

Arc Guide to Medical Assistance (MA)

Medical Assistance (MA) is Minnesota's Medicaid program designed for people with disabilities, people with low incomes, pregnant women, children, adults without children, and people who are blind. The Centers for Medicare and Medicaid (CMS) is a federal agency that works in partnership with the Minnesota Department of Human Services (DHS) to direct MA programs.

Financial workers from each of the 87 counties in Minnesota manage the initial MA application and renewal processes.

Eligibility Criteria

All applicants must meet residency, citizenship and income guidelines for MA.

There are two bases of eligibility that may qualify applicants for MA.

- 1. Income-based MA: The applicant is eligible for the program because their income and household size fall within MA program guidelines.
 - If approved, enrollees receive their MA benefits through a Managed Care Organization of their choice, based on the options available in the county they live in.
 - Refer to the ArcGuide to Managed Care for more information.
 - For specific services such as some waivers, disability based MA is important
- 2. Disability-based MA: Applicants must have a certified disability through the State Medical Review Team (SMRT) or the Social Security Administration (are receiving Social Security disability benefits).
 - This kind of MA is also called "Fee for Service" or "straight" MA because providers bill the state directly for services they provide to MA enrollees.
 - Applicants must meet the <u>MA disability healthcare income and asset guidelines</u> (listed on page 2 of the link).
 - Qualifying for MA on this basis can be important to applicants with disabilities who want to access certain county services, like some <u>waivers</u>.
 - Refer to the <u>Arc Guide to the State Medical Review Team</u> and the <u>Arc Guide to Supplemental Security Income</u> for more information.



How to apply

Apply online at www.mnsure.org (preferred) or by using the paper application, MNsure Application for Health Coverage and Help Paying Costs (DHS 6696).

Use the <u>Application for Certain Populations (DHS 3876)</u> if the only person applying has a disability and is:

- receiving Supplemental Security Income (SSI) OR
- enrolled in Medicare and wants to apply for a Medicare Savings Program through MA **OR** working and wants to apply for Medical Assistance for Employed Persons with Disabilities (MA-EPD)

Applicants submit to their county of residence. Applicants may also contact their county financial workers to ask for help applying for Medical Assistance benefits.

Benefits through MA

- Refer to the Minnesota Health Care Programs Summary of Coverage, Cost Sharing and Limits (DHS 3860) for a complete listing of services, benefits and information about cost sharing (the amount MA enrollees pay towards their medical costs).
- For questions about MA coverage and more, call the Minnesota Health Care Programs Member Help Desk at 1-800-657-3739.

Additional Information

 Applicants may request retroactive MA coverage for up to three months prior to the month they apply (ex: apply in November and request coverage back to August). This is important if the applicant has medical bills in any or all three months prior. Applicants request this on the initial healthcare application and should speak with a county financial worker about what retroactive month they want coverage to begin.



- When applicants have private insurance they can still apply for, enroll in and benefit from Medical Assistance.
- MA can cover the cost of the applicant's portion of private insurance costs if the plan is determined to be "cost effective" by the county agency. Refer to the Arc Guide to Cost Effective Healthcare.
- Adults who are certified disabled with incomes higher than MA program
 guidelines may still qualify if they have enough medical bills to qualify for a
 spenddown (similar to an insurance deductible). A county financial worker will
 tell the applicant if this applies to their situation and can provide detailed
 information about how spenddowns work.
- MA enrollees need to renew their coverage annually or every 6 months. Refer to the Arc Guide for Medical Assistance Renewals.

For further information or advocacy services, contact The Arc Minnesota at 952-920-0855 or toll-free at 833.450.1494 or visit www.arcminnesota.org. (Please note: This document is not legal advice, and should not be construed as such. Thus, no information herein should replace the sound advice of an attorney.)

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