply for benefits  
15.6 as the authorized representative of the deceased veteran's surviving dependents.

15.7 G. A veteran or surviving spouse of a veteran may apply for benefits as the  
15.8 authorized representative of the veteran's dependents, but the veteran or surviving spouse  
15.9 is not eligible to receive benefits from the state soldiers' assistance program if:

15.10 (1) incarcerated;

15.11 (2) civilly committed under Minnesota Statutes, chapter 253D; or

15.12 (3) civilly committed to an inpatient program under Minnesota Statutes,  
15.13 chapter 253B, for longer than 30 days.

15.14 H. As part of the application process, an applicant must provide to the  
15.15 commissioner proof of identity and Minnesota residency as defined in Minnesota Statutes,  
15.16 section 197.05, paragraph (b).

15.17 I. As part of the application process, a household member must provide to the  
15.18 commissioner proof of:

15.19 (1) identity;

15.20 (2) Minnesota residency as provided by Minnesota Statutes, section 197.05,  
15.21 paragraph (b);

15.22 (3) age; and

15.23 (4) a relationship to a veteran or member of the armed forces.

J. For the purposes of proving the requirements in items A, D, F, H, and I, an applicant or household member ~~may~~ must show proof with any of the following documentation:

(1) residency verifications as provided in Minnesota Statutes, section 197.05, paragraph (b);

(2) a tribal identification card showing a physical Minnesota address;

(3) a person's military discharge papers or equivalent;

(4) a Report of Casualty from the United States Department of Defense;

(5) a military member's current active duty military orders;

(6) a benefit award letter from the United States Department of Veterans Affairs;

(7) a marriage certificate;

(8) a death certificate;

(9) a birth certificate;

(10) a court order granting adoption;

(11) documentation confirming legal guardianship issued by a state government entity; or

(12) other official documentation confirming a person's identity, age, and relationship to the veteran or member of the armed forces issued by a state or federal government entity.

**Subp. 2. Authorized representatives.**

A. An applicant described in subpart 1, item A, who is not able to apply for benefits ~~may~~ must apply through an authorized representative.

17.1 B. A dependent of an individual described in subpart 1, item A, ~~may~~ must apply  
17.2 for benefits through an authorized representative, if the person in subpart 1, item A, is  
17.3 deceased.

17.4 C. An individual acting as an authorized representative of an applicant or a recipient  
17.5 of benefits must submit one of the following documents to the commissioner proving the  
17.6 legal authorization to represent the applicant or recipient:

17.7 (1) a court order providing the authorization to represent the person subject  
17.8 to guardianship;

17.9 (2) a court order providing the authorization to represent the person subject  
17.10 to conservatorship; or

17.11 (3) a power of attorney as recognized by Minnesota Statutes, chapter 523.

17.12 Subp. 3. **Residency.**

17.13 A. All household members who receive benefits must meet the residency  
17.14 requirements of Minnesota Statutes, section 197.05, paragraph (b), except under the following  
17.15 circumstances:

17.16 (1) the commissioner must include a child in an applicant's or a recipient's  
17.17 household count who is a dependent but is not residing with the household on a full-time  
17.18 basis due to marital dissolution or parental separation. The child is considered a resident if  
17.19 the applicant or applicant's spouse or the recipient or recipient's spouse is financially  
17.20 responsible for the child or has been awarded visitation as verified by a judgment, decree,  
17.21 or other order of the court providing for the legal custody, physical custody, or visitation  
17.22 with respect to a child. A child is only authorized to receive benefits when the child is  
17.23 ~~present~~ in Minnesota; and

17.24 (2) the commissioner must include an adult child in an applicant's or a  
17.25 recipient's household count who is a dependent but is not residing with the household on a

18.1 full-time basis due to school attendance or a medical condition. The adult child is considered  
18.2 a resident if the applicant or applicant's spouse or the recipient or recipient's spouse is  
18.3 financially responsible for the adult child as verified by financial aid documentation or  
18.4 documentation from the facility where the adult child is residing. An adult child is only  
18.5 authorized to receive benefits when the adult child is ~~present~~ in Minnesota.

18.6 B. The commissioner must exclude time spent in Minnesota for any reason when  
18.7 determining if an applicant meets the residency requirement if the applicant maintains  
18.8 residency in another state.

18.9 C. The commissioner must exclude time spent in Minnesota incarcerated in a state  
18.10 or federal prison when determining if an applicant meets the residency requirement. Time  
18.11 counted toward residency begins the day after an applicant is released into the community.

18.12 **9055.0280 HOUSEHOLDS AND SHARED HOUSEHOLDS.**

18.13 Subpart 1. **Households.**

18.14 A. The commissioner must include an applicant or a recipient and all members  
18.15 of the applicant's or recipient's household in the household count except in the following  
18.16 situations:

18.17 (1) a dependent child is not residing in the household on a full-time basis and  
18.18 the applicant or applicant's spouse or the recipient or recipient's spouse is not financially  
18.19 responsible for the child or has not been awarded visitation with the child; ~~or~~

18.20 (2) a dependent adult child is not residing with the household on a full-time  
18.21 basis and the applicant or applicant's spouse or the recipient or recipient's spouse is not  
18.22 financially responsible for the adult child; or

18.23 (3) a dependent parent does not need the benefit for which the applicant is  
18.24 applying.

19.1 B. An applicant or a recipient or a member of an applicant's or a recipient's  
19.2 household who is incarcerated or civilly committed under the conditions of part 9055.0190,  
19.3 item C, must not be included in the household count if:

19.4 (1) the applicant or recipient or household member does not have any income  
19.5 or assets; or

19.6 (2) the applicant's or recipient's or household member's income and assets  
19.7 are not available to the remaining household members.

19.8 Subp. 2. **Exclusion of household members is prohibited.** The commissioner must  
19.9 not exclude a household member and the household member's income and assets from the  
19.10 applicant's household for the sole purpose of establishing eligibility for the remaining  
19.11 household members except as provided in subpart 1.

19.12 ~~**Example:** A household consists of a veteran, spouse, a biological child of the veteran~~  
19.13 ~~and spouse, and a biological child of the spouse (stepchild of the veteran).~~

19.14 ~~The spouse receives \$500 per month in child support which puts the household over~~  
19.15 ~~the income limit for income based programs or reduces the amount of assistance the~~  
19.16 ~~household is eligible for under other programs.~~

19.17 ~~The household cannot not exclude the stepchild and the \$500 in child support for the~~  
19.18 ~~purpose of attaining eligibility or maximizing benefits for the remaining household~~  
19.19 ~~members.~~

19.20 Subp. 3. **Applicants and spouses divorced or legally separated.** The commissioner  
19.21 must include the spouse of an applicant or a recipient and the spouse's income and assets  
19.22 when determining the household's eligibility for benefits unless the applicant and applicant's  
19.23 spouse or the recipient and recipient's spouse are divorced or legally separated.

20.1           **Subp 4. Shared items and shared expenses.**

20.2           A. The benefit amount for a shared item or shared expense must be prorated  
20.3 between an applicant or a recipient and all members of the applicant's or recipient's household  
20.4 and those persons age 18 and older who are liable for the shared item or shared expense but  
20.5 are not eligible to receive the benefit.

20.6           B. A benefit amount provided for a shared item or a shared expense must be  
20.7 prorated regardless of whether a person not eligible for the benefit is or is not residing with  
20.8 the applicant or recipient.

20.9           C. A benefit amount provided for an item or expense directly related to owning  
20.10 or leasing real or personal property must be prorated if the following conditions are met:

20.11           (1) an applicant or a recipient or an applicant's or a recipient's spouse owns  
20.12 or leases real or personal property with a person age 18 or older who is not eligible for the  
20.13 benefit; and

20.14           (2) joint liability for the property, item, or expense is shared with the person.

20.15           D. A benefit amount is not prorated if the person not eligible for the benefit  
20.16 relinquishes ownership or ceases to lease the property or is no longer liable for the property,  
20.17 item, or expense.

20.18           **Subp. 5. Proration calculations.** For purposes of this part, the commissioner must  
20.19 calculate the prorated benefit amount by dividing the number of members in the applicant's  
20.20 or recipient's household by the total number of persons included in the proration calculations  
20.21 and multiplying the result by the original benefit amount requested.

20.22           ~~**Example:** A household consisting of a veteran and one of the veteran's dependents~~  
20.23 ~~applies for \$2,000 in rent assistance for a property leased with one other adult who is~~  
20.24 ~~liable to pay rent for the property and one other child under the age of 18 neither of~~  
20.25 ~~whom is eligible for the benefit.~~

21.1 ~~The total number of persons included in the proration calculations is 3: the veteran, the~~  
21.2 ~~veteran's one dependent, and the other adult who is liable to pay rent but is not eligible~~  
21.3 ~~to receive the benefit. The other child under the age of 18 is not a dependent of the~~  
21.4 ~~veteran and is not liable to pay rent for the property; therefore, is not included in the~~  
21.5 ~~proration calculations.~~

21.6 ~~The prorated benefit amount is calculated by dividing 2 by 3 and multiplying the result~~  
21.7 ~~( $2 \div 3 = .67$ ) by the original amount requested of \$2,000 for a prorated benefit amount of~~  
21.8 ~~\$1,340.~~

21.9 **9055.0290 APPLICATION PROCESS.**

21.10 Subpart 1. **Information.** The commissioner must make available information  
21.11 explaining the eligibility requirements and the application processes of the state soldiers'  
21.12 assistance program.

21.13 Subp. 2. **Application for benefits from state soldiers' assistance program.**

21.14 A. An applicant ~~may~~ must apply for benefits through a county veterans service  
21.15 office, a department field operations claim representative, or department tribal veterans  
21.16 service officer using the standard application and supplemental forms and checklists provided  
21.17 by the commissioner.

21.18 B. The county veterans service officer, department field operations claim  
21.19 representative, or department tribal veterans service officer must review each completed  
21.20 application for benefits, provide a recommendation to the commissioner, and sign and date  
21.21 the application. The commissioner must not accept a recommendation from any person  
21.22 other than a county veterans service officer, department field operations claims representative,  
21.23 or department tribal veterans service officer.

21.24 C. An applicant applying for the surviving children and surviving spouse education  
21.25 benefit is not required to apply for the benefit through or receive a recommendation from

22.1 a county veterans service officer, department field operations claims representative, or  
22.2 department tribal veterans service officer.

22.3 **Subp. 3. Processing applications.**

22.4 A. The commissioner must request additional information and supporting  
22.5 documentation from the applicant if necessary to establish eligibility and a need for  
22.6 assistance.

22.7 B. The commissioner must send a request for additional information and  
22.8 documentation to the applicant and to the county veterans service officer, department field  
22.9 operations claims representative, or department tribal veterans service officer assisting the  
22.10 applicant.

22.11 C. The commissioner must close an application if the requested information and  
22.12 documentation is not received within 60 days of the date of request for more information.

22.13 **Subp. 4. Reporting requirements.** An applicant must report any changes in  
22.14 circumstances that affect the applicant's eligibility or need for benefits to the commissioner  
22.15 and the county veterans service officer, department field operations claims representative,  
22.16 or department tribal veterans service officer who assisted the applicant while the application  
22.17 is pending.

22.18 **Subp. 5. Determining eligibility.** The commissioner must administer benefits on a  
22.19 per application basis. An applicant must complete a new application with current information  
22.20 and supporting documents to reestablish eligibility and need for assistance if the most recent  
22.21 application is closed.

22.22 **Subp. 6. Rescinding applications; terminating benefits.**

22.23 A. An applicant or a recipient may rescind the application for benefits or terminate  
22.24 benefits at any time.

23.1 B. To rescind an application for benefits or terminate benefits, an applicant or a  
23.2 recipient must submit a written request to the commissioner through the county veterans  
23.3 service officer, department field operations claim representative, or department tribal veterans  
23.4 service officer who assisted the applicant or recipient.

23.5 C. The commissioner must not reopen an application that is rescinded or a benefit  
23.6 that is terminated.

23.7 Subp. 7. **Right to notice of decision.** The commissioner must provide written notice  
23.8 of approval, partial approval, or denial to an applicant. A notification of approval or partial  
23.9 approval must explain the type of benefit ~~and~~, the amount approved or partially approved  
23.10 for the benefit, and the time periods covered by the benefit, ~~and any additional actions~~  
23.11 ~~required of the recipient~~. A notification of denial must state the reasons why the benefit was  
23.12 denied and the right to appeal the denial.

23.13 Subp. 8. **Appeal rights and procedures.**

23.14 A. An applicant or a recipient has the right to appeal the denial of a benefit and  
23.15 submit additional or corrected information to the commissioner. The applicant or recipient  
23.16 must state in writing the reasons for disagreeing with the commissioner's decision and sign  
23.17 and date the appeal.

23.18 B. An applicant or a recipient denied a benefit must submit an appeal within 60  
23.19 days of the denial notice. Failure to appeal in the allotted time forfeits all rights to the appeal  
23.20 process. The commissioner must issue a decision to approve, partially approve, or deny the  
23.21 benefit. The commissioner's decision is the final agency action.

23.22 C. A county veterans service officer, a department field operations claim  
23.23 representative, or a department tribal veterans service officer must not appeal the denial of  
23.24 a benefit without the written consent of the applicant or recipient. A county veterans service

24.1 officer, a department field operations claims representative, or a department tribal veterans  
24.2 service officer may assist in the appeal process.

24.3 D. A vendor or contractor must not appeal a denial of benefits that would have  
24.4 resulted in payment to the contractor or vendor.

24.5 Subp. 9. **Overpayment status.**

24.6 A. A recipient of a benefit who receives an amount greater than what is authorized  
24.7 is in overpayment status.

24.8 B. Overpayment includes a direct payment from the commissioner to the recipient  
24.9 of the benefit or payment to a vendor or contractor on behalf of the recipient in an amount  
24.10 greater than what is authorized.

24.11 C. Overpayment status is a bar to all members of a household from receiving  
24.12 future benefits until the overpayment is corrected.

24.13 D. A person in overpayment status must correct the overpayment by making a  
24.14 direct payment to the commissioner.

24.15 Subp. 10. **Responsibility to pay for services.**

24.16 A. The commissioner is not responsible to pay for charges incurred from a vendor  
24.17 or contractor by a recipient of benefits that are over the authorized benefit amount.

24.18 B. A recipient of benefits incurring the charges over the authorized benefit amount  
24.19 is responsible for paying the overage to the vendor or contractor who provided the services.

24.20 **9055.0300 CALCULATING MONTHLY HOUSEHOLD INCOME.**

24.21 Subpart 1. **Definitions.**

24.22 A. The definitions in this subpart apply to this part.

25.1           B. "Earned income" means compensation from lawful employment or lawful  
25.2 self-employment, including salaries, wages, tips, gratuities, commissions, earnings from  
25.3 self-employment, incentive payments from work or training programs, payments made by  
25.4 an employer for regularly accrued vacation or sick leave, employee bonuses and profit  
25.5 sharing, jury duty pay, picket duty pay, and profit from other lawful activities that accrues  
25.6 as a result of the household member's effort or labor. Earned income does not include returns  
25.7 from capital investment or benefits that accrue as compensation for lack of employment.

25.8           C. "Income" means earned or unearned income in the form of any lawful circulating  
25.9 medium of exchange of the United States including coins, paper money, digital currency,  
25.10 and electronic funds from any identified or unidentified source that is received by, made  
25.11 available to, or is projected for an applicant or a recipient or any member of the applicant's  
25.12 or recipient's household.

25.13           D. "Monthly household income" ~~is a~~ means the combined measure of the average  
25.14 monthly incomes of an applicant or a recipient and all members of the applicant's or  
25.15 recipient's household.

25.16           E. "Nonrecurring income" means earned or unearned income that is not of a  
25.17 continuous nature or is received only one time in the form of a nonrecurring lump sum  
25.18 payment.

25.19           F. "Seasonal income" means earned income that is received at regular intervals  
25.20 for only part of the year.

25.21           G. "Unearned income" means income that does not meet the definition of earned  
25.22 income and is received without being required to perform any labor or service as a condition  
25.23 of receiving the income.

26.1           **Subp. 2. Monthly household income.**

26.2           A. The commissioner must calculate the monthly household income of an applicant  
26.3 or a recipient according to this part.

26.4           B. The commissioner must use monthly household income to determine the  
26.5 household's eligibility for benefits from income-based state soldiers' assistance program  
26.6 activities.

26.7           **Subp. 3. Income inclusion.** The commissioner must include the monthly income of  
26.8 an applicant or a recipient and all members of the applicant's or recipient's household when  
26.9 calculating monthly household income unless the income of the applicant, or recipient, or  
26.10 a specific household member or income from a specific source is excluded by this chapter.

26.11          **Subp. 4. Income ownership.** The commissioner must count as income any money  
26.12 deposited to a financial account that is jointly owned by:

26.13           A. ~~(1)~~ an applicant or a recipient or a member of the applicant's or recipient's  
26.14 household; and

26.15           B. ~~(2)~~ a person who is not eligible for benefits unless the money can be attributed  
26.16 to the person who is not eligible for benefits.

26.17          **Subp. 5. Income limits.**

26.18           A. When an applicant's or a recipient's monthly household income is a determinant  
26.19 of eligibility for a specific state soldiers' assistance program activity, maximum monthly  
26.20 household income limits based on an applicant's or a recipient's household size are provided  
26.21 in the schedule of maximum monthly allowances for the program activity.

26.22           B. A household is not eligible for benefits from a state soldiers' assistance program  
26.23 activity that is income-based if the household's monthly household income is greater than  
26.24 or equal to its maximum monthly household income limit for the program activity.

27.1           **Subp. 6. Income documentation.**

27.2           A. An applicant or a recipient ~~may~~ must verify monthly household income by  
27.3 providing the commissioner with any of the following documents:

27.4                   (1) payroll statements, financial account statements, and pay receipts;

27.5                   (2) federal income tax ~~return~~ returns and all schedules for income from  
27.6 self-employment;

27.7                   (3) business records;

27.8                   (4) benefit award letters, settlement statements, and retirement income  
27.9 distribution statements; ~~and~~ or

27.10                  (5) other documentation ~~authorized by the commissioner~~ that verifies a  
27.11 household member's income issued by the entity providing the income.

27.12           B. An applicant or a recipient must submit the most current income documentation  
27.13 to the commissioner for the number of months over which a type of income is calculated.

27.14           C. Documentation submitted by an applicant or a recipient to the commissioner  
27.15 must verify and confirm:

27.16                   (1) who the income belongs to or is intended for;

27.17                   (2) the source and frequency of the income;

27.18                   (3) the ~~financial institution, employer, customer, agency, or~~ entity issuing  
27.19 the income;

27.20                   (4) the period covered by the documentation;

27.21                   (5) allowed withholdings, reductions, or expenses specific to the type of  
27.22 income; and

27.23                   (6) other withholdings, reductions, or expenses allowed in this chapter.

Subp. 7. **Earned income.**

A. The commissioner must include earned income that is received by, made available to, or is projected for an applicant or a recipient or any member of an applicant's or a recipient's household when calculating monthly household income.

B. The commissioner must include any measurable reduction in expenses provided to a household in lieu of income paid for work, service, effort, or labor as earned income. The amount of earned income included is the amount of the expense reduction.

~~**Example:** A household resides in rental property and receives a rent reduction of \$700 per month for performing maintenance or caretaker duties. The household is considered to have \$700 in monthly earned income.~~

C. When calculating earned income, the commissioner must reduce the total amount by the following employer withholdings or reductions:

(1) federal income tax withholdings;

(2) ~~federal Medicare withholdings (FICA)~~ Federal Insurance Contributions Act (FICA) withholdings for Medicare;

(3) ~~federal OASDI withholdings (FICA)~~ FICA withholdings for Old Age Survivor and Disability Insurance;

(4) ~~Minnesota~~ state income tax withholdings;

(5) medical, dental, and optical insurance premiums;

(6) ~~short~~ short- and long-term disability insurance premiums;

(7) employee, spouse, and child life insurance premiums;

(8) employee accidental death and dismemberment insurance premiums;

(9) health savings account withholdings;

- 29.1 (10) child care expense account withholdings;
- 29.2 (11) transportation expense account withholdings;
- 29.3 (12) mandatory retirement plan contributions;
- 29.4 (13) union dues;
- 29.5 (14) uniform expenses;
- 29.6 (15) child support withholdings; and
- 29.7 (16) other withholdings and reductions specifically allowed in this chapter.

29.8 D. With the exception of self-employment income, the commissioner must average  
29.9 and include in the monthly household income calculation earned income that was received  
29.10 by or made available to an applicant or a recipient or any member of an applicant's or a  
29.11 recipient's household in the two months before the date of application or will be received  
29.12 by or made available to an applicant or a recipient or any member of an applicant's or a  
29.13 recipient's household within 30 days after the date of application.

29.14 **Subp. 8. Self-employment income.**

29.15 A. The commissioner must include self-employment income that is received by  
29.16 or made available to an applicant or a recipient or any member of an applicant's or a  
29.17 recipient's household when calculating monthly household income.

29.18 B. Self-employment income includes:

- 29.19 (1) income from the operation of a business;
- 29.20 (2) income from farming, including income from:
  - 29.21 (a) the sale of crops, livestock, or products;
  - 29.22 (b) production from livestock;

- 30.1 (c) the sale of home-produced food;
- 30.2 (d) soil conservation payments and other subsidies;
- 30.3 (e) land, machine rental, and farm wages paid to the applicant or recipient
- 30.4 or an adult member of the household; and
- 30.5 (f) other income paid to a household member for ~~farming-related~~
- 30.6 farming-related activities;
- 30.7 (3) income from rental property owned by a household member. Space for
- 30.8 rent in the primary residence of the household is not rental property;
- 30.9 (4) income from nontraditional housing agreements such as income received
- 30.10 from leasing space in the primary residence of the household, room and board provided at
- 30.11 the primary residence of the household, and other services provided at the primary residence
- 30.12 of the household; and
- 30.13 (5) income resulting from a household member working in a trade or
- 30.14 profession independently rather than for an employer.
- 30.15 C. When calculating self-employment income, the commissioner must reduce the
- 30.16 total amount by the following withholdings and expenses:
- 30.17 (1) salaries, wages, and bonuses paid by an applicant, a recipient, or any
- 30.18 member of an applicant's or a recipient's household to a person who is not a member of the
- 30.19 household;
- 30.20 (2) FICA withholdings and federal, state, and local income tax withholdings
- 30.21 made on behalf of owners and employees of the business;
- 30.22 (3) workers' compensation insurance premiums and contributions to Minnesota
- 30.23 unemployment insurance made on behalf of owners and employees of the business;
- 30.24 (4) business insurance premiums, not to include health insurance;

31.1 (5) interest on secured business debts including mortgages, but not including  
31.2 the mortgage on the primary residence of the household or unsecured business debt;

31.3 (6) sales and commercial property tax payments;

31.4 (7) rent or lease payments for special purpose business vehicles, machinery,  
31.5 equipment, and other business property;

31.6 (8) repairs to and maintenance of special purpose business vehicles,  
31.7 machinery, equipment, and property that do not constitute capital expenditures;

31.8 (9) utility expenses incurred at business property;

31.9 (10) expenses for business supplies necessary for the day-to-day operation  
31.10 of the business that are not purchased for resale;

31.11 (11) expenses for seed, fertilizer, and livestock feed and medicines and  
31.12 veterinary care; and

31.13 (12) materials and supplies purchased for processing, manufacturing, and  
31.14 sale.

31.15 D. The commissioner must not reduce income from nontraditional housing  
31.16 agreements by the withholdings and expenses allowed in this chapter.

31.17 E. The commissioner must average over 12 months and include in the monthly  
31.18 household income calculation self-employment income that was received by or made  
31.19 available to an applicant or a recipient or any member of an applicant's or a recipient's  
31.20 household. If the source of self-employment income has been in operation less than 12  
31.21 months, self-employment income and expenses must be averaged over the number of months  
31.22 the income source has been in operation.

32.1 Subp. 9. **Unearned income.**

32.2 A. When calculating monthly household income, the commissioner must include  
32.3 unearned income that is received by, made available to, or projected for an applicant or a  
32.4 recipient or any member of an applicant's or a recipient's household.

32.5 B. Unearned income includes:

32.6 (1) long-term disability benefits in part 9055.0160, subpart 27;

32.7 (2) long-term maintenance benefits in part 9055.0160, subpart 28;

32.8 (3) short-term disability benefits in part 9055.0160, subpart 39;

32.9 ~~(4)~~ (4) interest and dividends from investments and savings and any return  
32.10 on investment taken in cash or cash equivalents;

32.11 ~~(5)~~ (5) capital gains from the sale of any investment or real property;

32.12 ~~(6)~~ (6) proceeds from the sale of personal property;

32.13 ~~(7)~~ (7) proceeds from a contract for deed that are in excess of the principle,  
32.14 interest, taxes, and insurance owed on the property that a household member is responsible  
32.15 for;

32.16 ~~(8)~~ (8) income from trusts and annuities;

32.17 ~~(9)~~ (9) cash prizes and winnings;

32.18 ~~(10)~~ (10) unemployment insurance benefits;

32.19 ~~(11)~~ (11) worker's compensation benefits;

32.20 ~~(12)~~ (12) Social Security disability and Supplemental Security Income (SSI)  
32.21 benefits, Social Security and Railroad Retirement benefits;

33.1 ~~(40)~~ (11) United States Department of Veterans Affairs ~~disability~~  
33.2 ~~compensation and pension benefits~~, vocational rehabilitation benefits and GI bill housing  
33.3 allowances;  
33.4 ~~(41)~~ (12) reimbursements for medical or travel expenses issued by the United  
33.5 States Department of Veterans Affairs or other medical assistance program;  
33.6 ~~(12)~~ Military retirement and all Department of Defense disability benefits;  
33.7 ~~(13)~~ state, local, and federal government retirement/pension benefits;  
33.8 ~~(14)~~ private retirement and pension benefits;  
33.9 ~~(15)~~ (13) insurance settlements and severance payments;  
33.10 ~~(16)~~ (14) cash payments from income maintenance programs;  
33.11 ~~(17)~~ (15) tribal per capita payments;  
33.12 ~~(18)~~ (16) child and spousal support payments received by a household  
33.13 member;  
33.14 ~~(19)~~ (17) federal and state student financial aid work study income;  
33.15 ~~(20)~~ (18) relative custody assistance grants; and  
33.16 ~~(21)~~ (19) funds received from any source or person not previously referenced  
33.17 and there is no expectation that the funds be repaid, or repayment of the funds has been  
33.18 deferred.

33.19 C. When calculating unearned income, the commissioner must reduce the total  
33.20 amount by the following withholdings and reductions:

- 33.21 (1) federal income tax withholdings or payments;  
33.22 (2) ~~Minnesota~~ state income tax withholdings or payments;

- 34.1 (3) ~~VA~~ United States Department of Veterans Affairs life insurance premiums;
- 34.2 (4) Tricare premiums;
- 34.3 (5) medical, dental, and optical insurance premiums;
- 34.4 (6) Medicare premiums; and
- 34.5 (7) child support withholdings.

34.6 D. The commissioner must average and include in the monthly household income  
34.7 calculation any unearned income that was received by or made available to an applicant or  
34.8 a recipient or any member of the applicant's or recipient's household in the two months  
34.9 before the date of application or will be received by or made available to an applicant or a  
34.10 recipient or any member of the applicant's or recipient's household within 30 days after the  
34.11 date of application.

34.12 **Subp. 10. Seasonal income.**

34.13 A. When calculating monthly household income, the commissioner must include  
34.14 seasonal income that is received by or made available to an applicant or a recipient or any  
34.15 member of the applicant's or recipient's household.

34.16 B. The commissioner must calculate seasonal income using only the months in  
34.17 which the income is received by or made available to an applicant or a recipient or any  
34.18 member of the applicant's or recipient's household.

34.19 C. The commissioner must average and include in the monthly household income  
34.20 calculation seasonal income that was received by or made available to an applicant or a  
34.21 recipient or any member of the applicant's or recipient's household in the two months before  
34.22 the income ended.

35.1           **Subp. 11. Nonrecurring income.**

35.2           A. When calculating monthly household income, the commissioner must include  
35.3 nonrecurring income that is received by, made available to, or is projected for an applicant  
35.4 or a recipient or any member of the applicant's or recipient's household.

35.5           B. Nonrecurring income includes:

35.6                 (1) insurance settlements;

35.7                 (2) state, federal, and local tax refunds;

35.8                 (3) retroactive income maintenance payments;

35.9                 (4) retroactive benefit payments;

35.10                (5) accrued earned and unearned income and income from self-employment  
35.11 paid on a onetime or a nonrecurring basis;

35.12                (6) winnings; and

35.13                (7) inheritances.

35.14           C. When calculating nonrecurring income, the commissioner must reduce the  
35.15 total amount by the withholdings, reductions, or expenses allowed for the type of income  
35.16 received plus any legal or medical fees or other costs incurred to secure receipt of the income.

35.17           D. When calculating monthly household income, the commissioner must include  
35.18 nonrecurring income that will be received by or made available to an applicant or a recipient  
35.19 or any member of the applicant's or recipient's household in a lump sum if the income  
35.20 amount is known and the date of receipt is within 30 days after the date of application.

35.21           E. The commissioner must average over 12 months and include in the monthly  
35.22 household income calculation nonrecurring income that is received by or made available  
35.23 to an applicant or a recipient or any member of the applicant's or recipient's household

onetime as a lump sum in the two months before the date of application or will be received by or made available to an applicant or a recipient or any member of the applicant's or recipient's household within 30 days after the date of application.

**Subp. 12. Suspended, terminated, or transferred income.** When calculating monthly household income, the commissioner must include the income of an applicant or a recipient or any member of the applicant's or recipient's household that is suspended, terminated, or transferred to a person who is not eligible for benefits unless the income was suspended, terminated, or transferred due to circumstances beyond the applicant's or recipient's or a household member's control.

**Subp. 13. Projected income.**

A. When calculating monthly household income, the commissioner must include the earned or unearned income of an applicant or a recipient and any member of an applicant's household that began on a recurring basis in the 30 days before the date of application or will be received on a recurring basis within the 30 days after the date of application.

B. The commissioner must calculate income projected on a weekly basis by multiplying the weekly amount by 52 pay periods and averaging the result over 12 months.

C. The commissioner must calculate income projected on a biweekly basis by multiplying the biweekly amount by 26 pay periods and averaging the result over 12 months.

D. The commissioner must calculate income projected on a bimonthly basis by multiplying the bimonthly amount by 24 pay periods and averaging the result over 12 months.

**Subp. 14. Excluded income.** When calculating monthly household income, the commissioner must exclude income received by an applicant or a recipient and any member of an applicant's or a recipient's household from the following sources:

A. supplemental nutrition aid payments (SNAP);

B. rental security deposit refunds to the household, regardless of whether the deposit was paid by a third party;

C. proceeds from education grants, scholarships, and student loans;

D. proceeds from secured or unsecured loans or lines of credit made by a public or private institution, governmental agency, or private person;

E. funds received for reimbursement, replacement, or rebate of damaged personal or real property when the payments are made from private insurance companies, public agencies, awarded by a court, solicited through public appeal, or made as a grant by a federal agency subsequent to a presidential declaration of disaster;

F. benefit payments from the commissioner to correct underpayments in a previous benefit period;

G. the earned income of a child who is a member of the household and who is a full-time student; and

H. foster care payments received by the household for persons residing with the household but are who are not eligible to receive benefits from the state soldiers' assistance program.

#### **9055.0310 CALCULATING HOUSEHOLD ASSETS.**

##### **Subpart 1. Definitions.**

A. The definitions in this subpart apply to this part.

B. "Assets" means cash and cash equivalents and financial instruments and investment vehicles that are convertible to cash and are owned by or available to an applicant or a recipient or any member of the applicant's or recipient's household.

38.1 C. "Cash and cash equivalents" means coins, currency, checking accounts, savings  
38.2 accounts, and money market accounts, and short-term investments that mature in 30 to 90  
38.3 days.

38.4 D. "Financial instrument" means any real or virtual document that represents a  
38.5 legal agreement involving any kind of monetary value. Financial instruments are cash or  
38.6 derivative in type and are either equity, debt, or foreign exchange based.

38.7 E. "Household assets" means the combined value of the included assets of an  
38.8 applicant or a recipient and any member of an applicant's or a recipient's household.

38.9 F. "Investment vehicle" means any financial product used by investors for the  
38.10 purpose of achieving positive returns.

38.11 Subp. 2. **Household assets.**

38.12 A. The commissioner must calculate the household assets of an applicant or a  
38.13 recipient according to this part.

38.14 B. Income received by an applicant or a recipient or a member of an applicant's  
38.15 or a recipient's household is not considered an asset in the month it is received. Income  
38.16 carried over into the next month becomes an asset.

38.17 ~~**Example:** The most recent statement for a personal checking account owned by a~~  
38.18 ~~household member shows an ending balance of \$3,000. During the statement period,~~  
38.19 ~~roughly one month, the household member received \$2,000 in income. The asset value~~  
38.20 ~~that is attributed to the personal checking account is \$1,000. The \$2,000 of income~~  
38.21 ~~received in the statement period is not included in the household asset value.~~

38.22 C. The commissioner must use household assets to determine the household's  
38.23 eligibility for benefits from asset-based state soldiers' assistance program activities.

39.1           **Subp. 3. Asset inclusion and availability.**

39.2           A. When calculating household assets, the commissioner must include the assets  
39.3 of an applicant or a recipient and any member of an applicant's or a recipient's household,  
39.4 unless an asset is not available or a specific type of asset is excluded by this chapter.

39.5           B. An asset is available if the applicant or recipient or the household member can  
39.6 convert the asset to cash.

39.7           C. The commissioner must exclude an asset if there is a legally enforceable  
39.8 provision in the agreement between the asset owner and the ~~administering institution~~ entity  
39.9 administering the asset that currently prevents the asset owner from converting any portion  
39.10 of the asset to cash.

39.11           D. The applicant or recipient must submit documentation to the commissioner  
39.12 from the ~~institution~~ entity administering the asset that confirms the asset cannot be converted  
39.13 to cash.

39.14           E. Taxes, penalties, and fees assessed when converting an asset to cash are not  
39.15 barriers to converting an asset to cash but must be excluded when calculating the value of  
39.16 the asset.

39.17           F. Credit available to an applicant or a recipient or any member of the applicant's  
39.18 or recipient's household through a secured or unsecured line of credit or a reverse mortgage  
39.19 is not an asset until funds are distributed and placed in a financial account, financial  
39.20 instrument, or investment vehicle that is convertible to cash.

39.21           **Subp. 4. Asset ownership.**

39.22           A. When calculating household assets, the commissioner must equally divide the  
39.23 value of an asset that is jointly owned by:

40.1 (1) an applicant or a recipient or any member of the applicant's or recipient's  
40.2 household; and

40.3 (2) a person not eligible for benefits, unless the asset is a personal checking  
40.4 or savings account or a different division of asset ownership is confirmed by documentation  
40.5 submitted from the ~~institution~~ entity administering the asset.

40.6 B. When calculating household assets, the commissioner must include the full  
40.7 value of a personal checking or savings account that is jointly owned by:

40.8 (1) an applicant or a recipient or any member of the applicant's or recipient's  
40.9 household; and

40.10 (2) a person not eligible for benefits, unless documentation submitted from  
40.11 the ~~institution~~ entity administering the asset confirms:

40.12 ~~(1)~~ (a) the applicant or recipient or the household member has limited access  
40.13 to the funds in the account; or

40.14 ~~(2)~~ (b) specific shares of the funds are attributed to the applicant or recipient  
40.15 or the household member and the person not eligible for benefits.

40.16 Subp. 5. **Asset limits.**

40.17 A. When an applicant's or a recipient's household assets are a determinant of  
40.18 eligibility for a specific state soldiers' assistance program activity, maximum household  
40.19 asset limits based on an applicant's or a recipient's household size are provided in the schedule  
40.20 of maximum monthly allowances for the program activity.

40.21 B. A household is not eligible for benefits from a state soldiers' assistance program  
40.22 that is asset-based if the household's assets are greater than or equal to its maximum  
40.23 household asset limit for the program activity.

41.1 C. Transferring household assets for the purpose of attaining program eligibility  
41.2 is prohibited. The commissioner must include the value of improperly transferred assets  
41.3 when calculating household assets.

41.4 D. A household may reduce its household assets to attain program eligibility by  
41.5 paying for basic needs if the household's assets are greater than or equal to its maximum  
41.6 household asset limit for an asset-based program on the date of application.

41.7 Subp. 6. **Asset documentation.**

41.8 A. An applicant or a recipient ~~may~~ must verify household assets with any of the  
41.9 following documents:

41.10 (1) statements from the entity administering an asset administrator that verify  
41.11 the funds available in all financial accounts;

41.12 (2) statements from the entity administering an asset administrator that verify  
41.13 the cash value of all financial instruments or investment vehicles; or

41.14 (3) other documentation from entity administering an asset administrator that  
41.15 accurately verifies the value of an asset.

41.16 B. An applicant or a recipient must submit the most current asset documentation  
41.17 to the commissioner for the type of asset that is being calculated.

41.18 C. Documentation submitted by an applicant or a recipient must verify and confirm:

41.19 (1) the owner of the asset;

41.20 (2) the financial institution, employer, agency, or organization administering  
41.21 the asset;

41.22 (3) the period covered by the documentation;

41.23 (4) the gross value of the asset; and

42.1 (5) the taxes, penalties, and fees and other withholdings or reductions incurred  
42.2 if the asset were converted to cash.

42.3 Subp. 7. **Allowed withholdings and reductions.** The commissioner must reduce the  
42.4 gross value of an asset by the following withholdings and reductions to calculate the value  
42.5 of the asset that is used to determine the household's eligibility for benefits:

42.6 A. projected federal income tax withholdings;

42.7 B. projected ~~Minnesota~~ state income tax withholdings;

42.8 C. surrender charges, penalties for early withdrawal, revocation of bonuses or  
42.9 onetime payments, higher fees, or reduced interest guarantees calculated and verified by  
42.10 documentation from the ~~institution~~ entity administering the asset; and

42.11 D. other projected penalties and fees associated with a loan, early distribution, or  
42.12 conversion of an asset to cash calculated and verified by documentation from the ~~institution~~  
42.13 entity administering the asset.

42.14 Subp. 8. **Excluded assets.** The commissioner must exclude the following types of  
42.15 assets when calculating household assets:

42.16 A. irrevocable burial policies or irrevocable trusts;

42.17 B. the cash value and other proceeds available from life insurance policies if  
42.18 converting these assets to cash results in termination of coverage; and

42.19 C. all financial accounts of minor children if the financial accounts are custodial  
42.20 accounts.

42.21 **9055.0315 SCHEDULE OF MAXIMUM MONTHLY ALLOWANCES.**

42.22 A. The schedule of maximum monthly allowances is incorporated by reference.  
42.23 The schedule of maximum monthly allowances is ~~subject to frequent change~~ updated and  
42.24 published annually by the commissioner in January of each year and is available in the State

43.1 Law Library, at the Minnesota Department of Veterans Affairs, Veterans Service Building,  
43.2 St. Paul, Minnesota 55155, or on the Minnesota Department of Veterans Affairs website at  
43.3 <https://mn.gov/mdva/>.

43.4 B. The schedule of maximum monthly allowances is updated annually:

43.5 (1) to incorporate changes in maximum monthly household income limits  
43.6 and maximum household asset limits; and

43.7 (2) to incorporate changes in benefit amounts provided under a state soldiers'  
43.8 assistance program activity.

43.9 **9055.0320 STATE SOLDIERS' ASSISTANCE PROGRAM DENTAL AND OPTICAL**  
43.10 **PROGRAM ACTIVITIES.**

43.11 Subpart 1. **Program purpose.**

43.12 A. Upon application approval, the commissioner must provide needed dental and  
43.13 optical care to a veteran and the veteran's dependents.

43.14 B. An applicant for dental and optical benefits must meet the requirements of this  
43.15 part and must be a veteran ~~or~~, the surviving spouse of a veteran, or the authorized  
43.16 representative of a surviving dependent of a veteran.

43.17 C. This part applies only to the dental and optical program activities.

43.18 Subp. 2. **Income and asset limits for dental and optical.**

43.19 A. An applicant's monthly household income and household assets are determinants  
43.20 of eligibility for the dental and optical program activities.

43.21 B. Maximum monthly household income limits and maximum household asset  
43.22 limits for the dental and optical program activities are provided in the schedule of maximum  
43.23 monthly allowances for the dental and optical program activity.

44.1 C. The commissioner must calculate the monthly household income and household  
44.2 assets of an applicant according to parts 9055.0300 and 9055.0310.

44.3 D. To be eligible for benefits under this part, an applicant's monthly household  
44.4 income and household assets must be under the maximum limits.

44.5 Subp. 3. **Dental and optical benefit periods.**

44.6 A. The commissioner must establish dental and optical benefit periods not to  
44.7 exceed 150 calendar days during which a recipient of dental or optical benefits is authorized  
44.8 to receive treatment.

44.9 B. A recipient may request an extension of a dental or optical benefit period to  
44.10 complete treatment that began before the final day of the benefit period.

44.11 C. A recipient must request to extend a dental or optical benefit period through a  
44.12 county veterans service officer, a department field operations claim representative, or a  
44.13 department tribal veterans service officer.

44.14 D. A recipient making a request under this subpart to extend a dental or optical  
44.15 benefit period must submit a written statement to the commissioner not more than 30 days  
44.16 after the current benefit period has ended that explains the need for extending the benefit  
44.17 period.

44.18 E. The commissioner must extend the length of a dental or optical benefit period  
44.19 for any of the following reasons that are preventing a recipient from completing dental or  
44.20 optical treatment:

44.21 (1) medical conditions that prohibit the recipient from receiving dental or  
44.22 optical treatment;

44.23 (2) required wait times between specific dental or optical procedures;

45.1 (3) lack of appointment availability with the authorized dental or optical  
45.2 provider; ~~and~~ or

45.3 (4) unforeseen circumstances that prevent the recipient from completing  
45.4 dental or optical treatment.

45.5 F. A recipient must reapply for dental or optical benefits if the current benefit  
45.6 period ended before the recipient began receiving dental or optical treatment.

45.7 **Subp. 4. Dental and optical authorization letters.**

45.8 A. The commissioner must issue a dental or optical authorization letter to each  
45.9 recipient of dental or optical benefits.

45.10 B. The dental and optical authorization letters must explain:

45.11 ~~(1) program guidelines and administrative procedures;~~

45.12 ~~(2)~~ (1) the first and final days of the benefit period;

45.13 ~~(3)~~ (2) the maximum dental or optical benefit amounts; and

45.14 ~~(4)~~ (3) the authorized dental or optical provider.

45.15 C. A recipient of benefits under this part is authorized to receive treatment only  
45.16 from the provider stated on the current dental or optical authorization letter.

45.17 D. The commissioner must issue authorization letters for the dental and optical  
45.18 program activities only for dental and optical providers in Minnesota ~~or in surrounding~~  
45.19 ~~border communities approved by the commissioner.~~

45.20 **Subp. 5. Dental and optical denial letter.**

45.21 A. The commissioner must issue a dental or optical denial letter to an applicant  
45.22 who is denied dental or optical benefits.

46.1 B. The dental or optical denial letter must explain the reasons for denial and the  
46.2 applicant's right to appeal under part 9055.0290, subpart 8.

46.3 C. The commissioner must provide an applicant who is over the maximum monthly  
46.4 household income limit or maximum household asset limit for dental and optical benefits  
46.5 a written explanation of how the applicant's monthly household income and household  
46.6 assets were calculated.

46.7 Subp. 6. **Provider participation.**

46.8 A. For a dental or optical provider participating in the dental or optical program  
46.9 activities, the dental or optical provider must:

46.10 (1) comply with this part ~~and follow the guidelines and administrative~~  
46.11 ~~procedures established by the commissioner for the dental and optical program activities;~~

46.12 (2) coordinate treatment and follow-on care with the commissioner for each  
46.13 recipient of dental or optical benefits;

46.14 (3) bill only for the treatment provided; and

46.15 ~~(4) comply with all department and Minnesota Management and Budget~~  
46.16 ~~requirements for billing and receiving payment from the state; and~~

46.17 ~~(5)~~ (4) report any possible conflicts of interest that may arise out of providing  
46.18 dental or optical treatment to a person.

46.19 B. The commissioner must temporarily suspend a provider's participation in the  
46.20 dental or optical program activities upon initiation of an investigation into provider  
46.21 misconduct.

47.1           **Subp. 7. Changing providers.**

47.2           A. A recipient of dental and optical benefits under this part may request to change  
47.3 providers if there is a conflict with the original provider or other circumstances prevent the  
47.4 recipient from completing treatment with the original provider.

47.5           B. A recipient requesting to change dental or optical providers must submit the  
47.6 request with a written statement explaining the reasons for changing providers to the  
47.7 commissioner through a county veterans service officer, a department field operations claims  
47.8 representative, or a department tribal veterans service officer.

47.9           C. A recipient may request to change dental or optical providers once during the  
47.10 first benefit period approved under the current application and before treatment has begun.  
47.11 The following conditions apply when changing providers under this item:

47.12                   (1) the commissioner must void the current dental or optical authorization  
47.13 letter and terminate the current benefit period of the recipient;

47.14                   (2) the commissioner must issue a new dental or optical authorization letter  
47.15 to the recipient, which begins a new benefit period; and

47.16                   (3) any additional requests to change providers during a new benefit period  
47.17 require approval by the commissioner under items A and B.

47.18           D. A recipient may request to change dental or optical providers once during the  
47.19 first benefit period approved under the current application after treatment has begun. The  
47.20 following conditions apply ~~to a recipient requesting to change dental or optical providers~~  
47.21 ~~any time during a benefit period after treatment has begun~~ when changing dental or optical  
47.22 providers under this item:

47.23                   (1) the commissioner must provide written notice to the original provider  
47.24 and the new provider that the request to change providers is approved;

48.1 (2) the commissioner must inform the new provider of the benefit amount  
48.2 remaining on the dental or optical authorization letter;

48.3 ~~(1)~~ (3) payment for treatment from a new provider is prohibited before  
48.4 commissioner approval under subitems (1) and (2);

48.5 ~~(2)~~ (4) retroactive payment for treatment from a new provider before  
48.6 commissioner approval under subitems (1) and (2) is prohibited;

48.7 ~~(3)~~ (5) charges incurred at the original provider before the request to change  
48.8 providers is approved have payment priority over charges incurred at a new provider;

48.9 ~~(4)~~ (6) once all charges from the original provider are paid, only the remaining  
48.10 balance of the initial benefit amount is available for use with a new provider;

48.11 ~~(5)~~ (7) the length of a benefit period remains the same when changing dental  
48.12 or optical providers but can be extended, according to subpart 3, items B to E, if necessary;  
48.13 ~~and~~

48.14 ~~(6)~~ (8) additional treatment from the original provider is prohibited once a  
48.15 new provider is approved by the commissioner- under subitems (1) and (2); and

48.16 (9) any additional requests to change providers require approval by the  
48.17 commissioner under items A and B.

48.18 **Subp. 8. Adding providers.**

48.19 A. A recipient of dental or optical benefits or the dental or optical provider may  
48.20 request to add an additional provider to a current authorization letter. The following  
48.21 conditions apply when adding a dental or optical provider under this item:

48.22 ~~B. (1) the original or the current provider must submit a written referral for~~  
48.23 ~~treatment from the added provider to the commissioner before the end of the current benefit~~  
48.24 ~~period;~~

49.1                   (2) the commissioner must provide written notice to the current provider and  
49.2 the added provider that the request is approved;

49.3                   (3) the commissioner must inform the current provider and the added provider  
49.4 of the benefit amount remaining on the dental or optical authorization letter and that the  
49.5 remaining benefit amount must be shared between the current provider and the added  
49.6 provider;

49.7                   ~~€. (4) the commissioner must approve an added provider under subitems (1) to~~  
49.8 ~~(3) before treatment from the added provider is authorized. Retroactive payment for treatment~~  
49.9 ~~provided before commissioner approval is prohibited.;~~

49.10                   (5) retroactive payment for treatment from an added provider before  
49.11 commissioner approval under subitems (1) to (3) is prohibited;

49.12                   ~~D. The remaining balance of the initial benefit amount must be distributed between~~  
49.13 ~~the original provider and the added provider.~~

49.14                   ~~E. (6) the length of the benefit period remains the same when adding a dental or~~  
49.15 ~~optical provider but can be extended, according to subpart 3, items B to E, if necessary.;~~  
49.16 and

49.17                   ~~F. (7) treatment from the original current provider is still authorized if a provider~~  
49.18 ~~is added to an authorization letter.~~

49.19                   **Subp. 9. Dental and optical program activities are not insurance.**

49.20                   A. The commissioner must be the last to pay for dental and optical treatment when  
49.21 a recipient of dental and optical benefits is covered by insurance. An applicant for dental  
49.22 or optical benefits must disclose to the commissioner dental or optical insurance coverage.

50.1 B. A dental or optical provider must submit an explanation of benefits from the  
50.2 insurance carrier with the corresponding dental or optical ~~bills~~ claims to the commissioner  
50.3 if a recipient has dental or optical insurance.

50.4 C. The commissioner must only pay the amount the covered person is responsible  
50.5 for paying under the terms and conditions of the insurance contract and the laws of  
50.6 Minnesota.

50.7 D. The commissioner must pay up to the maximum amount allowed under the  
50.8 dental or optical program activities for treatment not covered by insurance or denied in full  
50.9 by the insurance carrier.

50.10 Subp. 10. **Benefits provided.** The commissioner must administer the dental benefit  
50.11 in two tiers:

50.12 A. the first tier of the dental benefit pays up to a maximum benefit amount on an  
50.13 annual basis for specific dental treatment; and

50.14 B. the second tier of the dental benefit pays up to a maximum per-lifetime benefit  
50.15 amount for specific types of dental treatment.

50.16 Subp. 11. **First-tier dental benefit.**

50.17 A. The commissioner must issue a dental authorization letter to each recipient of  
50.18 the first-tier dental benefit.

50.19 B. The maximum annual benefit amount for the first tier of the dental benefit is  
50.20 provided in the schedule of maximum monthly allowances for the dental program activity.

50.21 C. The maximum benefit amount is authorized at the start of each first-tier dental  
50.22 benefit period for which a recipient is approved.

51.1 D. First-tier dental benefit amounts remaining at the end of a benefit period do  
51.2 not carry over for future use. First-tier dental benefit amounts must not be combined or  
51.3 transferred among household members.

51.4 E. The first-tier dental benefit allows for payment of the following treatments:

- 51.5 (1) examinations, cleanings, and screenings;
- 51.6 (2) diagnostic procedures;
- 51.7 (3) fillings and tooth repairs;
- 51.8 (4) restorative procedures to include bonding, sealants, and veneers;
- 51.9 (5) crowns, caps, and bridges;
- 51.10 (6) root canals and other endodontic treatment;
- 51.11 (7) periodontal treatment; ~~and~~
- 51.12 (8) prescription medications prescribed by a dental provider; and
- 51.13 ~~(8)~~ (9) tooth extractions including tissue and bone removal and restoration
- 51.14 that are not in preparation for dentures, partial dentures, or a flipper.

51.15 F. Dental treatment not covered under the first-tier dental benefit includes:

- 51.16 (1) orthodontia and orthodontic procedures;
- 51.17 (2) tooth whitening and cosmetic procedures;
- 51.18 (3) occlusal guards;
- 51.19 (4) specialized toothbrushes and other hardware; and
- 51.20 (5) dental implants.

52.1           **Subp. 12. Frequency of the first-tier dental benefit.**

52.2           A. A recipient is limited to one first-tier dental benefit every 12 months.

52.3           B. A previous recipient is eligible for the first-tier dental benefit 12 months after  
52.4 the first date-of-service paid for by the commissioner in the recipient's previous benefit  
52.5 period.

52.6           C. A previous recipient must complete a new application for each benefit period  
52.7 and must meet all eligibility requirements for each benefit period.

52.8           **Subp. 13. Second-tier dental benefit.**

52.9           A. The commissioner must issue the second-tier dental benefit to a recipient as a  
52.10 maximum per-lifetime benefit amount for specific types of treatment. The second-tier dental  
52.11 benefit allows for payment of:

52.12                   (1) tooth extractions including tissue and bone removal and restoration in  
52.13 preparation for dentures, partial dentures, or a flipper; and

52.14                   (2) full dentures, partial dentures, or a flipper.

52.15           B. The maximum lifetime benefit amount for the second-tier dental benefit is  
52.16 provided in the schedule of maximum monthly allowances for the dental program activity.

52.17           C. The maximum benefit amount is authorized at the start of the first second-tier  
52.18 benefit period a recipient is approved for. Second-tier benefit amounts remaining at the end  
52.19 of the first benefit period carry over for future use in subsequent benefit periods until the  
52.20 lifetime benefit amount is exhausted.

52.21           D. A previous recipient of a second-tier dental benefit must complete and submit  
52.22 to the commissioner a new application for each second-tier benefit period and meet all  
52.23 eligibility requirements for each benefit period.

53.1 E. The commissioner must issue a separate authorization letter each time a recipient  
53.2 is approved for a second-tier dental benefit. Each authorization letter must show the amount  
53.3 that is remaining for the benefit.

53.4 F. Second-tier benefit amounts must not be combined or transferred among  
53.5 household members.

53.6 G. The maximum benefit amounts for each second-tier dental benefit are exclusive  
53.7 and must not be combined with each other or with the first-tier dental benefit amount.

53.8 H. A second-tier dental benefit must be preauthorized by the commissioner before  
53.9 treatment is provided. The original or current dental provider must submit a written request  
53.10 for preauthorization of a second-tier benefit to the commissioner before the end of a current  
53.11 first-tier dental benefit period and before second-tier treatment is provided.

53.12 I. A recipient may use the first-tier dental benefit on an annual basis to receive  
53.13 second tier dental treatment if the maximum lifetime benefit amount for the second-tier  
53.14 dental benefit is exhausted.

53.15 Subp. 14. **Optical benefits.**

53.16 A. The optical benefit allows for payment of specific optical treatment under a  
53.17 single tier on an annual basis. The commissioner must issue an optical authorization letter  
53.18 to each recipient of the optical benefit.

53.19 B. The maximum annual benefit amount for the optical benefit is provided in the  
53.20 schedule of maximum monthly allowances for the optical program activity.

53.21 C. The maximum benefit amount is authorized at the start of each optical benefit  
53.22 period for which a recipient is approved.

54.1 D. Optical benefit amounts remaining at the end of a benefit period do not carry  
54.2 over for future use. Optical benefit amounts must not be combined or transferred among  
54.3 household members.

54.4 E. Optical treatment covered annually under this subpart is limited to:

54.5 (1) examinations and screenings;

54.6 (2) diagnostic procedures; ~~and~~

54.7 (3) prescription medications prescribed by an ophthalmologist or optometrist;

54.8 and

54.9 ~~(3)~~ (4) eyewear to include prescription glasses, prescription sunglasses, and  
54.10 contact lenses.

54.11 F. Optical treatment not covered under this subpart includes:

54.12 (1) eye surgery;

54.13 (2) eyewear accessories to include carrying cases, cleaning kits, and cleaning  
54.14 solutions; and

54.15 (3) eyewear warranty or membership programs.

54.16 Subp. 15. **Frequency of optical benefits.**

54.17 A. A recipient is limited to one optical benefit every 12 months.

54.18 B. A previous recipient is eligible for the optical benefit 12 months after the first  
54.19 date-of-service paid for by the commissioner in the recipient's previous benefit period.

54.20 C. A previous recipient must complete a new application for each benefit period.  
54.21 The person must meet all eligibility requirements for each benefit period.

55.1           **Subp. 16. Dental and optical payments.**

55.2           A. Dental and optical providers must submit dental and optical claims with the  
55.3 information required ~~information~~ in item C to the commissioner for payment.

55.4           B. The commissioner must make payments for dental and optical treatment directly  
55.5 to the dental or optical provider.

55.6           C. Dental and optical ~~bills~~ claims submitted to the commissioner for payment of  
55.7 dental or optical benefits must include and confirm:

55.8                   (1) the name of the recipient receiving treatment;

55.9                   (2) the name of the recipient who applied for benefits;

55.10                  (3) a copy of the dental or optical authorization letter;

55.11                  (4) the dates of service and the treatment provided;

55.12                  (5) the amount charged for each treatment;

55.13                  (6) the provider's name, location, and payment address; and

55.14                  (7) an explanation of benefits from the insurance carrier if the recipient has  
55.15 insurance.

55.16   **9055.0330 STATE SOLDIERS' ASSISTANCE VOUCHER DEPOSIT ASSISTANCE**  
55.17 **PROGRAM (VDAP) ACTIVITY.**

55.18           **Subpart 1. Program purpose.**

55.19           A. Upon application approval, the commissioner must provide financial assistance  
55.20 as provided under this part to a veteran and the veteran's dependents who are participants  
55.21 in a publicly funded subsidized housing program.

55.22           B. An applicant for the voucher deposit assistance program (VDAP) benefit must  
55.23 meet the requirements of this part and must be a veteran or a surviving spouse of a veteran

56.1 who has been approved for subsidized housing and is in need of a security or damage deposit  
56.2 to take possession of the approved residence.

56.3 C. The ~~agency~~ entity approving a veteran or a surviving spouse for subsidized  
56.4 housing may verify the residency of the veteran or the surviving spouse if the veteran or  
56.5 surviving spouse does not have the residency verifications required in Minnesota Statutes,  
56.6 section 197.05, paragraph (b).

56.7 D. This part applies only to the VDAP activity.

56.8 Subp. 2. **Benefits provided.**

56.9 A. The VDAP benefit allows for payment of a security or damage deposit for a  
56.10 veteran or the surviving spouse of a veteran to obtain permanent housing.

56.11 B. The VDAP benefit is a once-per-lifetime benefit that is not subject to maximum  
56.12 monthly household income limits or maximum household asset limits.

56.13 C. A veteran is authorized to receive the VDAP benefit once in the veteran's  
56.14 lifetime. A surviving spouse of a veteran is authorized one VDAP benefit if the veteran did  
56.15 not receive the benefit while living.

56.16 D. The maximum VDAP benefit amount authorized under this part is limited to  
56.17 the amount ~~expressly~~ stated on the veteran's or the surviving spouse's proposed lease  
56.18 agreement for the security or damage deposit and any additional ~~amounts required for the~~  
56.19 ~~individual to be able to move into the housing facility as approved by the commissioner~~  
56.20 charges and fees required by the property owner or manager for the veteran or surviving  
56.21 spouse to move into the housing.

56.22 E. A property owner or manager must reimburse the remaining balance of a  
56.23 security or damage deposit to the veteran or the surviving spouse if the veteran or surviving  
56.24 spouse vacates the residence after having lived at the residence for at least 180 days. The  
56.25 property owner or manager must reimburse the remaining balance of a security or damage

57.1 deposit to the department if the veteran or surviving spouse vacates the residence before  
57.2 180 days.

57.3 **Subp. 3. VDAP approval letter and shelter authorization forms.**

57.4 A. The commissioner must issue a VDAP approval letter and VDAP shelter  
57.5 authorization form to a veteran or surviving spouse approved for the VDAP benefit.

57.6 B. The completed VDAP shelter authorization form is the only billing document  
57.7 accepted by the commissioner for payment of the veteran's or surviving spouse's security  
57.8 or damage deposit.

57.9 C. The VDAP approval letter and shelter authorization form must explain and  
57.10 confirm:

57.11 ~~(1) program guidelines and administrative procedures;~~

57.12 ~~(2)~~ (1) the amount approved for the veteran's or surviving spouse's security  
57.13 or damage deposit;

57.14 ~~(3)~~ (2) the name and address of the owner or manager of the property to be  
57.15 rented; and

57.16 ~~(4)~~ (3) instructions for completing the shelter authorization form.

57.17 **Subp. 4. VDAP denial letter.**

57.18 A. The commissioner must issue a VDAP denial letter to a veteran or surviving  
57.19 spouse who is denied the VDAP benefit.

57.20 B. The VDAP denial letter must explain the reasons for denial and the veteran's  
57.21 or surviving spouse's right to appeal under part 9055.0290, subpart 8.

57.22 **Subp. 5. Property owner or manager participation.** A property owner or manager  
57.23 participating in the VDAP program must:

58.1 A. comply with this part; and

58.2 B. execute a standard lease agreement with the veteran or surviving spouse and  
58.3 complete the owner or manager portion of the shelter authorization form; and.

58.4 ~~C. comply with all department and Minnesota Management and Budget~~  
58.5 ~~requirements for receiving payment from the state.~~

58.6 Subp. 6. **Changing residences.**

58.7 A. A veteran or surviving spouse may request to change residences before move-in  
58.8 if there is a conflict with the original property owner or manager or the original residence  
58.9 is no longer suitable.

58.10 B. A request to change residences must be submitted to the commissioner through  
58.11 a county veterans service officer, a department field operations claims representative, or a  
58.12 department tribal veterans service officer.

58.13 C. A veteran or surviving spouse requesting to change residences must return the  
58.14 original VDAP approval letter and shelter authorization form and submit a written statement  
58.15 to the commissioner explaining the reasons for changing residences.

58.16 D. The veteran or surviving spouse must provide updated documentation from  
58.17 the agency approving the veteran or surviving spouse for subsidized housing, and a proposed  
58.18 lease agreement with the new property owner or manager.

58.19 E. The commissioner must approve the new residence before move-in and payment  
58.20 of the security or damage deposit is authorized. Retroactive payment to a different property  
58.21 owner or manager after move-in before commissioner approval of the new residence is  
58.22 prohibited.

59.1 Subp. 7. **VDAP payments.**

59.2 A. To be eligible for VDAP payments, the veteran or surviving spouse must submit  
59.3 to the commissioner the completed documents required in item C for payment of a VDAP  
59.4 security or damage deposit to the property owner or manager.

59.5 B. The commissioner must only make a payment for a VDAP security or damage  
59.6 deposit to the property owner or manager stated on the VDAP shelter authorization form  
59.7 and on the ~~completed~~ executed lease agreement. The commissioner must make the payment  
59.8 directly to the property owner or manager.

59.9 C. Documents that must be submitted to the commissioner for payment of a VDAP  
59.10 security or damage deposit includes:

59.11 (1) a copy of the VDAP approval letter;

59.12 (2) the shelter authorization form completed by the veteran or surviving  
59.13 spouse and the property owner or manager; and

59.14 (3) a copy of the executed lease agreement signed by both the veteran or  
59.15 surviving spouse and the property owner or manager.

59.16 **9055.0340 STATE SOLDIERS' ASSISTANCE PROGRAM DISASTER RELIEF**  
59.17 **PROGRAM ACTIVITY.**

59.18 Subpart 1. **Program purpose.**

59.19 A. Upon application approval, the commissioner must provide financial assistance  
59.20 as provided under this part to the following eligible persons who have been adversely  
59.21 affected by a declared emergency as defined in Minnesota Statutes, section 12.03, subdivision  
59.22 1e:

59.23 (1) a veteran and the veteran's dependents ~~who have been adversely affected~~  
59.24 ~~by a peacetime emergency declared by the governor;~~ and

60.1 (2) a member of the armed forces called from reserve status to extended  
60.2 federal active duty per Minnesota Statutes, section 196.05, subdivision 1, clause (9), and  
60.3 the member's dependents ~~who have been adversely affected by a peacetime emergency~~  
60.4 ~~declared by the governor.~~

60.5 B. To be eligible for the disaster relief benefit, an applicant must meet the  
60.6 requirements of this part and be:

60.7 (1) a veteran;

60.8 (2) a surviving spouse of a veteran; or

60.9 (3) a member of the armed forces called from reserve status to extended  
60.10 federal active duty per Minnesota Statutes, section 196.05, subdivision 1, clause (9).

60.11 C. Two veterans married to each other are each authorized to receive the disaster  
60.12 relief benefit for a declared ~~peacetime~~ emergency.

60.13 D. This part applies only to the disaster relief program activity.

60.14 Subp. 2. **Activation of disaster relief program activity.** The commissioner must  
60.15 make available the disaster relief program activity benefits ~~when the governor issues an~~  
60.16 ~~emergency executive order declaring a peacetime emergency and the executive order~~  
60.17 ~~expressly states the commissioner is authorized to provide assistance under this part in the~~  
60.18 event of a declared emergency as defined in Minnesota Statutes, section 12.03, subdivision  
60.19 1e, and the governor issues an emergency executive order authorizing the commissioner to  
60.20 provide benefits under this part.

60.21 Subp. 3. **Residency requirement.** To be eligible for financial assistance under this  
60.22 part, an applicant must meet the residency requirements of Minnesota Statutes, section  
60.23 197.05, paragraph (b), and live in a county included in the governor's emergency executive  
60.24 order.

61.1 Subp. 4. **Frequency of disaster relief benefits.**

61.2 A. The number of times an individual ~~may receive~~ is eligible for the disaster relief  
61.3 benefit for a declared ~~peacetime~~ emergency is determined by the ~~type of disaster event~~  
61.4 ~~resulting in the peacetime emergency declaration~~ impact and duration of a declared  
61.5 emergency.

61.6 B. ~~If the disaster event is a single incident, then a recipient may only receive one~~  
61.7 ~~disaster benefit for a declared peacetime emergency.~~ If a declared emergency is a single  
61.8 incident, only one disaster benefit is authorized.

61.9 C. ~~The commissioner may authorize more than one disaster relief benefit for a~~  
61.10 ~~declared peacetime emergency if the disaster event is ongoing, lasting for an extended period~~  
61.11 ~~of time.~~ If a declared emergency is extended under Minnesota Statutes, section 12.31, more  
61.12 than one disaster relief benefit is authorized.

61.13 Subp. 5. **Benefits provided.**

61.14 A. The disaster relief benefit is limited to:

61.15 (1) financial assistance to offset a reduction in monthly household income  
61.16 or household assets ~~resulting from a disaster event~~ due to a declared emergency;

61.17 (2) financial assistance to pay for an increase in costs or expenses ~~resulting~~  
61.18 ~~from a disaster event~~ due to a declared emergency; or

61.19 (3) financial assistance with costs and expenses incurred to repair or restore  
61.20 a primary residence or ~~surrounding land~~ property the primary residence is built on that is  
61.21 vital to the structural integrity of a the primary residence and is damaged in a disaster event  
61.22 declared emergency.

61.23 B. Eligibility for the disaster relief benefit is not subject to maximum monthly  
61.24 household income limits or maximum household asset limits.

62.1 C. The maximum benefit amount for each declared ~~peace~~time emergency and the  
62.2 costs and expenses covered under the disaster relief benefit are based on the ~~type of disaster~~  
62.3 ~~event and the impact and duration of the disaster event~~ a declared emergency.

62.4 D. The maximum benefit amount for a declared ~~peace~~time emergency applies  
62.5 only to that emergency and expires at the end of the benefit period for the emergency.  
62.6 Amounts remaining at the end of the benefit period do not carry over for future use.

62.7 E. The commissioner must pay the disaster relief benefit as either a payment or  
62.8 reimbursement to the recipient, a payment to an entity to which payment is due for costs  
62.9 and expenses covered under the disaster relief benefit, or a payment to a vendor or contractor  
62.10 for work performed or services provided to repair or restore the recipient's primary residence  
62.11 or property the primary residence is built on that is vital to the structural integrity of the  
62.12 primary residence.

62.13 F. The disaster relief benefit must not be used to reimburse or pay for repairs and  
62.14 restorations covered in full by private insurance or covered by other state and federal agencies  
62.15 or programs.

62.16 Subp. 6. **Responsibility for repair and restoration.**

62.17 A. Property authorized for repair and restoration under the disaster relief benefit  
62.18 is limited to:

62.19 (1) a dwelling that is owned or leased by a recipient or recipient's spouse and  
62.20 is the household's primary residence; and

62.21 (2) ~~land surrounding the primary residence~~ property the primary residence  
62.22 is built on that is owned by the recipient or recipient's spouse that and is vital to the structural  
62.23 integrity of the primary residence.

63.1 B. Property affected by ~~the disaster event~~ a declared emergency that is owned by  
63.2 the recipient or recipient's spouse must be the household's primary residence and must be  
63.3 homesteaded.

63.4 C. Repair and restoration of business and agricultural buildings or ~~land~~ property  
63.5 not vital to the structural integrity of the primary residence is not eligible for the disaster  
63.6 relief program benefit under this part.

63.7 D. A recipient or recipient's spouse who is leasing the affected property must  
63.8 demonstrate to the commissioner a responsibility to repair and restore the property in the  
63.9 terms of the lease agreement.

63.10 E. A recipient ~~may~~ must submit any of the following documents to the  
63.11 commissioner for the purposes of proving the recipient or recipient's spouse is an owner or  
63.12 lessee of the property and confirming the property is homesteaded:

- 63.13 (1) a certificate of title;
- 63.14 (2) a deed;
- 63.15 (3) a current mortgage statement;
- 63.16 (4) the current year's property tax statement;
- 63.17 (5) a contract for deed; or
- 63.18 (6) a standard lease agreement.

63.19 F. The commissioner must prorate repair and restoration costs and expenses  
63.20 according to part 9055.0280, subparts 4 and 5, if:

- 63.21 (1) the recipient or recipient's spouse owns or leases the property with a  
63.22 person age 18 or older who is not eligible for the disaster relief benefit; and

64.1 (2) joint liability for the property and its repair and restoration is shared with  
64.2 the person.

64.3 G. The commissioner must not prorate repair and restoration costs and expenses  
64.4 if the person not eligible for the disaster relief benefit relinquishes ownership or ceases to  
64.5 lease the property or is no longer liable for the property and its repair and restoration.

64.6 Subp. 7. **Disaster relief benefit period.**

64.7 A. The disaster relief benefit period:

64.8 (1) is based on ~~the type of disaster event and the impact and duration of the~~  
64.9 ~~disaster event~~ a declared emergency; and

64.10 (2) is the period during which the commissioner must issue disaster relief  
64.11 benefits.

64.12 B. Reimbursement or payment for costs and expenses incurred on the first and  
64.13 final days of the benefit period is authorized.

64.14 C. A recipient of the disaster relief benefit may request an extension of the benefit  
64.15 period to complete repairs or restorations to the primary residence or ~~land~~ property the  
64.16 primary residence is built on that is vital to the structural integrity of the primary residence.

64.17 D. A recipient must request to extend a disaster relief benefit period through a  
64.18 county veterans service officer, a department field operations claim representative, or a  
64.19 department tribal veterans service officer.

64.20 E. A recipient making a request under this subpart to extend a disaster relief benefit  
64.21 period must submit a written statement to the commissioner explaining the need for extending  
64.22 the benefit period before the current benefit period has ended.

64.23 F. The commissioner must extend the length of a disaster relief benefit period for  
64.24 any of the following reasons preventing a recipient from completing the needed repairs or

65.1 restorations to the primary residence or property the primary residence is built on that is  
65.2 vital to the structural integrity of the primary residence:

65.3 (1) a lack of or unavailability of vendors or contractors to provide needed  
65.4 services;

65.5 (2) a delay in receiving insurance settlement funds; or

65.6 (3) unforeseen circumstances preventing the recipient from completing repairs  
65.7 or restorations.

65.8 Subp. 8. **Disaster relief approval letter.**

65.9 A. The commissioner must issue a disaster relief approval letter to a recipient of  
65.10 the disaster relief benefit.

65.11 B. The disaster relief authorization letter must explain:

65.12 ~~(1) program guidelines and administrative procedures;~~

65.13 ~~(2) contractor and vendor requirements;~~

65.14 ~~(3)~~ (1) the start and end dates of the benefit period;

65.15 ~~(4)~~ (2) the maximum benefit amount authorized;

65.16 ~~(5)~~ (3) type the types of items costs and expenses authorized covered under  
65.17 the disaster relief benefit;

65.18 ~~(6)~~ (4) the final day upon which proof of ~~loss of~~ a reduction in monthly  
65.19 household income or household assets ~~resulting from the disaster event~~ or an increase in  
65.20 covered costs and expenses ~~resulting from the disaster event~~ due to a declared emergency  
65.21 must be submitted to the commissioner; and

65.22 ~~(7) any additional documentation or actions required of the recipient or the~~  
65.23 ~~vendor or contractor.~~

66.1                    (5) the final day upon which proof of costs and expenses incurred to repair  
66.2 or restore the primary residence or property the primary residence is built on that is vital to  
66.3 the structural integrity of the primary residence that is damaged in a declared emergency  
66.4 must be submitted to the commissioner.

66.5                    Subp. 9. **Disaster relief denial letter.**

66.6                    A. The commissioner must issue a disaster relief denial letter to an applicant who  
66.7 is denied the disaster relief benefit.

66.8                    B. The disaster relief denial letter must explain the reasons for denial and the  
66.9 applicant's right to appeal under part 9055.0290, subpart 8.

66.10                  Subp. 10. **Vendor and contractor participation.** A vendor or contractor participating  
66.11 in the disaster relief program must:

66.12                  A. ~~comply with this part and follow the guidelines and administrative procedures~~  
66.13 ~~established by the commissioner for the disaster relief program activity;~~

66.14                  B. have the appropriate licensure to perform the work or provide the services  
66.15 contracted for; and

66.16                  C. bill only for the work completed or services provided.

66.17                  Subp. 11. **Disputes between vendor or contractor and household.**

66.18                  A. The commissioner is not a party to disputes between a vendor or contractor  
66.19 and a recipient of the disaster relief benefit over the quality of work performed or services  
66.20 provided.

66.21                  B. The commissioner must withhold payment to a vendor or contractor until the  
66.22 work is completed or services are provided if a recipient informs the commissioner that a  
66.23 vendor or contractor is seeking payment but has failed to perform or provide any of the  
66.24 work or services.

Subp. 12. **Disaster relief payments.**

~~A. An applicant, a vendor, or a contractor must submit to the commissioner proof of costs and expenses incurred for the repair or restoration of a primary residence or land vital to the structural integrity of a primary residence for reimbursement or payment under this part, if applicable.~~

~~B. For reimbursement or payment under this part, an applicant must submit to the commissioner, if applicable, proof of:~~

~~(1) loss of monthly household income;~~

~~(2) loss of household assets; or~~

~~(3) an increase in costs or expenses resulting from the disaster event.~~

A. For reimbursement or payment under this part, a recipient must submit to the commissioner proof of:

(1) a reduction in monthly household income;

(2) a reduction in household assets; or

(3) an increase in costs or expenses covered under the disaster relief benefit due to the declared emergency.

B. The commissioner must make a reimbursement or payment directly to a recipient to offset the reduction in monthly household income or household assets or directly to entities to which payment is due for costs and expenses covered under the disaster relief benefit.

C. Proof, as required by ~~items~~ item A ~~and B~~, and any receipts, invoices, or billing statements or other documentation submitted to the commissioner for reimbursement or payment of disaster relief benefits under item B must include and confirm:

(1) the ~~applicant's~~ recipient's household experienced as a result of the ~~disaster event~~ declared emergency a ~~loss of~~ reduction in monthly household income, a ~~loss of~~ reduction in household assets, or an increase in costs or expenses covered under the disaster relief benefit;

~~(2) the applicant incurred and paid the costs and expenses to repair and restore a primary residence or land vital to the structural integrity of a primary residence;~~

~~(3) the dates the repair and restoration costs were incurred;~~

~~(4) an itemized breakdown of the costs and expenses of work performed, or services provided if a vendor or contractor is requesting direct payment;~~

~~(5) the name, location, and payment address of a vendor or contractor providing services;~~

~~(6) proof of vendor or contractor licensure to provide services;~~

~~(7) proof of homeowners or renters insurance, payments received from the insurance carrier, and any deductible applied to the amount paid; and~~

~~(8) any other documentation necessary to meet Minnesota Management and Budget requirements.~~

(2) the name, location, and payment address of the entity to which payment is due for covered costs and expenses; and

(3) proof that the recipient or recipient's spouse is responsible for paying for the covered costs and expenses.

**Subp. 13. Disaster relief payments for property damage.**

A. A recipient, vendor, or contractor must submit to the commissioner proof of the costs and expenses incurred for the repair or restoration of a primary residence or property

69.1 the primary residence is built on that is vital to the structural integrity of a primary residence  
69.2 for reimbursement or payment under this part.

69.3 B. The commissioner must make reimbursements or payments directly to the  
69.4 recipient or to a vendor or contractor for work performed or services provided.

69.5 C. Proof, as required by item A, and any receipts, invoices, or billing statements  
69.6 or other documentation submitted to the commissioner for reimbursement or payment of  
69.7 disaster relief benefits under item B must include and confirm:

69.8 (1) the recipient incurred and paid the costs and expenses to repair and restore  
69.9 a primary residence or property the primary residence is built on that is vital to the structural  
69.10 integrity of a primary residence;

69.11 (2) the dates the repair and restoration costs were incurred;

69.12 (3) an itemized breakdown of the costs and expenses of work performed, or  
69.13 services provided if a vendor or contractor is requesting direct payment;

69.14 (4) the name, location, and payment address of a vendor or contractor  
69.15 providing services;

69.16 (5) proof of vendor or contractor licensure to provide services; and

69.17 (6) proof of homeowner's or renter's insurance, payments received from the  
69.18 insurance carrier, and any deductible applied to the amount paid by the insurance carrier.

69.19 **9055.0350 STATE SOLDIERS' ASSISTANCE PROGRAM SUBSISTENCE**  
69.20 **PROGRAM ACTIVITY - GENERAL.**

69.21 **Subpart 1. Program purpose.**

69.22 A. Upon application approval, the commissioner must provide short-term financial  
69.23 subsistence assistance as provided in this part to part ~~9055.0445~~ 9055.0440 to a veteran and  
69.24 the veteran's dependents under the following circumstances:

(1) a veteran is experiencing a medical condition that prevents the veteran from working at the veteran's current or most recent occupation for at least 30 days;

(2) a surviving spouse is experiencing a medical condition that prevents the surviving spouse from working at the surviving spouse's current or most recent occupation for at least 30 days; or

(3) a surviving spouse applies for subsistence within the 12-month period following ~~the~~ a veteran's death.

B. An applicant for subsistence must meet the requirements of this part to part 9055.0430, meet the requirements of part 9055.0435 or 9055.0440, and be a veteran or the surviving spouse of a ~~deceased~~ veteran.

C. Parts 9055.0350 to ~~9055.0445~~ 9055.0440 apply only to the subsistence program activity.

**Subp. 2. Other assistance programs.** An applicant or a recipient who at the time of application is receiving or begins to receive cash benefits from the general assistance (GA) program, emergency general assistance (EGA) program, diversionary work program (DWP), or Minnesota family investment program (MFIP) is not eligible for subsistence.

**Subp. 3. Benefits provided.**

A. The commissioner must administer subsistence in three tiers:

(1) the first tier of subsistence provides a monthly cash benefit paid directly to a recipient for the purpose of meeting the recipient's basic and personal needs;

(2) the second tier of subsistence provides a monthly shelter benefit for the purposes of paying a recipient's shelter costs; and

(3) the third tier of subsistence provides assistance for a recipient's monthly utilities and health insurance premiums.

71.1 B. "Benefit amount," for the purposes of the subsistence program activity benefit,  
71.2 means the total amount provided by the first and second tier benefits.

71.3 Subp. 4. **Benefit periods.** The commissioner must administer subsistence in 30-day  
71.4 benefit periods. The commissioner must make a determination of eligibility before each  
71.5 benefit period. A maximum of six 30-day benefit periods are authorized unless additional  
71.6 periods are approved by the commissioner under part 9055.0435, subpart 4, or 9055.0440,  
71.7 subpart 3.

71.8 Subp. 5. **Subsistence approval letter.**

71.9 A. The commissioner must issue a subsistence approval letter to a recipient for  
71.10 each benefit period that is approved.

71.11 B. The subsistence approval letter must explain and confirm:

71.12 ~~(1) program guidelines and administrative procedures;~~

71.13 ~~(2)~~ (1) the first and final days of the benefit period;

71.14 ~~(3)~~ (2) the cash and shelter benefit amounts authorized for the benefit period;

71.15 and

71.16 ~~(4)~~ (3) the utility charges and health insurance premiums or COBRA benefits  
71.17 authorized for the benefit period; ~~and.~~

71.18 ~~(5) any additional documentation or actions required of the recipient.~~

71.19 Subp. 6. **Subsistence shelter authorization form.**

71.20 A. The commissioner must issue a subsistence shelter authorization form to a  
71.21 recipient of the shelter benefit and who is leasing the primary residence.

72.1 B. The completed shelter authorization form is the only billing document that ~~the~~  
72.2 ~~commissioner may accept~~ is accepted for payment of the recipient's shelter benefit if the  
72.3 recipient is leasing the primary residence.

72.4 C. The shelter authorization form must explain and confirm:

72.5 (1) the instructions for completing the form;

72.6 (2) the shelter benefit amount;

72.7 (3) the first and final days of the benefit period; and

72.8 (4) the name and address of the property owner or manager; and.

72.9 ~~(5) any additional documentation or actions required of the recipient or the~~  
72.10 ~~property owner or manager.~~

72.11 Subp. 7. **Subsistence denial letter.**

72.12 A. The commissioner must issue a subsistence denial letter to an applicant or a  
72.13 recipient who is denied subsistence.

72.14 B. The subsistence denial letter must explain the reasons for denial and the  
72.15 applicant's or recipient's right to appeal under part 9055.0290, subpart 8.

72.16 **9055.0360 SUBSISTENCE INCOME AND ASSET LIMITS.**

72.17 Subpart 1. **Maximum household asset limits.**

72.18 A. An applicant's or a recipient's household assets are a determinant of eligibility  
72.19 for the subsistence program activity.

72.20 B. Maximum household asset limits for the subsistence program activity are  
72.21 provided in the schedule of maximum monthly allowances for the subsistence program  
72.22 activity.

C. The commissioner must calculate an applicant's or a recipient's household assets before the first benefit period and before each subsequent benefit period according to part 9055.0310.

D. An applicant's or a recipient's household assets must be under the maximum household asset limit to be eligible for the first benefit period and each subsequent benefit period.

Subp. 2. **Maximum monthly cash benefit amounts.** Maximum monthly cash benefit amounts are based on an applicant's or a recipient's household size and are provided in the schedule of maximum monthly allowances for the subsistence program activity.

Subp. 3. **Payment history and legal obligation to pay shelter costs.**

A. An applicant or a recipient must have a current legal obligation ~~and history of paying shelter costs~~ to pay shelter costs and provide documentation verifying the applicant or recipient paid shelter costs in the 12 months before the date of application for subsistence to be eligible for the monthly shelter benefit.

B. An applicant or a recipient ~~without a current legal obligation or history of paying shelter costs~~ who does not meet the requirements of item A may incur shelter costs and remain eligible for the monthly shelter benefit if necessary, to attain permanent housing and the commissioner confirms the applicant or recipient is homeless or on the homeless veteran registry.

Subp. 4. **Maximum monthly shelter benefit amounts.**

A. An applicant's or a recipient's maximum monthly shelter benefit amount is equal to the actual monthly shelter costs of the applicant's or recipient's primary residence if the following conditions are met:

74.1 (1) documentation submitted to the commissioner confirms the applicant or  
74.2 recipient or the applicant's or recipient's spouse is a lessee of the primary residence and the  
74.3 monthly shelter costs are for leasing the primary residence; or

74.4 (2) documentation submitted to the commissioner confirms the applicant or  
74.5 recipient or the applicant's or recipient's spouse is an owner of the primary residence, the  
74.6 primary residence is homesteaded, and the monthly shelter costs are the result of purchasing,  
74.7 owning, or maintaining the primary residence.

74.8 B. The commissioner must limit the maximum monthly shelter benefit amount  
74.9 for an applicant or a recipient residing under the terms of a nontraditional housing agreement  
74.10 to the shelter benefit amounts provided in the schedule of maximum monthly allowances  
74.11 for the subsistence program activity.

74.12 C. The commissioner must prorate the maximum monthly shelter benefit amount  
74.13 according to part 9055.0280, subparts 4 and 5, if:

74.14 (1) the applicant or recipient or the applicant's or recipient's spouse owns or  
74.15 leases the primary residence with a person age 18 or older who is not eligible for subsistence;  
74.16 and

74.17 (2) joint liability for the primary residence and associated shelter costs is  
74.18 shared with the person.

74.19 D. The commissioner must not prorate the maximum monthly shelter benefit  
74.20 amount if the person not eligible for subsistence relinquishes ownership or ceases to lease  
74.21 the primary residence or is no longer liable for the primary residence and the associated  
74.22 shelter costs.

75.1           **Subp. 5. Allowed shelter costs.**

75.2           A. When calculating an applicant's or a recipient's maximum monthly shelter  
75.3 benefit amount using the actual monthly shelter costs of the applicant's or recipient's primary  
75.4 residence, the commissioner must include the following costs:

75.5                   (1) base rent payments for the primary residence to include garage rental;

75.6                   (2) monthly rent for pets and onsite storage units at the primary residence if  
75.7 incurred before the date of application for subsistence;

75.8                   (3) the portion of ~~the~~ an applicant's or recipient's base rate at a ~~housing with~~  
75.9 ~~services establishment, as defined by Minnesota Statutes, section 144D.01, subdivision 4~~  
75.10 an assisted living facility, as defined by Minnesota Statutes, section 144G.08, subdivision  
75.11 7, that constitutes rent;

75.12                   (4) lot rent payments for a mobile or manufactured home;

75.13                   (5) primary mortgage payments, limited to principle, interest, and escrow  
75.14 payments;

75.15                   (6) home equity loan payments if the loan was taken before the date of  
75.16 application for subsistence to buy, build, restore, or maintain the habitability or accessibility  
75.17 of the primary residence;

75.18                   (7) contract-for-deed payments;

75.19                   (8) monthly housing association dues;

75.20                   (9) property taxes for the current year reduced to an average monthly amount;

75.21                   (10) monthly homeowners' insurance premiums;

75.22                   (11) monthly renters' insurance premiums; and

76.1 (12) amounts allocated for utilities if a fixed amount is ~~expressly~~ stated as  
76.2 part of the base rent in the lease agreement.

76.3 B. The commissioner must not include the following costs when calculating an  
76.4 applicant's or a recipient's shelter benefit:

76.5 (1) past due shelter costs and associated late charges and fees;

76.6 (2) ~~health-related and supportive services provided in a housing with services~~  
76.7 ~~contract~~ assisted living services, as defined by Minnesota Statutes, section 144G.08,  
76.8 subdivision 9, provided in an assisted living contract that are over and above the base rent  
76.9 for the primary residence;

76.10 ~~(3) additional services provided in a housing with services contract that are~~  
76.11 ~~over and above the base rent for the primary residence;~~

76.12 ~~(4)~~ (3) unsecured loans, or home equity loans that were taken after the date  
76.13 of application for subsistence;

76.14 ~~(5)~~ (4) home equity lines of credit, regardless of the reason for taking the  
76.15 line of credit; and

76.16 ~~(6)~~ (5) monthly fees for optional onsite services and privileges over and  
76.17 above the base rent for the primary residence that are not specifically included in this item  
76.18 B.

76.19 C. An applicant or a recipient must submit any of the following documents to the  
76.20 commissioner to prove the applicant or recipient or the applicant's or recipient's spouse is  
76.21 a lessee of the primary residence, or an owner of the primary residence and the property is  
76.22 homesteaded:

76.23 (1) a certificate of title;

76.24 (2) a deed;

- 77.1 (3) a current mortgage statement;
- 77.2 (4) the current year's property tax statement;
- 77.3 (5) a contract for deed; or
- 77.4 (6) a written standard residential lease agreement.

77.5 D. An applicant or a recipient who is currently leasing the primary residence but  
77.6 does not have a current lease agreement must complete execute a written standard residential  
77.7 lease agreement retroactively for that states the applicant's or recipient's actual shelter costs  
77.8 ~~to be used to establish the applicant's or recipient's maximum monthly shelter benefit amount.~~  
77.9 The commissioner must accept ~~lease agreements completed retroactively~~ the executed lease  
77.10 agreement signed by the applicant or recipient and the property owner or manager if the  
77.11 applicant or recipient ~~confirms a history of paying the stated amount to the current lessor~~  
77.12 provides proof to the commissioner of paying the actual shelter costs stated on the executed  
77.13 lease agreement in the 12 months before the date of application for subsistence.

77.14 E. An applicant or a recipient must ~~prove a history of paying the current shelter~~  
77.15 ~~cost amounts used to establish the maximum monthly shelter benefit amount~~ provide proof  
77.16 to the commissioner of paying the actual shelter costs stated on the executed lease agreement  
77.17 with any of the following documents:

- 77.18 (1) a statement from the ~~current landlord~~ property owner or manager;
- 77.19 (2) past rent receipts;
- 77.20 (3) cleared checks; ~~and~~ or
- 77.21 (4) other documentation that ~~confirms an applicant's or a recipient's history~~  
77.22 ~~of paying the stated shelter cost amounts~~ provides proof that an applicant or a recipient is  
77.23 paying the actual shelter costs.

78.1           **Subp. 6. Shelter subsidies.**

78.2           A. The commissioner must reduce an applicant's or a recipient's maximum monthly  
78.3 shelter benefit by the amount of any recurring shelter subsidy the applicant or recipient is  
78.4 receiving.

78.5           B. The commissioner must not reduce an applicant's or a recipient's maximum  
78.6 monthly shelter benefit by the amount of a nonrecurring shelter subsidy.

78.7           **Subp. 7. Changing residences.** A recipient may request to change primary residences  
78.8 while receiving subsistence. Actual shelter costs at the new residence must be used to  
78.9 calculate the maximum monthly shelter benefit if the provisions of subpart 4, item A, are  
78.10 met and the monthly shelter costs at the new residence do not exceed the costs at the previous  
78.11 residence.

78.12           **Subp. 8. Maximum monthly household income limits.**

78.13           A. An applicant's or a recipient's monthly household income is a determinant of  
78.14 eligibility for the subsistence program activity.

78.15           B. The commissioner must calculate the maximum monthly household income  
78.16 limit of an applicant or a recipient by adding the applicant's or recipient's maximum monthly  
78.17 cash benefit amount to the maximum monthly shelter benefit amount calculated according  
78.18 to subparts 4 and 5.

78.19           ~~**Example:** An applicant's or a recipient's maximum monthly cash benefit amount is~~  
78.20 ~~\$750, and the maximum monthly shelter benefit amount is \$2,000. The applicant's or~~  
78.21 ~~recipient's maximum monthly household income limit is \$2,750.~~

78.22           C. The commissioner must calculate an applicant's or a recipient's monthly  
78.23 household income before the first benefit period and before each subsequent benefit period  
78.24 according to part 9055.0300.

D. To be eligible for the first benefit period and each subsequent benefit period, the commissioner must certify that an applicant's or a recipient's monthly household income is under the maximum monthly household income limit.

**9055.0370 SUBSISTENCE ELIGIBILITY DETERMINATIONS.**

**Subpart 1. Eligibility for first benefit period.**

A. The commissioner must take the following actions to determine an applicant's eligibility for subsistence benefits for the first benefit period.

(1) The commissioner must confirm:

(a) the applicant is experiencing a documented medical condition that prevents the applicant from working at the applicant's current or most recent occupation for at least 30 days; or

(b) the date of application is within the 12 months after the veteran has passed away.

(2) The commissioner must calculate the applicant's household assets and monthly household income to determine eligibility for the first benefit period.

(3) The commissioner must exclude income received before the first benefit period through the end of the first benefit period from the monthly household income calculation if the income has ended due to the applicant's medical condition or a veteran's death.

B. An applicant's household assets and monthly household income must be less than the maximum household asset limit and maximum monthly household income limit to be eligible for the first benefit period.

80.1           **Subp. 2. Eligibility for subsequent benefit periods.**

80.2           A. A recipient of subsistence must make a request for subsistence benefits for the  
80.3 next benefit period to the commissioner through a county veterans service officer, department  
80.4 field operations claims representative, or department tribal veterans service officer.

80.5           B. A recipient must notify the commissioner in writing of:

- 80.6                   (1) any changes affecting the need for assistance;
- 80.7                   (2) any changes in the recipient's medical condition or employment status;
- 80.8                   (3) any changes in the household size or composition;
- 80.9                   (4) any changes in the recipient's shelter costs;
- 80.10                  (5) household assets at the end of the current benefit period;
- 80.11                  (6) household income received during the current benefit period; and
- 80.12                  (7) the status of pending applications for short- or long-term benefits the  
80.13 recipient ~~meets the requirements~~ has applied for and assistance from other agencies or  
80.14 ~~organizations~~ entities for which the recipient has applied.

80.15           C. A county veterans service officer, a department field operations claims  
80.16 representative, or a department tribal veterans service officer must submit a written  
80.17 recommendation to the commissioner for a recipient's next benefit period.

80.18           D. The commissioner must take the following actions to determine a recipient's  
80.19 eligibility for the next benefit period:

- 80.20                   (1) the commissioner must confirm reported changes in the recipient's medical  
80.21 condition or employment status;
- 80.22                   (2) the commissioner must ensure the recipient has applied for all ~~short-term~~  
80.23 ~~disability benefits and long-term maintenance benefits~~ ~~the recipient meets the requirements~~

81.1 ~~for long-term maintenance benefits and all short-term disability benefits under parts~~  
81.2 9055.0435, subparts 10, items A and B, and 11, items A and B; and 9055.0440, subpart 5,  
81.3 items A and B, and that an initial determination has not been rendered or benefits have not  
81.4 been paid by the responsible agency or organization entity responsible for administering  
81.5 the benefit; and

81.6 (3) the commissioner must recalculate the recipient's household assets at the  
81.7 end of the current benefit period and calculate the recipient's monthly household income  
81.8 received during the current benefit period to determine eligibility for the next benefit period.

81.9 E. The recipient's household assets at the end of the current benefit period and the  
81.10 recipient's monthly household income received during the current benefit period must be  
81.11 less than the recipient's maximum household asset limit and maximum monthly household  
81.12 income limit to be eligible for the next benefit period.

81.13 Subp. 3. **Applicants or recipients over income or asset limits.**

81.14 A. An applicant or a recipient is not eligible for subsistence if the applicant's or  
81.15 recipient's monthly household income or household assets are greater than or equal to the  
81.16 applicant's or recipient's maximum monthly household income limit or maximum household  
81.17 asset limit.

81.18 B. The commissioner must provide an applicant or a recipient over the maximum  
81.19 monthly household income limit or maximum household asset limit with an explanation of  
81.20 the following:

81.21 (1) how the applicant's or recipient's maximum monthly household income  
81.22 limit and maximum household asset limit are established; and

81.23 (2) how the applicant's or recipient's monthly household income and household  
81.24 assets were calculated.

C. An applicant or a recipient who is not eligible for assistance in the current benefit period is authorized to receive assistance in the next benefit period if the applicant's or recipient's monthly household income and household assets are less than the maximum limits.

D. The commissioner must close an applicant's or a recipient's subsistence if the applicant or recipient is not eligible for two consecutive benefit periods.

E. An applicant or a recipient who is over the maximum household asset limit may reduce household assets to become eligible for subsistence if the reduction is to meet the household's basic needs.

**9055.0380 MAXIMUM SUBSISTENCE BENEFIT AMOUNTS AND REDUCTIONS.**

Subpart 1. **Maximum subsistence authorized benefit amount.** The maximum subsistence benefit amount for a benefit period must be equal to an applicant's or a recipient's maximum monthly household income limit if the applicant's or recipient's monthly household income at the beginning of the benefit period is \$0.

~~**Example:** An applicant's maximum monthly cash benefit is \$750, and the maximum monthly shelter benefit is \$2,000. The applicant's maximum monthly household income limit is \$2,750.~~

~~If the applicant's monthly household income is \$0 at the beginning of the first benefit period, the maximum authorized benefit amount for the benefit period is \$2,750 distributed as a \$750 cash benefit and \$2,000 paid for shelter costs.~~

Subp. 2. **Determining benefit amounts for individual benefit periods.** The commissioner must calculate the benefit amount an applicant or a recipient is authorized to receive in a benefit period by reducing the maximum authorized benefit amount by the applicant's monthly household income calculated on the date of application for the first

benefit period or by the recipient's monthly household income received in the previous benefit period for subsequent benefit periods.

~~**Example:** A recipient's maximum monthly cash benefit is \$750, and the maximum monthly shelter benefit is \$2,000. The recipient's maximum monthly household income limit is \$2,750 and the maximum authorized benefit amount is \$2,750 provided the recipient's monthly household income received in the previous benefit period is \$0.~~

~~If the recipient's monthly household income received in the previous benefit period is \$500, the maximum authorized benefit amount for the next benefit period must be reduced dollar for dollar, starting with the maximum monthly cash benefit, by \$500 to an amount of \$2,250 distributed as a \$250 cash benefit and \$2,000 paid for shelter costs and expenses.~~

**9055.0390 SUBSISTENCE UTILITY AND HEALTH INSURANCE AND COBRA BENEFITS.**

A. For a recipient and members of the recipient's household if the recipient's benefit amount is greater than \$0, the commissioner must provide subsistence assistance for:

- (1) utility costs incurred at a recipient's primary residence; and
- (2) health insurance premiums or COBRA payments.

B. The commissioner must prorate benefit amounts for utility charges, health insurance premiums, and COBRA payments according to part 9055.0280, subpart 5, if the legal obligation to pay for these items is shared with a person who is not eligible to receive subsistence.

C. The commissioner must assign subsistence assistance for utility charges, health insurance premiums, and COBRA payments to a specific benefit period. Subsistence

84.1 assistance is limited to the current charges, applicable taxes, and other fees and charges  
84.2 ~~authorized by the commissioner~~ in the billing cycle.

84.3 D. Subsistence assistance with past due amounts, late charges, or fees incurred  
84.4 before the start of the first benefit period is prohibited.

84.5 E. The commissioner must provide subsistence assistance only for the amount  
84.6 due stated on a billing document if the amount due is less than the current charges, applicable  
84.7 taxes, and other authorized fees and charges for the billing cycle.

84.8 F. The commissioner must provide subsistence assistance for the monthly amount  
84.9 budgeted for utility charges, applicable taxes, and other authorized fees and charges due  
84.10 for a billing cycle that is assigned to a specific benefit period if a recipient is on a budget  
84.11 payment plan.

84.12 G. The commissioner must provide subsistence assistance for payments required  
84.13 to balance an account for utility charges that are due during a billing cycle that is assigned  
84.14 to a specific benefit period if a recipient is on a budget payment plan.

84.15 H. The commissioner must evenly distribute amounts due for utility charges,  
84.16 health insurance premiums, and COBRA payments with billing cycles longer than 30 days  
84.17 over the number of benefit periods covered by the billing cycle.

84.18 I. The commissioner ~~may~~ must assign utility charges, health insurance premiums,  
84.19 and COBRA payments to a benefit period if:

84.20 (1) the date of the billing documents falls within the benefit period;

84.21 (2) the payment due date falls within the benefit period; or

84.22 (3) any portion of the billing cycle, dates of service, or coverage period falls  
84.23 within the benefit period.

J. The commissioner ~~may~~ must provide subsistence assistance for multiple utility charges, health insurance premiums, and COBRA payments at once if each payment meets the requirements of this subpart and is assigned to a specific benefit period.

K. Billing documents that have been altered or tampered with must not be accepted for payment of utility charges, health insurance premiums, or COBRA payments.

L. The commissioner must not duplicate payments for utility charges, health insurance premiums, or COBRA payments if a recipient receives assistance from another ~~agency or organization~~ entity for the payments.

**9055.0395 SUBSISTENCE - NATURAL GAS, ELECTRICITY, TELEPHONE, AND INTERNET SERVICE.**

**Subpart 1. Natural gas and electricity service.**

A. The commissioner must provide ~~natural gas and electricity~~ subsistence assistance to eligible recipients for ~~fees and charges related to the following:~~ natural gas and electricity service.

~~A. charges for appliance maintenance or replacement plans that are part of a recipient's monthly natural gas or electric bill if the plan was in place before the application for subsistence; and~~

~~B. monthly charges for voluntary programs funding clean energy initiatives, energy conservation programs, and programs for low income energy assistance.~~

B. Subsistence benefits under this subpart are limited to:

(1) monthly recurring usage charges and fees for natural gas and electricity service established before the date of application for subsistence;

(2) charges for appliance maintenance or replacement plans that are part of a recipient's monthly natural gas or electric bill if the plan was in place before the date of application for subsistence; and

(3) monthly charges for voluntary programs funding clean energy initiatives, energy conservation programs, and programs for low-income energy assistance.

**Subp. 2. Telephone service.**

A. The commissioner must provide subsistence assistance to eligible recipients for either landline or cellular telephone service but not both.

B. Subsistence assistance under this subpart is limited to:

(1) monthly recurring service and usage charges and fees for telephone service that was established before the date of application for subsistence; and

(2) local, state, and federal taxes and surcharges for telephone service.

**Subp. 3. Internet service.**

A. The commissioner must provide subsistence assistance to eligible recipients for Internet service.

B. Subsistence under this ~~part~~ subpart is limited to:

(1) monthly recurring service charges and fees for Internet service that are established before the date of application for subsistence;

(2) Internet and voice equipment rental charges; and

(3) local, state, and federal taxes and fees for Internet service.

**9055.0400 SUBSISTENCE - BULK FUEL SERVICE.**

A. The commissioner must provide subsistence assistance to eligible recipients for bulk fuel service.

B. Bulk fuel deliveries must be authorized by the commissioner before delivery to the recipient's primary residence. The commissioner must determine the quantities approved based on the recipient's usage rates in the same months of the previous year.

C. The commissioner must authorize the minimum delivery quantity and equally distribute the amount over the number of past, current, or future benefit periods a recipient is eligible for if the quantity of bulk fuel calculated for a benefit period does not meet a vendor's minimum delivery requirements.

**9055.0405 SUBSISTENCE - WATER AND SEWER SERVICE.**

A. The commissioner must provide subsistence assistance to eligible recipients for municipal water and sewer services.

B. ~~Authorized fees and charges include all municipal service fees for~~ Benefits under this part are limited to:

(1) monthly recurring usage charges and fees for municipal water and sewer service established before the date of application for subsistence;

~~(1)~~ (2) fixed operational costs;

~~(2)~~ (3) infrastructure maintenance and system improvements;

~~(3)~~ (4) charges and fees associated with water softener systems that were installed before the date of application for subsistence;

~~(4)~~ (5) monthly charges for voluntary programs funding clean water initiatives and water conservation programs; and

~~(5)~~ (6) programs for low income assistance.

**9055.0410 SUBSISTENCE - SANITATION SERVICE.**

A. The commissioner must provide subsistence assistance to eligible recipients for sanitation services. ~~For purposes of this part, sanitation services include recurring charges~~

88.1 ~~for trash and recycling and nonrecurring charges for the removal of additional trash or large~~  
88.2 ~~unwanted items.~~

88.3 B. Benefits under this part are limited to:

88.4 (1) monthly recurring charges for trash and recycling; and

88.5 (2) nonrecurring charges for the removal of additional trash or large unwanted  
88.6 items.

88.7 **9055.0415 SUBSISTENCE - HEALTH INSURANCE AND COBRA BENEFITS.**

88.8 A. The commissioner must provide assistance with health insurance or COBRA  
88.9 benefits that have lapsed if the insurance carrier accepts payment to restore coverage.

88.10 B. Health insurance premiums automatically deducted from the earned or unearned  
88.11 income of an applicant or a recipient or an applicant's or a recipient's spouse must not be  
88.12 duplicated by the commissioner.

88.13 **9055.0420 SUBSISTENCE - SHELTER, UTILITIES, HEALTH INSURANCE, AND**  
88.14 **COBRA PAYMENTS.**

88.15 A. A recipient must submit to the commissioner receipts, invoices, billing  
88.16 statements, and shelter authorization forms, ~~and other documentation required~~ for the  
88.17 purposes of paying the recipient's shelter costs, utility charges, health insurance premiums,  
88.18 or COBRA payments.

88.19 B. The commissioner must make payments for shelter costs, utility charges, health  
88.20 insurance premiums, and COBRA benefits directly to the entities to which payment is due.

88.21 ~~B.~~ C. Documents submitted to the commissioner for payment of shelter costs,  
88.22 utility charges, health insurance premiums, or COBRA payments must confirm:

88.23 (1) the address of the property where the shelter costs and the utility charges  
88.24 are incurred, and the property is the recipient's primary residence;

89.1 (2) the recipient or recipient's spouse is an owner or lessee of the primary  
89.2 residence and is legally responsible for payment of the shelter costs and the utility charges  
89.3 at the residence;

89.4 (3) all shelter costs, utility charges and fees, taxes and surcharges, the date  
89.5 of the billing document, the payment due date, the dates of service, and the dates of the  
89.6 billing period;

89.7 (4) the shelter and utility vendors' names, addresses, payment addresses if  
89.8 different, and phone numbers;

89.9 (5) the health insurance premium or COBRA payment amount, the date of  
89.10 the billing document, the payment due date, and the dates of the coverage period; and

89.11 (6) the health insurance carrier's or the COBRA administrator's name, address,  
89.12 payment address if different, and phone number; ~~and.~~

89.13 ~~(7) other information that may be necessary to meet Minnesota Management~~  
89.14 ~~and Budget requirements.~~

89.15 **9055.0430 SUBSISTENCE - OVERPAYMENT STATUS.**

89.16 A. An individual receiving subsistence assistance benefits in an amount greater  
89.17 than what is authorized for a benefit period is in overpayment status.

89.18 B. If the overpayment is a result of a preceding benefit period, the commissioner  
89.19 ~~may~~ must correct the overpayment by withholding or reducing the benefits of future benefit  
89.20 periods under the current application.

89.21 C. A recipient in overpayment status is barred from receiving future benefits from  
89.22 any state soldiers' assistance program activity until the overpayment is corrected.

89.23 D. Denying or reducing benefits that a person would be eligible for under future  
89.24 applications does not correct an overpayment.

90.1 **9055.0435 STATE SOLDIERS' ASSISTANCE PROGRAM SUBSISTENCE - BASED**  
90.2 **ON MEDICAL CONDITION.**

90.3 Subpart 1. **Applicant requirements.**

90.4 A. An applicant for subsistence under this part must be:

90.5 (1) a veteran experiencing a medical condition that prevents the veteran from  
90.6 working at the veteran's current or most recent occupation for at least 30 days; or

90.7 (2) a surviving spouse of a veteran experiencing a medical condition that  
90.8 prevents the surviving spouse from working at the surviving spouse's current or most recent  
90.9 occupation for at least 30 days.

90.10 B. An applicant for subsistence under this part must meet the requirements of this  
90.11 part and parts 9055.0350 to 9055.0430.

90.12 C. Parts 9055.0350 to 9055.0435 apply only to subsistence based on an applicant's  
90.13 medical condition.

90.14 Subp. 2. **Medical conditions.**

90.15 A. An applicant must provide to the commissioner documentation of a medical  
90.16 condition from one of the following licensed medical providers to be eligible for subsistence  
90.17 under this part:

90.18 (1) doctors of medicine (MDs);

90.19 (2) physicians assistants;

90.20 (3) nurse practitioners;

90.21 (4) psychiatrists;

90.22 (5) psychologists;

90.23 (6) doctors of osteopathic medicine (DOs);

91.1 (7) doctors of chiropractic; or

91.2 (8) any other medical provider designated by the commissioner and licensed  
91.3 by the state.

91.4 B. A licensed medical provider must determine if an applicant's medical condition  
91.5 in its current state is acute or chronic and that the effects of the medical condition prevent  
91.6 the applicant from working in the applicant's current or most recent occupation for at least  
91.7 30 days.

91.8 C. The commissioner must consider multiple documented medical conditions to  
91.9 be equal in duration and independently preventing an applicant from working in the  
91.10 applicant's current or most recent occupation unless stated otherwise by the medical provider.

91.11 ~~Example: Medical documentation submitted to the commissioner states an applicant~~  
91.12 ~~is experiencing three different medical conditions and is expected to be fit to work in~~  
91.13 ~~the applicant's current or most recent occupation in 60 days.~~

91.14 ~~The commissioner considers all three medical conditions to be preventing the applicant~~  
91.15 ~~from working for 60 days unless the medical provider states otherwise.~~

91.16 ~~At the end of 60 days the person has received two 30-day benefit periods for all three~~  
91.17 ~~conditions.~~

91.18 Subp. 3. **Medical documentation.**

91.19 A. An applicant for benefits under this part must submit to the commissioner the  
91.20 required medical documentation as described under either item B or C. The medical  
91.21 documentation must be completed by a licensed medical provider.

91.22 B. Medical documentation must confirm the following for each medical condition  
91.23 the applicant is experiencing:

91.24 (1) the underlying diagnoses, illnesses, injuries, and physical findings;

- 92.1 (2) whether the medical condition is chronic or acute;
- 92.2 (3) the date of onset of the medical condition;
- 92.3 (4) whether the medical condition prevents the applicant from working in the
- 92.4 applicant's current or most recent occupation for at least 30 days;
- 92.5 (5) how long the medical condition is expected to last and when the applicant
- 92.6 is expected be fit for work in the applicant's current or most recent occupation;
- 92.7 (6) whether the applicant is following a prescribed treatment plan;
- 92.8 (7) whether the applicant was or is hospitalized or is in an in-patient treatment
- 92.9 program and any future appointment dates;
- 92.10 (8) whether the applicant's medical condition is the result of an accident or
- 92.11 injury covered by insurance or worker's compensation; and
- 92.12 (9) the medical provider's name, credentials, and signature, and the clinic
- 92.13 name, address, telephone number, and the date the documentation was completed.

92.14 C. An applicant may submit medical documentation that does not meet all

92.15 requirements of item B and a determination of eligibility ~~may~~ must be made for the first

92.16 benefit period if the applicant is in need of immediate financial assistance to meet the

92.17 applicant's basic needs. At a minimum, the medical documentation must confirm:

- 92.18 (1) the underlying diagnosis, illness, injury, and physical findings; and
- 92.19 (2) if the medical condition prevents the applicant from working at the
- 92.20 applicant's current or most recent occupation for at least 30 days.

92.21 Medical documentation meeting the requirements of item B must be submitted to the

92.22 commissioner before the second benefit period is issued.

Subp. 4. **Benefit periods.**

A. An applicant must be experiencing a medical condition that prevents the applicant from working at the applicant's current or most recent occupation for at least 30 days to be eligible for the first benefit period.

B. The commissioner must calculate the number of additional benefit periods by dividing the number of days until the recipient is fit to work in the recipient's current or most recent occupation by 30 and rounding the result up to the next whole number.

~~**Example:** Current medical documentation confirms a recipient is expected to be fit to work in the recipient's current or most recent occupation in 75 days: 75 divided by 30 equals 2.5 rounded up to three. The recipient is authorized to receive three benefit periods based on the current medical condition.~~

C. Subsistence under this part is limited to six benefit periods under a single application for subsistence unless additional benefit periods are approved by the commissioner. ~~Additional benefit periods may be approved under the following conditions~~ under Minnesota Statutes, section 197.05, paragraph (a), and either of the following conditions are met:

(1) a recipient has applied for all ~~short-term disability benefits and long-term maintenance benefits~~ the recipient meets the requirements for and short-term disability benefits under subparts 10, items A and B, and 11, items A and B, and an initial determination has not been rendered or benefits have not been paid by the ~~responsible agency or organization~~ entity responsible for administering the benefit; or

(2) a recipient is expected to be fit to work in the recipient's current or most recent occupation, but the recipient requires additional benefit periods before being cleared by a medical provider to return to work.

94.1 Subp. 5. **Start of subsistence.** The commissioner must begin a recipient's benefit  
94.2 periods on one of the following dates if all other eligibility requirements have been met:

94.3 A. the date the recipient stopped working due to a documented medical condition  
94.4 if it is 30 days or less before the completion of the medical documentation and the medical  
94.5 documentation is completed 30 days or less before the date of application;

94.6 B. the date of the medical documentation if it is completed 30 days or less before  
94.7 the date of application;

94.8 C. the date of application; or

94.9 D. the earliest date after the date of application when all eligibility requirements  
94.10 have been met.

94.11 Subp. 6. **Program limits.**

94.12 A. Subsistence under this part is prohibited for a chronic medical condition that  
94.13 existed before or at the same time as a medical condition an applicant previously received  
94.14 subsistence for unless the applicant experienced a documented injury in the 30 days before  
94.15 the date of application causing an acute episode of the condition.

94.16 ~~**Example:** Medical documentation confirms an applicant is experiencing a neck~~  
94.17 ~~condition that prevents working in the applicant's current or most recent occupation~~  
94.18 ~~for 90 days. The applicant is eligible for three benefit periods for the neck condition~~  
94.19 ~~under the current medical documentation.~~

94.20 ~~After the third benefit period for the neck condition the applicant is not eligible to~~  
94.21 ~~receive subsistence for a chronic shoulder condition that existed before or at the same~~  
94.22 ~~time as the neck condition unless in the 30 days before the date of application the~~  
94.23 ~~applicant experienced a documented injury causing an acute episode of the shoulder~~  
94.24 ~~condition.~~

B. Subsistence under this part is limited to not more than a cumulative total of six benefit periods for the same medical condition in a person's lifetime unless additional benefit periods are approved by the commissioner under subpart 4, item C.

~~**Example:** Medical documentation confirms an applicant is experiencing a back condition that is preventing the applicant from working in the applicant's current or most recent occupation for 60 days. The applicant is authorized to receive two benefit periods due to the back condition under the current application for subsistence.~~

~~After the second benefit period for the back condition the applicant is limited to four additional benefit periods for a cumulative total of six benefit periods for the back condition in the applicant's lifetime unless additional benefit periods are approved by the commissioner.~~

Subp. 7. **Long-term disability benefits.** An applicant who is receiving a long-term disability benefit is not eligible for subsistence under this part.

Subp. 8. **Minnesota unemployment insurance.** An applicant who is receiving benefits from the Minnesota unemployment insurance program, administered by the Department of Employment and Economic Development (DEED) is not eligible for subsistence under this part.

Subp. 9. **Work and earnings requirements.**

A. An applicant must meet the following work and earnings requirements to be eligible for subsistence under this part:

(1) the applicant last worked in the 12 months before the date of application for subsistence; and

(2) the applicant's earnings in the 12 months before having last worked were enough to earn four Social Security credits.

96.1 ~~**Example:** In 2019 a person earned one Social Security credit for every \$1,360 in~~  
96.2 ~~earnings.~~

96.3 ~~An applicant for subsistence who last worked in 2019 must have worked in the 12~~  
96.4 ~~months before the date of application and earned at least \$5,440 in the 12 months before~~  
96.5 ~~having last worked.~~

96.6 B. An applicant who has worked in the 12 months before the date of application  
96.7 for subsistence under this part, but did not earn enough in the 12 months before having last  
96.8 worked, must meet the following conditions to be eligible for subsistence under this part:

96.9 (1) the applicant last worked in the 30 days before the date of application;

96.10 and

96.11 (2) the applicant stopped working due to the applicant's medical condition.

96.12 C. An applicant who has not worked in the 12 months before the date of application  
96.13 must have to previously received workers' compensation and the workers' compensation  
96.14 ended in the 12 months before the date of application.

96.15 D. An applicant experiencing concurrent acute medical conditions is not required  
96.16 to meet the work and earnings requirements of this part under the following conditions:

96.17 (1) simultaneous treatment of each medical condition is not feasible; and

96.18 (2) the time between treating each condition is less than 30 days between  
96.19 recovery periods.

96.20 ~~**Example:** Medical documentation confirms an applicant requires bi-lateral knee surgery~~  
96.21 ~~and the expected recovery time is six months for each knee.~~

96.22 ~~The knee conditions are concurrent, and simultaneous bi-lateral knee surgery is not~~  
96.23 ~~feasible.~~

97.1 ~~The applicant must only meet the work requirements of this part under the application~~  
97.2 ~~for the first knee surgery and not for the second if the second knee surgery takes place~~  
97.3 ~~less than 30 days after the recovery period for the first knee surgery.~~

97.4 E. For the purposes of this part, an applicant who is a veteran and who is a member  
97.5 of the National Guard or another reserve component of the United States armed forces does  
97.6 not meet the minimum work requirement if the only work performed in the 12 months before  
97.7 the date of application is attendance at monthly unit training assemblies and the 15 days of  
97.8 required annual training. This provision applies regardless of the applicant's earnings.

97.9 F. For the purposes of this part, an applicant who is a veteran and who is a member  
97.10 of the National Guard or another reserve component of the United States armed forces and  
97.11 who was ordered to active duty or active duty for training in addition to the 15 days of  
97.12 required annual training, in the 12 months before the date of application meets the minimum  
97.13 work requirement if the applicant's earnings were enough to earn four Social Security credits.

97.14 **Subp. 10. Long-term maintenance benefits.**

97.15 A. A recipient of subsistence under this part must apply for all long-term  
97.16 maintenance benefits the recipient ~~meets the requirements~~ is eligible to apply for if the  
97.17 recipient's medical condition is expected to prevent the recipient from working in the  
97.18 recipient's current or most recent occupation for 180 days or longer.

97.19 B. A recipient of subsistence under this part must submit proof to the commissioner  
97.20 of application for a long-term maintenance benefit required under item A before receiving  
97.21 the second benefit period.

97.22 C. The commissioner ~~may~~ must suspend subsistence under this part after the first  
97.23 benefit period if a recipient has not applied for a long-term maintenance benefit required  
97.24 under items A and B. ~~Subsistence under this part must be closed~~ The commissioner must

98.1 close subsistence under this part 30 days after the end of the first benefit period if the  
98.2 recipient has not applied for a long-term maintenance benefit.

98.3 D. An applicant or a recipient ~~may receive~~ is eligible for subsistence under this  
98.4 part while waiting on an initial determination of eligibility or receipt of payment of a  
98.5 long-term maintenance benefit from the ~~agency or organization~~ entity administering the  
98.6 benefit.

98.7 E. An applicant already receiving a long-term maintenance benefit, with the  
98.8 exception of a long-term disability benefit, ~~may receive~~ is eligible for subsistence under  
98.9 this part if the applicant meets the work requirements of subpart 9 and is under the maximum  
98.10 monthly household income limit and maximum household asset limit.

98.11 F. A recipient approved for a long-term maintenance benefit, with the exception  
98.12 of a long-term disability benefit, ~~may receive the benefit in conjunction with subsistence~~  
98.13 ~~under this part,~~ remains eligible for subsistence under this part if the recipient ~~remains under~~  
98.14 ~~the maximum monthly household income limit and maximum household asset limit~~ continues  
98.15 to meet the requirements of this part.

98.16 G. A recipient of subsistence under this part whose medical condition is service  
98.17 connected through the United States Department of Veterans Affairs must apply for:

98.18 (1) an increase in the current disability rating of the condition;<sup>2</sup> or

98.19 (2) a temporary 100 percent disability rating if the medical condition is  
98.20 expected to prevent the recipient from working in the recipient's current or most recent  
98.21 occupation for 180 days or longer.

98.22 **Subp. 11. Short-term disability benefits.**

98.23 A. A recipient of subsistence under this part must apply for all short-term disability  
98.24 benefits the recipient is ~~currently enrolled in~~ eligible to apply for, regardless of the expected  
98.25 duration of the recipient's medical condition.

99.1 B. A recipient of subsistence under this part must submit proof to the commissioner  
99.2 of application for short-term disability benefits required under item A before receiving the  
99.3 second benefit period.

99.4 C. The commissioner ~~may~~ must suspend subsistence under this part after the first  
99.5 benefit period if a recipient has not applied for short-term disability benefits required under  
99.6 items A and B. The commissioner must close subsistence under this part 30 days after the  
99.7 end of the first benefit period if the recipient has not applied for short-term disability benefits.

99.8 D. An applicant or a recipient ~~may receive~~ is eligible for subsistence under this  
99.9 part while waiting on an initial determination of eligibility or receipt of payment of a  
99.10 short-term disability benefit from the ~~agency or organization~~ entity administering the benefit.

99.11 E. An applicant already receiving a short-term disability benefit ~~may receive~~ is  
99.12 eligible for subsistence under this part ~~if the applicant meets the work requirements of~~  
99.13 ~~subpart 9 and is under the maximum monthly household income limit and maximum~~  
99.14 ~~household asset limit~~.

99.15 F. A recipient approved for a short-term disability benefit ~~may receive the benefit~~  
99.16 ~~in conjunction with subsistence under this part,~~ remains eligible for subsistence under this  
99.17 part if the recipient ~~remains under the maximum monthly household income limit and~~  
99.18 ~~maximum household asset limit~~ continues to meet the requirements of this part.

99.19 Subp. 12. **Use of available income and other payroll.**

99.20 A. ~~An applicant for or~~ A recipient of subsistence under this part must use accrued  
99.21 paid time off, vacation time, and sick time available from the ~~applicant's or~~ recipient's current  
99.22 or most recent employer regardless of the expected duration of the ~~applicant's or~~ recipient's  
99.23 medical condition.

99.24 B. ~~An applicant or~~ A recipient must submit to the commissioner documentation  
99.25 from the ~~applicant's or~~ recipient's current or most recent employer that confirms the ~~applicant~~

100.1 ~~or~~ recipient is using the available paid time off, vacation time, or sick time required under  
100.2 item A before receiving the second benefit period.

100.3 C. ~~A recipient may use available paid time off, vacation time, or sick time in~~  
100.4 ~~conjunction with subsistence under this part, if the recipient remains under the maximum~~  
100.5 ~~monthly household income limit and maximum household asset limit. The commissioner~~  
100.6 must suspend subsistence under this part after the first benefit period if a recipient has not  
100.7 applied for use of accrued paid time off, vacation time, and sick time as required under  
100.8 items A and B. The commissioner must close subsistence under this part 30 days after the  
100.9 end of the first benefit period if the recipient has not applied for use of accrued paid time  
100.10 off, vacation time, and sick time.

100.11 D. A recipient who receives income from accrued paid time off, vacation time,  
100.12 or sick time is eligible for subsistence under this part if the recipient continues to meet the  
100.13 requirements of this part.

100.14 Subp. 13. **Compensated work therapy.** For purposes of this part, an applicant  
100.15 completing inpatient treatment and beginning compensated work therapy through the United  
100.16 States Department of Veterans Affairs is not considered to have returned to work or resumed  
100.17 employment. Earnings from compensated work therapy in excess of \$50 per benefit period  
100.18 are considered income and must be reported to the commissioner.

100.19 Subp. 14. **Light duty, limited hours, or work with restrictions.** An applicant or a  
100.20 recipient who is able to work at the applicant's or recipient's current or most recent occupation  
100.21 in a light duty capacity, or with reduced hours or with restrictions, is not eligible for  
100.22 subsistence under this part unless the applicant or recipient submits documentation from  
100.23 the employer confirming the employer will not accommodate the light duty requirements,  
100.24 reduced hours, or restrictions.

101.1 Subp. 15. **Return to work, resumption of employment or self-employment.**

101.2 A. For purposes of this part, a recipient who returns to work in any occupation  
101.3 and capacity whether employed, self-employed, part-time, or full-time is not eligible for  
101.4 subsistence under this part beyond the current benefit period.

101.5 B. For purposes of this part, a recipient who is a veteran and who is a member of  
101.6 the National Guard or another reserve component of the United States armed forces may  
101.7 attend all required unit training assemblies and up to 15 days of required annual training  
101.8 and not be considered to have returned to work or resumed employment. A recipient who  
101.9 is a veteran and who is ordered to active duty or active duty for training that exceeds the  
101.10 15 days of required annual training is considered to have returned to work.

101.11 Subp. 16. **Termination of benefits.** The commissioner must close subsistence under  
101.12 this part under any of the following conditions:

101.13 A. the recipient's medical provider has prescribed a treatment plan, and the provider  
101.14 confirms the recipient is not following the treatment plan;

101.15 B. the recipient has received the number of benefit periods authorized by the  
101.16 medical documentation, plus any additional periods approved by the commissioner under  
101.17 subpart 4, item C;

101.18 C. the recipient returns to the workforce in any occupation or capacity;

101.19 D. the recipient begins receiving a long-term disability benefit; or

101.20 E. the recipient is ~~over the maximum monthly household income limit or maximum~~  
101.21 ~~household asset limit~~ no longer meets the requirements of this part.

102.1 **9055.0440 STATE SOLDIERS' ASSISTANCE PROGRAM - DUE TO DEATH OF**  
102.2 **A VETERAN.**

102.3 Subpart 1. **Applicant requirements.**

102.4 A. ~~A surviving spouse of a veteran is eligible to apply for subsistence benefits as~~  
102.5 ~~provided under this part.~~ An applicant for subsistence under this part must be a surviving  
102.6 spouse of a veteran.

102.7 B. To receive subsistence benefits under this part, a surviving spouse ~~of a deceased~~  
102.8 ~~veteran~~ must apply for subsistence within 12 months after the veteran's death.

102.9 C. To receive subsistence benefits under this part, a surviving spouse must meet  
102.10 the requirements of this part and parts 9055.0350 to 9055.0440, but excluding part 9055.0435,  
102.11 9055.0430.

102.12 D. This part and parts 9055.0350 to 9055.0440, but excluding part 9055.0435,  
102.13 9055.0430 apply only to subsistence benefits based on a veteran's death.

102.14 Subp. 2. **Residency requirement.** A deceased veteran must have met the residency  
102.15 requirements of Minnesota Statutes, section 197.05, paragraph (b), for the veteran's  
102.16 dependents to be eligible for subsistence benefits under this part.

102.17 Subp. 3. **Benefit periods.** Subsistence benefits under this part are limited to six benefit  
102.18 periods unless:

102.19 A. additional benefit periods are approved by the commissioner. ~~Additional benefit~~  
102.20 ~~periods may be approved by the commissioner if the surviving spouse has applied for all~~  
102.21 ~~long-term maintenance benefits the surviving spouse meets the requirements for, and an~~  
102.22 ~~initial determination has not been rendered or benefits have not been paid by the responsible~~  
102.23 ~~agency or organization.~~ under Minnesota Statutes, section 197.05, paragraph (a);

102.24 B. the surviving spouse has applied for all long-term maintenance benefits the  
102.25 surviving spouse is eligible to apply for as required in subpart 5, items A and B; and

103.1 C. an initial determination has not been rendered or benefits have not been paid  
103.2 by the entity administering the benefit.

103.3 Subp. 4. **Start of subsistence.** The commissioner must begin a surviving spouse's  
103.4 benefit periods under this part on one of the following dates if all other eligibility  
103.5 requirements have been met:

103.6 A. the date the veteran passed away if it is 30 days or less before the date of  
103.7 application;

103.8 B. the date of application; or

103.9 C. the earliest date after the date of application when all eligibility requirements  
103.10 have been met.

103.11 Subp. 5. **Long-term maintenance benefits.**

103.12 A. A surviving spouse must apply for:

103.13 (1) an increase in any long-term maintenance benefit the surviving spouse is  
103.14 currently receiving; and

103.15 (2) all long-term maintenance benefits for which the surviving spouse is  
103.16 eligible to apply.

103.17 B. A surviving spouse must submit to the commissioner proof of application for  
103.18 long-term maintenance benefits as required in item A before receiving the second benefit  
103.19 period.

103.20 C. The commissioner ~~may~~ must suspend subsistence benefits under this part after  
103.21 the first benefit period if the surviving spouse ~~does not apply~~ has not applied for long-term  
103.22 maintenance benefits as required in ~~item~~ items A and B. The commissioner must close  
103.23 subsistence benefits under this part 30 days after the end of the first benefit period ~~ended~~ if  
103.24 the surviving spouse has not applied for long-term maintenance benefits as required.

104.1 D. A surviving spouse ~~may receive~~ is eligible for subsistence benefits under this  
104.2 part while waiting on an increase in a long-term maintenance benefit the surviving spouse  
104.3 currently receives or an initial determination of eligibility and receipt of payment of a  
104.4 long-term maintenance benefit the surviving spouse has applied for from the ~~agency or~~  
104.5 ~~organization~~ entity administering the benefit.

104.6 E. A surviving spouse already receiving a long-term maintenance benefit that is  
104.7 not affiliated with the ~~deceased~~ veteran ~~may receive~~ is eligible for subsistence benefits under  
104.8 this part ~~if the surviving spouse is under the maximum monthly household income limit~~  
104.9 ~~and maximum household asset limit.~~

104.10 F. If a surviving spouse is approved for an increase in a long-term maintenance  
104.11 benefit the surviving spouse is already receiving and the increase is not due to the veteran's  
104.12 death, the surviving spouse remains eligible for subsistence under this part if the surviving  
104.13 spouse continues to meet the requirements of this part.

104.14 Subp. 6. **Termination of benefits.** The commissioner must close subsistence under  
104.15 this part under any the following conditions:

104.16 A. the surviving spouse has received six benefit periods plus any additional periods  
104.17 approved by the commissioner under subpart 3;

104.18 B. the surviving spouse begins receiving a long-term maintenance benefit the  
104.19 surviving spouse was not receiving at the time of veteran's death;

104.20 C. the surviving spouse receives an increase in a long-term maintenance benefit  
104.21 the surviving spouse ~~was~~ is already receiving, and the increase is due to the veteran's death;  
104.22 or

104.23 D. the surviving spouse ~~is over maximum monthly household income limit and~~  
104.24 ~~maximum household asset limit~~ no longer meets the requirements of this part.

105.1 **9055.0445 STATE SOLDIERS' ASSISTANCE PROGRAM VETERANS'**  
105.2 **EDUCATION BENEFITS.**

105.3 Subpart 1. **Definitions.**

105.4 A. For the purpose of this part, "eligible veteran" means a veteran as defined by  
105.5 Minnesota Statutes, section 197.447, who meets the requirements of Minnesota Statutes,  
105.6 section 197.75, subdivision 1, paragraph (g), ~~items~~ clauses (1) to (4), and who has not earned  
105.7 a bachelor's degree or equivalent.

105.8 B. For the purpose of this part, "eligible institution" means a postsecondary  
105.9 educational institution meeting the requirements of Minnesota Statutes, section 197.75,  
105.10 subdivision 1, paragraph (e).

105.11 Subp. 2. **Program purpose.**

105.12 A. Upon application approval, the commissioner must provide educational  
105.13 assistance to an eligible veteran who is attending an eligible institution.

105.14 B. To qualify for education benefits under this part, an applicant for education  
105.15 benefits must meet the requirements of this part and be an eligible veteran as defined in  
105.16 subpart 1.

105.17 C. An eligible veteran who has already attained a bachelor's or equivalent degree  
105.18 is not eligible for education benefits under this part.

105.19 D. This part applies only to the veterans' education program activity.

105.20 Subp. 3. **Benefits provided.** The benefit provided under this part is limited to a single  
105.21 payment for tuition in an amount up to \$750 paid by the commissioner to an eligible  
105.22 institution or reimbursed to an eligible veteran.

106.1       **Subp. 4. Application for veteran education benefits.**

106.2           A. The commissioner must issue the education benefit to an eligible veteran as a  
106.3 onetime benefit.

106.4           B. To be eligible for benefits under this part, an eligible veteran must submit a  
106.5 completed application and the required supporting documentation to the commissioner  
106.6 before the final day of the term or semester for which the eligible veteran is requesting  
106.7 benefits.

106.8           C. Payment is prohibited for a term or semester ending before the commissioner  
106.9 receives a completed application and supporting documentation ~~unless approved by the~~  
106.10 ~~commissioner.~~

106.11       **Subp. 5. Veteran education authorization letter.**

106.12           A. The commissioner must issue an education authorization letter to an eligible  
106.13 veteran approved for education benefits under this part. The commissioner must issue only  
106.14 one education authorization letter to an eligible veteran.

106.15           B. The education authorization letter must confirm the eligible veteran is approved  
106.16 for education benefits in the form of a onetime payment for tuition to the eligible institution  
106.17 stated on the authorization letter or reimbursement for tuition the eligible veteran paid to  
106.18 the eligible institution stated on the authorization letter.

106.19           C. An education authorization letter is valid only for the eligible institution stated  
106.20 on the authorization letter.

106.21       **Subp. 6. Veteran education denial letter.**

106.22           A. The commissioner must issue a veteran education denial letter to a veteran  
106.23 who is denied education benefits under this part.

107.1 B. A veteran education denial letter must explain the reasons for denial and the  
107.2 veteran's right to appeal under part 9055.0290, subpart 8.

107.3 Subp. 7. **Veteran education payments.**

107.4 A. To receive education payments under this part, an eligible institution must  
107.5 submit documentation to the commissioner with its request for payment of the eligible  
107.6 veteran's tuition.

107.7 B. The eligible veteran must submit documentation to the commissioner with the  
107.8 request for reimbursement for tuition paid to the eligible institution.

107.9 C. The commissioner must make reimbursements or payments for tuition directly  
107.10 to a veteran or eligible institution.

107.11 ~~E.~~ D. Documentation submitted for payment or reimbursement of tuition must  
107.12 confirm the following:

107.13 (1) the eligible veteran's name;

107.14 (2) the amount requested for payment or reimbursement of tuition;

107.15 (3) the name and payment address of the eligible institution the eligible veteran  
107.16 is attending;

107.17 (4) the start and end date of the term or semester for which benefits are being  
107.18 requested;

107.19 (5) the eligible veteran attended the institution stated on the education  
107.20 authorization letter during the term or semester for which tuition is being requested; and

107.21 (6) the eligible veteran attended and paid tuition to the eligible institution  
107.22 stated on the education authorization letter for the term or semester, if reimbursement for  
107.23 tuition paid is requested; ~~and.~~

108.1 ~~(7) other information that may be necessary to meet Minnesota Management~~  
108.2 ~~and Budget requirements.~~

108.3 **9055.0450 STATE SOLDIERS' ASSISTANCE PROGRAM SURVIVING CHILDREN**  
108.4 **AND SPOUSES EDUCATION BENEFITS.**

108.5 Subpart 1. **Definitions.**

108.6 A. For the purposes of this part, "deceased veteran" means a veteran as defined  
108.7 by Minnesota Statutes, section 197.447, who meets the requirements of Minnesota Statutes,  
108.8 section 197.75, subdivision 1, paragraph (c).

108.9 B. For the purposes of this part, "eligible child," means a person defined by  
108.10 Minnesota Statutes, section 197.75, subdivision 1, paragraph (d), ~~items~~ clauses (1) and (2),  
108.11 and who otherwise meets the requirements of this part.

108.12 C. For the purposes of this part, "eligible institution" means an educational  
108.13 institution meeting the requirements of Minnesota Statutes, section 197.75, subdivision 1,  
108.14 paragraph (e).

108.15 D. For the purposes of this part, "eligible spouse" means a person defined by  
108.16 Minnesota Statutes, section 197.75, subdivision 1, paragraph (f), who was legally married,  
108.17 as recognized by the state of Minnesota, to a deceased veteran at the time of the deceased  
108.18 veteran's death and who has not remarried and who otherwise meets the requirements of  
108.19 this part.

108.20 Subp. 2. **Program purpose.**

108.21 A. Upon application approval, the commissioner must provide educational  
108.22 assistance to an eligible child or an eligible spouse of a deceased veteran. An eligible child  
108.23 or eligible spouse must be attending an eligible institution.

108.24 B. An applicant for education benefits must meet the requirements of this part  
108.25 and be an eligible child or eligible spouse as defined in subpart 1.

109.1 C. This part applies only to the surviving children and spouses education program  
109.2 activity.

109.3 Subp. 3. **Eligible children and spouses.**

109.4 A. A spouse of a deceased veteran who has remarried is not eligible for education  
109.5 benefits under this part.

109.6 B. An eligible child of a deceased veteran who is a stepchild must have acquired  
109.7 the status of a stepchild before the age of 18 years and been a member of the veteran's  
109.8 household at the time of the veteran's death to be eligible for education benefits under this  
109.9 part.

109.10 C. An eligible child of a deceased veteran who is adopted must have been legally  
109.11 adopted before the age of 18 years to be eligible for education benefits under this part.

109.12 D. An eligible child of a deceased veteran who is married is eligible for education  
109.13 benefits under this part.

109.14 E. An eligible child or eligible spouse who has already attained a bachelor's or  
109.15 equivalent degree is not eligible for education benefits under this part.

109.16 Subp. 4. **Frequency and application for surviving children and spouses education**  
109.17 **benefits.**

109.18 A. The commissioner must issue education benefits to an eligible child or eligible  
109.19 spouse as a once-per-fiscal year benefit.

109.20 B. To be eligible for benefits under this part, an eligible child or eligible spouse  
109.21 must submit a completed application and the required supporting documentation to the  
109.22 commissioner between July 1 up to and including June 30 of the fiscal year the eligible  
109.23 child or eligible spouse is requesting benefits for.

110.1 C. Payment is prohibited for a term or semester that began and ended in a fiscal  
110.2 year for which there was not an application and supporting documentation submitted ~~unless~~  
110.3 ~~approved by~~ to the commissioner.

110.4 Subp. 5. **Benefits provided.**

110.5 A. Benefits provided under this part are limited to:

110.6 (1) up to a \$750 stipend per fiscal year paid to an eligible institution or  
110.7 reimbursed to an eligible child or eligible spouse for tuition, fees, room and board, books,  
110.8 and supplies; and

110.9 (2) a waiver of tuition at all Minnesota public eligible institutions for an  
110.10 eligible child or eligible spouse until the eligible child or eligible spouse attains a bachelor's  
110.11 or equivalent degree.

110.12 B. An eligible child or eligible spouse who is not attending a Minnesota public  
110.13 eligible institution is not eligible for a waiver of tuition but ~~may receive~~ is eligible for the  
110.14 \$750 stipend per fiscal year for tuition, fees, room and board, books, and supplies.

110.15 Subp. 6. **Surviving children and spouses education authorization letter.**

110.16 A. The commissioner must issue an education authorization letter to each eligible  
110.17 child and eligible spouse receiving education benefits.

110.18 B. The education authorization letter must confirm the eligible child or eligible  
110.19 spouse is approved for benefits and is eligible for waiver of tuition if attending a Minnesota  
110.20 public eligible institution, and the final day of the fiscal year covered by the authorization  
110.21 letter.

110.22 C. The education authorization letter is valid only at the education institution  
110.23 indicated on the authorization letter.

111.1 D. The commissioner must issue only one education authorization letter per fiscal  
111.2 year to an eligible child or eligible spouse unless the eligible child or eligible spouse submits  
111.3 documentation to the commissioner that confirms attendance at multiple eligible institutions  
111.4 is required to continue in a chosen degree program.

111.5 E. An eligible child or eligible spouse who is attending more than one eligible  
111.6 institution ~~may receive~~ is eligible for only one \$750 stipend per fiscal year.

111.7 Subp. 7. **Surviving children and spouses education denial letter.**

111.8 A. The commissioner must issue a surviving children and spouses education denial  
111.9 letter to a surviving child or surviving spouse who is denied education benefits.

111.10 B. A surviving children and spouses education denial letter must explain the  
111.11 reasons for denial and the surviving child's or surviving spouse's right to appeal under part  
111.12 9055.0290, subpart 8.

111.13 Subp. 8. **Surviving children and spouses education payments.**

111.14 A. The eligible institution must submit documentation to the commissioner with  
111.15 its request for payment of the eligible child's or eligible spouse's tuition, fees, and charges  
111.16 for room and board, books, and supplies.

111.17 B. The eligible child or eligible spouse must submit documentation to the  
111.18 commissioner with the request for reimbursement of tuition, fees, and charges for room and  
111.19 board, books, and supplies.

111.20 C. The commissioner must make reimbursements or payments for tuition, fees,  
111.21 and charges for room and board, books, and supplies directly to an eligible child, eligible  
111.22 spouse, or eligible institution.

112.1           ~~E. D.~~ Documentation submitted for payment or reimbursement must include a  
112.2 copy of the education authorization letter and an itemized breakdown of fees and charges  
112.3 for tuition, room and board, books, and supplies and confirm the following:

112.4           (1) the eligible child's or eligible spouse's name;

112.5           (2) the amount requested for payment or reimbursement of fees and charges  
112.6 for tuition, room and board, books, and supplies;

112.7           (3) the name and payment address of the eligible institution the eligible child  
112.8 or eligible spouse is attending;

112.9           (4) the start and end dates of the terms or semesters that benefits are requested  
112.10 for;

112.11           (5) the terms and semesters that benefits are requested for begin or end within  
112.12 the fiscal year;

112.13           (6) the eligible child's or eligible spouse's attendance at the eligible institution  
112.14 during the fiscal year; and

112.15           (7) the eligible child or eligible spouse paid the tuition, fees, room and board,  
112.16 books, and supplies at the eligible institution, if the eligible child or eligible spouse is  
112.17 requesting reimbursement.

112.18 **9055.0455 STATE SOLDIERS' ASSISTANCE PROGRAM VETERANS RELIEF**  
112.19 **GRANT PROGRAM ACTIVITY.**

112.20       Subpart 1. **Program purpose.**

112.21           A. Upon application approval, the commissioner must provide financial assistance  
112.22 as provided under this part to a veteran, a veteran's dependents, and a member of the armed  
112.23 forces called from reserve status to extended federal active duty per Minnesota Statutes,

113.1 section 196.05, subdivision 1, clause (9), and the member's dependents who are experiencing  
113.2 financial difficulty.

113.3 B. An applicant for a veterans relief grant must meet the requirements of this part  
113.4 and be:

113.5 (1) a veteran;

113.6 (2) a surviving spouse of a veteran; or

113.7 (3) a member of the armed forces called from reserve status to extended  
113.8 federal active duty per Minnesota Statutes, section 196.05, subdivision 1, clause (9).

113.9 C. This part applies only to the veterans relief grant program activity.

113.10 Subp. 2. **Frequency of veterans relief grant.**

113.11 A. The veterans relief grant is administered as a once-per-lifetime benefit.

113.12 B. An applicant whose veterans relief grant is approved or partially approved,  
113.13 and payment has been made for any item or expense is no longer eligible for a veterans  
113.14 relief grant.

113.15 C. A veteran is authorized one veterans relief grant.

113.16 D. A surviving spouse of a veteran is authorized one veterans relief grant if the  
113.17 veteran did not receive a veterans relief grant while living.

113.18 E. A member of the armed forces called from reserve status to extended federal  
113.19 active duty is authorized one veterans relief grant while on active duty but is not eligible  
113.20 for a second veterans relief grant once;

113.21 (1) ~~(1)~~ released from active duty;₂

113.22 (2) ~~(2)~~ separated from the armed forces;₂ or

113.23 (3) ~~(3)~~ discharged from the armed forces.

114.1 F. A veteran married to another veteran is eligible for one veterans relief grant.

114.2 A veteran married to another veteran is not eligible for a second veterans relief grant as the  
114.3 surviving spouse of a deceased veteran.

114.4 ~~Example: Veteran A is married to veteran B. Veteran A and veteran B are each eligible~~  
114.5 ~~for one veterans relief grant. If veteran B dies, veteran A is not eligible for a second~~  
114.6 ~~veterans relief grant as the surviving spouse of veteran B.~~

114.7 Subp. 3. **Benefits provided.** Benefits provided through a veterans relief grant are  
114.8 limited to financial assistance for:

114.9 A. items and expenses to include work and services provided by vendors and  
114.10 contractors that are directly related to meeting an applicant's basic needs or preventing the  
114.11 loss of a basic need; and

114.12 B. items and expenses that further an applicant's financial self-sufficiency and  
114.13 ability to meet the applicant's basic needs.

114.14 Subp. 4. **Verification of need for assistance.**

114.15 A. An applicant must submit a written statement and supporting documentation  
114.16 to the commissioner that explains the circumstances of the applicant's situation and need  
114.17 for assistance and includes a plan for attaining financial self-sufficiency.

114.18 B. The commissioner must calculate an applicant's monthly household income  
114.19 and household assets to determine the applicant's need for assistance.

114.20 C. The commissioner must confirm the requested assistance is to:

114.21 (1) pay for items or expenses authorized in this part and are essential to meeting the  
114.22 applicant's basic needs;

114.23 (2) prevent the loss of a basic need; or

114.24 (3) further the applicant's self-sufficiency and ability to meet the applicant's basic needs.

D. The commissioner must confirm the applicant has a legal obligation to pay for the items and expenses for which assistance is requested.

**Subp. 5. Financial self-sufficiency.**

A. An applicant must be financially self-sufficient or on a path to financial self-sufficiency if the needed assistance is provided to be approved for a veterans relief grant.

B. An applicant who ~~is not financially self-sufficient and will not be on a path to financial self-sufficiency if the needed assistance is provided may receive~~ does not meet the requirements of item A is eligible for a veterans relief grant if one of the following conditions is met:

(1) the need for assistance is immediate and the requested assistance is necessary to house the applicant or to prevent the applicant from becoming homeless; or

(2) the circumstances ~~of the situation pose~~ create an emergency as defined by Minnesota Statutes, section 16C.02, subdivision 6b, that poses a direct threat to the health or safety of the applicant.

C. The commissioner must calculate an applicant's current monthly household income and current household assets to determine if the applicant will be financially self-sufficient or on a path to financial self-sufficiency beyond the needed assistance.

D. The commissioner must consider only the monthly household income and household assets of an applicant and members of the applicant's household when determining financial self-sufficiency.

E. The commissioner must only consider the portion of an item or expense that an applicant or the applicant's spouse is responsible for paying if the applicant or the applicant's spouse shares responsibility for the item or expense with a person who is not authorized to receive a veterans relief grant.

116.1 F. An applicant who is not financially self-sufficient must attend financial  
116.2 counseling for the purpose of attaining financial self-sufficiency and eligibility for a veterans  
116.3 relief grant.

116.4 G. An applicant must apply for any long-term maintenance benefit the applicant  
116.5 or a member of the applicant's household meets the requirements for and apply for assistance  
116.6 from other ~~agencies and organizations~~ entities and submit proof of application to the  
116.7 commissioner.

116.8 H. The commissioner must consider the following factors when determining if  
116.9 an applicant is financially self-sufficient or on a path to financial self-sufficiency beyond  
116.10 the needed assistance:

116.11 (1) the applicant's monthly household income compared to the cost of the  
116.12 household's basic needs;

116.13 (2) the current employment status of the applicant and members of the  
116.14 applicant's household, ~~including the employability and likelihood of the applicant and~~  
116.15 ~~members of the applicant's household gaining employment; and~~

116.16 (3) the current status of long-term maintenance benefits and assistance from  
116.17 other ~~agencies and organizations~~ entities the applicant and members of the applicant's  
116.18 household have applied for ~~and the likelihood of the applicant or a member of the applicant's~~  
116.19 ~~household being approved for and receiving a long-term maintenance benefit or assistance~~  
116.20 ~~from another agency or organization.~~

116.21 Subp. 6. **Maximum grant amounts.** The commissioner must determine an applicant's  
116.22 maximum grant amount based on the following:

116.23 A. the circumstances of the applicant's situation and need for financial assistance  
116.24 and the amount of assistance required to meet the applicant's basic needs;

117.1 B. if the applicant is financially self-sufficient or will be on a path to financial  
117.2 self-sufficiency if the needed assistance is provided; and

117.3 C. if the needed amount of assistance is within the budgetary constraints of state  
117.4 soldiers' assistance funding.

117.5 Subp. 7. **Full approval, partial approval, and denial of a veterans relief grant.** ~~An~~  
117.6 ~~applicant may decline a veterans relief grant that is approved or partially approved and~~  
117.7 ~~retain the right to apply for a veterans relief grant in the future if the commissioner does~~  
117.8 ~~not make a payment for any item in the current veterans relief grant request.~~

117.9 A. For purposes of this part:

117.10 (1) "full approval" of an applicant's veterans relief grant means that the benefit  
117.11 amount approved by the commissioner for each item and expense in the grant request is the  
117.12 full amount that was requested by the applicant for each item and expense;

117.13 (2) "partial approval" of an applicant's veterans relief grant means:

117.14 (a) not all items and expenses in the grant request were approved; or

117.15 (b) the full benefit amount that was requested for an item or expense  
117.16 was not approved; and

117.17 (3) "denial" of an applicant's veterans relief grant request means that no item  
117.18 or expense in the grant request was approved for any amount.

117.19 B. An applicant may decline a veterans relief grant that is fully approved or  
117.20 partially approved and retain the right to apply for a veterans relief grant in the future if the  
117.21 commissioner does not make a payment for any item or expense in the current veterans  
117.22 relief grant request.

118.1 Subp. 8. **Veterans relief grant approval letter.**

118.2 A. The commissioner must issue a veterans relief grant approval letter to an  
118.3 applicant whose veterans relief grant request is approved or partially approved.

118.4 B. The veterans relief grant approval letter must explain:

118.5 ~~(1) program guidelines and administrative procedures;~~

118.6 ~~(2)~~ (1) the total amount of assistance requested;

118.7 ~~(3)~~ (2) the amount requested for each item or expense;

118.8 ~~(4)~~ (3) the total amount of assistance approved by the commissioner;

118.9 ~~(5)~~ (4) the amount approved by the commissioner for each item or expense;

118.10 and

118.11 ~~(6) any additional documentation required from the recipient or a vendor or~~  
118.12 ~~contractor providing services to the recipient; and~~

118.13 ~~(7)~~ (5) an explanation of the commissioner's decision ~~and any additional~~  
118.14 ~~actions required of the recipient or a vendor or contractor.~~

118.15 Subp. 9. **Veterans relief grant denial letter.**

118.16 A. The commissioner must issue a veteran's relief grant denial letter to an applicant  
118.17 whose veterans relief grant request is denied or partially approved.

118.18 B. The veterans relief grant denial letter must state each item or expense that is  
118.19 denied or partially approved explain the reasons for denial or partial approval and the  
118.20 applicant's right to appeal under part 9055.0290, subpart 8.

119.1 Subp. 10. **Addenda.**

119.2 A. ~~An addendum must be~~ A recipient may submit an addendum for additional  
119.3 assistance only for an item or expense that was approved or partially approved in a the  
119.4 recipient's original veterans relief grant request.

119.5 B. A recipient must submit an addendum through a county veterans service officer,  
119.6 department field operations claims representative, or department tribal veterans service  
119.7 officer.

119.8 C. A recipient must submit an addendum for an item or expense to the  
119.9 commissioner as soon as the need for additional assistance is evident.

119.10 D. A recipient must submit a written statement to the commissioner explaining  
119.11 the need for additional assistance and include an updated estimate or bill from the vendor  
119.12 or contractor performing work or providing a service and an explanation of the circumstances  
119.13 preventing the recipient from paying the additional amount.

119.14 E. A recipient must submit the addendum to the commissioner before receiving  
119.15 additional services or the completion of any additional work that incurs charges above the  
119.16 initial amount approved.

119.17 ~~**Example:** The commissioner has approved \$4,000 for home repairs; however, additional~~  
119.18 ~~repairs costing \$2,000 are required.~~

119.19 ~~The recipient may request an additional \$2,000 for the repairs provided the recipient~~  
119.20 ~~does so as soon as the need for the additional repairs is evident. The recipient must~~  
119.21 ~~submit an updated estimate and an explanation of the need for additional repairs from~~  
119.22 ~~the vendor or contractor.~~

119.23 ~~The recipient must submit a statement to the commissioner explaining the circumstances~~  
119.24 ~~preventing the recipient from providing the additional \$2,000.~~

120.1 ~~The addendum must be submitted to the commissioner before completion of any~~  
120.2 ~~additional repairs that incur charges above the initial amount of \$4,000.~~

120.3 Subp. 11. **Items and expenses covered under a veterans relief grant.**

120.4 A. The following items and expenses are eligible for financial assistance under  
120.5 this part:

120.6 (1) appliance purchase, repair, or replacement, ~~as authorized by the~~  
120.7 ~~commissioner~~, at the recipient's primary residence;

120.8 (2) vehicle repairs, payments, and insurance premiums for the recipient's  
120.9 primary vehicle;

120.10 (3) books required for college courses for the recipient or another household  
120.11 member;

120.12 (4) tools required to perform the recipient's employment or employment  
120.13 training;

120.14 (5) hearing aids for the recipient or another household member;

120.15 (6) medical ~~bills~~ claims, health insurance premiums, and COBRA payments  
120.16 for the recipient or another household member;

120.17 (7) daycare expenses;

120.18 (8) dental ~~bills~~ claims for, or treatment of, ~~life-threatening~~ life-threatening  
120.19 dental conditions for the recipient or another household member;

120.20 (9) home repairs, modifications, and wheelchair ramps required to restore or  
120.21 maintain habitability or accessibility at the recipient's primary residence;

120.22 (10) a security or damage deposit for a recipient to attain permanent housing;

121.1 (11) base rent payments for a recipient's primary residence to include garage  
121.2 rental;

121.3 (12) ~~the rent portion of a recipient's base rate at a "housing with services~~  
121.4 ~~establishment" as defined by Minnesota Statutes, section 144D.01, subdivision 4~~ the portion  
121.5 of a recipient's base rate at an assisted living facility, as defined by Minnesota Statutes,  
121.6 section 144G.08, subdivision 7, that constitutes rent;

121.7 (13) lot rent payments for a mobile or manufactured home that is the recipient's  
121.8 primary residence;

121.9 (14) primary mortgage payments, limited to principle, interest, and escrow  
121.10 payments for the recipient's primary residence;

121.11 (15) home equity loan payments if the loan was taken to buy, build, restore  
121.12 or maintain the habitability or accessibility of the recipient's primary residence;

121.13 (16) contract for deed payments for the recipient's primary residence;

121.14 (17) monthly townhome and condominium association dues for the recipient's  
121.15 primary residence;

121.16 (18) homeowners' insurance premiums for the recipient's primary residence;

121.17 (19) renters' insurance premiums for the recipient's primary residence;

121.18 (20) property taxes and assessments for the recipient's primary residence;

121.19 (21) expenses associated with the recipient moving to or within the state for  
121.20 health or financial reasons;

121.21 (22) a recipient's storage unit rental in the state that is necessary to facilitate  
121.22 the person's move to or within the state;

122.1 (23) utilities at the recipient's primary residence including gas and electric  
122.2 charges, bulk fuel charges, water and sewer charges, sanitation charges, and telephone and  
122.3 Internet charges;

122.4 (24) HVAC repairs and replacement required to maintain habitability of the  
122.5 recipient's primary residence; and

122.6 (25) water heaters, wells, and septic systems required to maintain habitability  
122.7 of the recipient's primary residence.

122.8 B. An applicant may request assistance for an item or expense not covered in this  
122.9 subpart and the commissioner must ~~consider~~ approve, partially approve, or deny the request.  
122.10 The commissioner must not provide an exception for prohibited items or expenses in subpart  
122.11 12.

122.12 C. Assistance is prohibited for work or services that have already been completed  
122.13 or provided by a vendor or contractor or for items the applicant has already purchased and  
122.14 paid for or incurred an obligation to pay for unless the circumstances of the situation posed  
122.15 a direct threat to the applicant's health, safety, and financial stability.

122.16 ~~**Example:** An applicant has purchased and installed a new furnace for the primary~~  
122.17 ~~residence. Assistance to pay for the furnace retroactively is prohibited, unless the~~  
122.18 ~~circumstances of the situation and the lack of an operable furnace posed a direct threat~~  
122.19 ~~to the health or safety of the applicant.~~

122.20 D. Work or services to be provided under a veterans relief grant must be completed  
122.21 within 90 days of the date the grant is approved. The recipient and the vendor or contractor  
122.22 must submit a written statement to the commissioner explaining the reasons for any delay  
122.23 in completing the work or providing the services and the newly projected completion date.

122.24 Subp. 12. **Items and expenses not covered under a veterans relief grant.** Financial  
122.25 assistance is prohibited under this part for the following items or expenses:

- 123.1 A. airfare;
- 123.2 B. dental ~~bills~~ claims for treatment not related to a life-threatening condition;
- 123.3 C. funerals;
- 123.4 D. nursing home costs;
- 123.5 E. ~~health-related and supportive services provided in a housing with services~~
- 123.6 ~~contract~~ assisted living services, as defined by Minnesota Statutes, section 144G.08,
- 123.7 subdivision 9, provided in an assisted living contract that are over and above the base rent
- 123.8 for the primary residence;
- 123.9 ~~F. any additional services provided in a housing with services contract that are~~
- 123.10 ~~over and above the base rent;~~
- 123.11 ~~G.~~ F. personal loans, credit cards, and all lines of credit;
- 123.12 ~~H.~~ G. unsecured loans and home equity loans that were not taken to buy, build,
- 123.13 restore, or maintain the habitability or accessibility of the recipient's primary residence;
- 123.14 ~~I.~~ H. home equity lines of credit, regardless of the reason for the line of credit;
- 123.15 ~~J.~~ I. student loans;
- 123.16 ~~K.~~ J. state and federal income taxes;
- 123.17 ~~L.~~ K. child support payments;
- 123.18 ~~M.~~ L. entertainment subscriptions that are part of a recipient's cable or satellite
- 123.19 services; and
- 123.20 ~~N.~~ M. any fine, legal fee, or reinstatement fee.

124.1       **Subp. 13. Items and expenses related to real or personal property.**

124.2           A. Assistance with an item or expense stemming from owning or leasing personal  
124.3 property is authorized under this part under the following conditions:

124.4           (1) the recipient or recipient's spouse is an owner or lessee of the property;  
124.5 and

124.6           (2) the recipient or recipient's spouse has a legal obligation to pay for the  
124.7 property or pay for the item or the expense resulting from owning or leasing the property.

124.8           B. Assistance with an item or expense stemming from owning or leasing real  
124.9 property is authorized under the following conditions:

124.10          (1) the recipient or recipient's spouse is an owner or lessee of the property;

124.11          (2) the property is the primary residence of the recipient;

124.12          (3) the property is homesteaded if owned by the recipient or recipient's spouse;  
124.13 and

124.14          (4) the recipient or recipient's spouse has a legal obligation to pay for owning  
124.15 or leasing the property or pay for the item or the expense stemming from owning or leasing  
124.16 the property.

124.17          C. The commissioner must accept any of the following documents to confirm a  
124.18 recipient or recipient's spouse is an owner or a lessee of real or personal property:

124.19          (1) a certificate of title;

124.20          (2) a deed;

124.21          (3) a current mortgage statement or billing statement;

124.22          (4) the current year's property tax statement;

124.23          (5) a contract for deed; or

125.1 (6) a standard lease agreement.

125.2 Subp. 14. **Prorating veterans relief grant benefits.**

125.3 A. The commissioner must prorate a grant amount for a shared item or shared  
125.4 expense in accordance with part 9055.0280, subparts 4 and 5, if a recipient or recipient's  
125.5 spouse shares joint liability for the item or expense with a person who is not eligible to  
125.6 receive a veterans relief grant.

125.7 B. A grant amount for a shared item or shared expense that is the direct result of  
125.8 owning or leasing real or personal property must be prorated if:

125.9 (1) the recipient or recipient's spouse owns or leases the property with a  
125.10 person age 18 or older who is not eligible for a veterans relief grant; and

125.11 (2) joint liability for the property, item, or expense is shared with the person.

125.12 C. The commissioner must not prorate grant amounts if the person not eligible  
125.13 for a veterans relief grant relinquishes ownership or ceases to lease the property or is no  
125.14 longer liable for the property or the shared item or shared expense.

125.15 Subp. 15. **Assistance with shelter costs.**

125.16 A. An applicant must have a current legal obligation ~~and history of paying shelter~~  
125.17 ~~costs~~ to pay shelter costs and provide documentation verifying that the applicant paid shelter  
125.18 costs in the 12 months before the date of application for the veterans relief grant to be eligible  
125.19 for assistance with shelter costs under the veterans relief grant program activity.

125.20 B. An applicant ~~without a current legal obligation or history of paying shelter~~  
125.21 ~~costs~~ who does not meet the requirements of item A may incur shelter costs and is eligible  
125.22 to receive assistance if necessary to attain permanent housing and the commissioner confirms  
125.23 the applicant is homeless or on the homeless veteran registry.

126.1 C. An applicant who is currently leasing the primary residence but does not have  
126.2 a current lease agreement must ~~complete~~ execute a written standard residential lease  
126.3 agreement ~~retroactively for that states~~ the applicant's actual shelter costs to be used to  
126.4 establish the applicant's amount of shelter assistance. The commissioner must accept lease  
126.5 agreements ~~completed retroactively if the applicant confirms a history of paying the stated~~  
126.6 ~~amount to the current lessor~~ the executed lease agreement signed by the applicant and  
126.7 property owner or manager if the applicant provides proof to the commissioner of paying  
126.8 the actual shelter costs stated on the executed lease agreement in the 12 months before the  
126.9 date of application for the veterans relief grant.

126.10 D. An applicant must ~~prove a history~~ provide proof to the commissioner of paying  
126.11 ~~the current actual shelter cost amounts used to establish the amount of shelter assistance~~  
126.12 costs stated on the executed lease agreement with any of the following documents:

126.13 (1) a statement from the ~~current landlord~~ property owner or manager;

126.14 (2) past rent receipts;

126.15 (3) cleared checks; ~~and~~ or

126.16 (4) other documentation that ~~confirms an applicant's or a recipient's history~~  
126.17 ~~of paying the stated shelter cost amounts~~ provides proof that the applicant is paying the  
126.18 actual shelter costs.

126.19 E. Assistance with past due shelter costs incurred at a previous residence is  
126.20 authorized if paying the past due costs is a prerequisite for the applicant attaining permanent  
126.21 housing.

126.22 F. The commissioner must limit assistance with the shelter costs of an applicant  
126.23 residing under the terms of a nontraditional housing agreement to the shelter benefit amounts  
126.24 provided in the schedule of maximum monthly allowances for the subsistence program  
126.25 activity.

127.1 Subp. 16. **Veterans relief grant shelter authorization form.**

127.2 A. The commissioner must issue a veterans relief grant shelter authorization form  
127.3 to a recipient who is approved for shelter assistance and who pays rent for a primary  
127.4 residence.

127.5 B. The shelter authorization form is the only billing document accepted for payment  
127.6 of the recipient's shelter cost.

127.7 C. The shelter authorization form must explain:

127.8 (1) the instructions for completing the form;

127.9 (2) the amount of shelter assistance approved;

127.10 (3) the period covered by the assistance; and

127.11 (4) the name and address of the property owner or manager; and.

127.12 ~~(5) any additional documentation or actions required of the recipient or the~~  
127.13 ~~property owner or manager.~~

127.14 Subp. 17. **Vendor and contractor participation.** A vendor or contractor participating  
127.15 in the veterans relief grant program must:

127.16 A. ~~comply with the provisions of this part and follow the guidelines and~~  
127.17 ~~administrative procedures established by the commissioner for the veterans relief grant~~  
127.18 ~~program activity;~~

127.19 B. have the appropriate licensure to perform the work or provide the services  
127.20 contracted for;

127.21 C. bill only for the work completed or services provided; and

127.22 ~~D. comply with all department and Minnesota Management and Budget~~  
127.23 ~~requirements for billing and receiving payment from the state; and~~

128.1 ~~E. D.~~ report any conflicts of interest that ~~may~~ arise out of performing work for or  
128.2 providing services to the recipient of a veterans relief grant.

128.3 **Subp. 18. Estimates and proposals for covered items or expenses.**

128.4 A. An applicant applying for assistance with an item or expense that requires work  
128.5 or services provided by a vendor or a contractor must submit to the commissioner a minimum  
128.6 of two estimates or proposals from vendors or contractors who are willing to perform the  
128.7 work or provide the services.

128.8 B. An estimate or proposal must be submitted to the commissioner in writing and  
128.9 confirm:

128.10 (1) the bidding contractor's or vendor's name, address, payment address if  
128.11 different, and phone number;

128.12 (2) the vendor or contractor is authorized to do business in Minnesota;

128.13 (3) the vendor or contractor has liability insurance if bidding to perform work  
128.14 on the applicant's primary residence or property vital to the structural integrity of the primary  
128.15 residence;

128.16 (4) the applicant is the intended recipient of the work performed or services  
128.17 provided and will be the party responsible for payment;

128.18 (5) the terms and conditions of payment;

128.19 (6) the address where work or services will be performed; and

128.20 (7) include an itemized breakdown of all work performed and services  
128.21 provided, material and labor costs, additional charges, and taxes.

128.22 C. An applicant must obtain a minimum of two estimates or proposals for needed  
128.23 work or services unless there are no other contractors or vendors in the applicant's location

129.1 to perform the work or provide the services, or the circumstances of the applicant's situation  
129.2 warrant expedited completion of the work or provision of services.

129.3 D. The commissioner must not approve an estimate or proposal requiring a down  
129.4 payment to a vendor or contractor before work starts or services are provided. Direct payment  
129.5 from the commissioner to a wholesaler or retailer for materials and supplies is authorized  
129.6 if payment is required to start work.

129.7 Subp. 19. **Changing vendors or contractors.**

129.8 A. A recipient may request to change a vendor or contractor if there is a conflict  
129.9 with the original vendor or contractor or other circumstances prevent the original vendor  
129.10 or contractor from completing or providing the proposed work or services.

129.11 B. The recipient must submit the request to change a vendor or contractor to the  
129.12 commissioner through a county veterans service officer, department field operations claims  
129.13 representative, or department tribal veterans service officer.

129.14 C. The recipient must submit a written statement to the commissioner explaining  
129.15 the reasons for changing a vendor or contractor and include a new estimate or proposal from  
129.16 a new vendor or contractor for the work to be completed or the services to be provided.

129.17 D. Payment under this part for work or services performed by the new contractor  
129.18 or vendor before commissioner approval is prohibited.

129.19 Subp. 20. **Dispute between vendor or contractor and recipient.**

129.20 A. The commissioner is not a party to a dispute between a vendor or contractor  
129.21 and a recipient of a veterans relief grant over the quality of work performed or services  
129.22 provided.

129.23 B. The commissioner must withhold payment to a vendor or contractor until the  
129.24 work is completed or services are provided if a recipient informs the commissioner that a

130.1 vendor or contractor is seeking payment but has failed to perform or provide any of the  
130.2 approved work or services.

130.3 Subp. 21. **Veterans relief grant payments.**

130.4 A. The commissioner must not provide payments for items or expenses another  
130.5 ~~agency or organization~~ entity has provided assistance for.

130.6 B. A recipient must submit proof to the commissioner of the cost of items and  
130.7 expenses for approval and payment by the commissioner.

130.8 C. The commissioner must make payments for items and expenses directly to the  
130.9 entity to which payment is due.

130.10 ~~E.~~ D. Receipts, invoices, and billing statements submitted to the commissioner  
130.11 by a recipient must confirm:

130.12 (1) the name, location, and payment address of the ~~vendor or contractor who~~  
130.13 ~~has or is performing work for or providing services to the recipient~~ entity to which payment  
130.14 is due; and

130.15 (2) proof the recipient or recipient's spouse is responsible for paying for the  
130.16 ~~work performed or services received~~ items or expenses.

130.17 ~~D. A vendor or contractor who has performed work or provided services to a~~  
130.18 ~~recipient must submit documentation to the commissioner for payment from the department.~~

130.19 ~~E. Documents submitted to the commissioner requesting payment for work~~  
130.20 ~~performed or services provided to a recipient must include and confirm:~~

130.21 (1) ~~a copy of the veterans relief grant authorization letter;~~

130.22 (2) ~~the contractor's or vendor's name, address, payment address if different,~~  
130.23 ~~and phone number;~~

131.1 ~~(3) the recipient is the party responsible for payment for the work, services,~~  
131.2 ~~or items provided;~~

131.3 ~~(4) an itemized breakdown of the costs and expenses of the work performed,~~  
131.4 ~~or services provided; and~~

131.5 ~~(5) the address where the work was performed, or the services were provided.~~

131.6 Subp. 22. Veterans relief grant payments to vendors and contractors.

131.7 A. A vendor or contractor who has performed work or provided services to a  
131.8 recipient must submit documentation to the commissioner for payment.

131.9 B. The commissioner must make payments for work performed or services  
131.10 provided directly to a vendor or contractor.

131.11 C. Documents submitted to the commissioner by a vendor or contractor requesting  
131.12 payment for work performed or services provided to a recipient must include and confirm:

131.13 (1) a copy of the veterans relief grant authorization letter;

131.14 (2) the contractor's or vendor's name, address, payment address if different,  
131.15 and phone number;

131.16 (3) the recipient is the party responsible for payment for the work, services,  
131.17 or items provided;

131.18 (4) an itemized breakdown of the costs and expenses of the work performed  
131.19 or services provided; and

131.20 (5) the address where the work was performed or the services were provided.

131.21 **RENUMBERING.** Minnesota Rules, part 9055.0130, is renumbered as part 9055.0170.

131.22 **REPEALER.** Minnesota Rules, parts 9055.0010; 9055.0015; 9055.0020; 9055.0025;  
131.23 9055.0030; 9055.0035; 9055.0040; 9055.0050; 9055.0055; 9055.0060; 9055.0070;

- 132.1 9055.0075; 9055.0080; 9055.0085; 9055.0090; 9055.0095; 9055.0100; 9055.0105, subparts  
132.2 1, 2, 3, 5, 6, 7, 8, 9, 10, and 11; 9055.0110; 9055.0115; and 9055.0120, are repealed.

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