



# Minnesota Health Care Programs

Minnesota Health Care Programs can give you and your family coverage for most medical services or provide help paying your Medicare premiums, deductibles and copays. How much help you can get depends on the program you qualify for.

## Medical Assistance

Medical Assistance (MA) is Minnesota's Medicaid program. There is no monthly cost to enrollees. MA pays for current and future medical bills. MA may also pay medical bills going back three months from when we get your application.

You can have other health insurance and still qualify. MA may help pay for the cost of your other health insurance.

## Medical Assistance for Employed Persons with Disabilities (MA-EPD)

MA-EPD gives employed persons with disabilities MA coverage when their income is more than the MA income limit. You must be certified disabled and earn more than \$65 a month. An asset limit of \$20,000 applies. Assets owned by your spouse do not count. You pay a monthly premium based on your income. American Indians usually do not pay a premium.

## Medicare Savings Programs

Medicare Savings Programs can help pay Medicare premiums, deductibles and copays for people enrolled or who can enroll in Medicare.

## MinnesotaCare

MinnesotaCare is a Minnesota health care program. MinnesotaCare is low-cost health care coverage for Minnesotans who do not qualify for MA or Medicare, or cannot get affordable insurance through an employer. Most people pay a monthly premium. The premium is based on your household size and income. Coverage starts the first day of the month after you pay your premium.

## What services are covered?

MA, MA-EPD and MinnesotaCare covered services include:

- Doctor's visits
- Outpatient care
- Emergency care
- Hospital care
- Maternity and newborn care
- Mental health care
- Alcohol and drug treatment
- Prescription drugs
- Rehabilitative services
- Laboratory services
- Preventive and wellness care
- Chronic disease management
- Dental care
- Vision care including eye glasses
- Chiropractic care
- Family planning
- Hearing aids
- Medical equipment and supplies

You may have to pay a copay for some medical services. Pregnant women and children under 21 do not pay copays.

The **Medicare Savings Programs** help pay Medicare related costs.

- **Qualified Medicare Beneficiary (QMB)** pays Medicare premiums, deductibles, copays and coinsurance ([DHS-2087E](#))
- **Service Limited Medicare Beneficiary (SLMB)** pays Medicare Part B premiums ([DHS-2087G](#))
- **Qualified Individual (QI)** pays Medicare Part B premiums for higher income individuals ([DHS-2087I](#))
- **Qualified Working Disabled (QWD)** pays Medicare Part A premiums if you cannot get free Medicare Part A ([DHS-2087F](#))

## How can I qualify?

You must meet program rules including income limits. How much income you can have and still qualify depends on your household size, age, pregnancy status, if you are blind or have a disability, and the health care program you qualify for. **NOTE: Income guidelines are approximations only. Use these charts for general reference.**

### MA Monthly Income Limits effective 7-1-17 – 6-30-18

Family size	1	2	3	For each additional person, add
Infants under 2	\$2,844	\$3,829	\$4,815	\$985
Pregnant Women*		\$3,762	\$4,730	\$968
Children 2 through 18	\$2,763	\$3,721	\$4,679	\$957
Parents and caretaker relatives	\$1,336	\$1,799	\$2,263	\$463
Adults age 19 -64 without children	\$1,336	\$1,799	\$2,263	\$463
Adults age 65 and older	\$1,005	\$1,354	\$1,703	\$349
People who are blind or have a disability	\$1,005	\$1,354	\$1,703	\$349

\*A pregnant woman counts as two or more.

## Can I qualify if my income is more than these limits?

If your income is more than the income limits, you may still qualify for MA by meeting a spenddown. A spenddown is like an insurance deductible. You pay part of your medical bills and MA pays the rest.

## I am pregnant. If I qualify, will my baby get health care?

If you get MA as a pregnant woman, your baby will get MA through the month of his or her first birthday. During the first year, your baby's coverage cannot stop if he or she continues to live in Minnesota.

## MA Asset Limits

Assets are items you own. Assets that may count include cash, bank accounts, stocks, bonds, certain vehicles and property where you do not live. Assets that do not count include the home where you live, household goods, personal items such as clothing and jewelry, and certain assets owned by an American Indian.

There is no asset limit if you qualify as a pregnant woman, a parent or caretaker relative of a child under age 19, a child under age 21, or an adult under age 65 without children. Parents and caretaker relatives who qualify for MA with a spenddown have an asset limit of \$20,000.

The asset limit if you qualify as a person who is blind, has a disability or is age 65 or older is \$3,000 for one and \$6,000 for a household of two or more.

### Medicare Savings Programs Monthly Income Limits effective 7-1-17 – 6-30-18

Family size	1	2	For each additional person, add
Qualified Medicare Beneficiary (QMB)	\$1,025	\$1,374	\$349
Service Limited Medicare Beneficiary (SLMB)	\$1,226	\$1,644	\$418
Qualified Individual (QI)	\$1,377	\$1,848	\$471
Qualified Working Disabled (QWD)	\$2,030	\$2,727	\$697

The asset limit is \$10,000 for a single person and \$18,000 for a family of two or more, except for QWD. The QWD asset limit is \$4,000 for a single person and \$6,000 for a family of two or more.

## MinnesotaCare Yearly Income Limits effective 1-1-17 – 12-31-17

Family Size	Income limit
1	\$23,760
2	\$32,040
3	\$40,320
<b>For each additional person, add</b>	<b>\$8,320</b>

There is no asset limit for MinnesotaCare.

## What if I do not qualify for a Minnesota Health Care Program but still need coverage?

You may be able to get health care coverage through your work. Ask your employer if they offer health insurance to you and your family. If your employer does not offer affordable health insurance, you may qualify for a tax credit to help you buy health insurance.

## Qualified Health Plans (QHP) and MNsure

You may be able to buy Qualified Health Plan (QHP) coverage, with or without a tax credit on MNsure. If you qualify for a tax credit, the tax credit can help pay the monthly premium.

MNsure is Minnesota's health insurance marketplace. You can find, compare, and choose, quality health care coverage that best fits your needs and budget. QHPs are commercial health insurance plans offered by insurance companies. All plans offer preventive services, mental health and substance abuse services, emergency services, prescription drugs and hospitalization. Some plans include more benefits.

Each plan is reviewed by state regulators, certified as a QHP and approved to be sold on MNsure.

You are able to enroll in a QHP during the open enrollment period of November 15, 2014 through February 15, 2015. You may qualify to enroll at other times due to certain life events such as the birth of a child, marriage or loss of health insurance coverage.

## Advance Premium Tax Credit

The Advanced Premium Tax Credit allows you to get a federal tax credit right away to pay a part of your QHP premium. To qualify you must file taxes at the end of the year and enroll in a QHP through MNsure. The tax credit is paid to the health plan you choose. You must pay your portion of the health care premium to the health plan to start and keep coverage.

You may also qualify for cost sharing reduction. This benefit lowers the copays, coinsurance, and out-of-pocket costs you pay for health care services.

## How can I apply?

Most people can apply for all Minnesota Health Care Programs:

- Online at [www.mnsure.org](http://www.mnsure.org)
- By filling out the paper Application for Health Coverage and Help Paying Costs (DHS-6696). Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

The people listed below should apply for Medical Assistance (MA) by filling out the Minnesota Health Care Programs Application for Certain Populations (DHS-3876). Use this application if you:

- Are a child in foster care.
- Are 65 years of age or older.
- Receive Supplemental Security Income (SSI).
- Only want to apply for a Medicare Savings Program.
- Are applying for Medical Assistance for Employed Persons with Disabilities (MA-EPD).

Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

If you want to apply for payment of long-term care services such as nursing home care or services to help you stay in your home, apply:

- By filling out the Minnesota Health Care Programs Application for Payment of Long-Term Care Services paper application (DHS-3531). Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

## Can I get help filling out the application?

You can get help filling out either the online or paper application by:

- Calling 1-855-366-7873.
- Contacting an assister in your area. Visit [www.mnsure.org](http://www.mnsure.org) or call 1-855-366-7873 for an assister network list.
- Calling your local county agency.

Attention. If you need free help interpreting this document, ask your worker or call the number below for your language.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اطلب ذلك من مشرفك أو اتصل على الرقم 1-800-358-0377.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ သင့်လူမှုရေးအလုပ်သမား အားမေးမြန်း ခြင်းသို့ မဟုတ် 1-844-217-3563 ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមសួរអ្នកកាន់សំណុំរឿង របស់អ្នក ឬហៅទូរស័ព្ទមកលេខ 1-888-468-3787 ។

請注意，如果您需要免費協助傳譯這份文件，請告訴您的工作人員或撥打 1-844-217-3564。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, demandez à votre agent chargé du traitement de cas ou appelez le 1-844-217-3548.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces nug koj tus neeg lis dej num los sis hu rau 1-888-486-8377.

ဟ်သုတ်ဟ်သးဘၣ်တက့ၢ်. ဝဲနမ့ၢ်လိၣ်ဘၣ်တၢ်မၤစၢၤကလိလၢတၢ်ကကျိးထံဝဲဒၣ်လၢ် တိလံာ်မိတခါအံၤန့ၣ်,သံကွၢ်ဘၣ်ပုၤဂ့ၢ်ဝိအပုၤမၤစၢၤတၢ်လၢနဂီၢ်မ့တမ့ၢ်ကိးဘၣ် 1-844-217-3549 တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 담당자에게 문의하시거나 1-844-217-3565으로 연락하십시오.

ໂປຣດຊາບ. ຖ້າທ່ານ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງຖາມພະນັກງານກຳກັບການຊ່ວຍເຫຼືອຂອງທ່ານ ຫຼື ໂທໂທ 1-888-487-8251.

Hubachiisa. Dokumentiin kun bilisa akka siif hiikamu gargaarsa hoo feete, hojjettoota kee gaafadhu ykn afaan ati dubbattuuf bilbilli 1-888-234-3798.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, обратитесь к своему социальному работнику или позвоните по телефону 1-888-562-5877.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalkan, hawlwadeenkaaga weydiiso ama wac lambarka 1-888-547-8829.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, comuníquese con su trabajador o llame al 1-888-428-3438.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi nhân viên xã hội của quý vị hoặc gọi số 1-888-554-8759.

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