



Minnesota Department of **Human Services**

Minnesota Health Care Programs

Roughly 1.14 million Minnesotans on average (or 21 percent of the state's population) received health care coverage through the state's publicly funded basic health care programs in state fiscal year (FY) 2015: Medical Assistance (MA — Minnesota's Medicaid program) and MinnesotaCare (Minnesota's Basic Health Plan). Through these programs, the state pays for all or part of enrollees' health care services. About 74 percent of DHS' all-funds (state and federal funds) budget was devoted to these programs in FY 2015. Nearly half (44 percent) of enrollees in all programs combined were children under 21.

The federal Centers for Medicare & Medicaid Services (CMS) administer Medicaid and the Basic Health Plan nationwide. In Minnesota, DHS is the State Medicaid Agency and partners with Minnesota counties and tribes to administer the MA program. People can apply for MA and MinnesotaCare online or through a paper application process.

Medical Assistance (MA) (Minnesota's Medicaid program)

- MA is the largest DHS program, providing coverage for a monthly average of 1.05 million low-income children and parents, people with disabilities, adults without children and seniors in FY 2015.
- MA is funded jointly with federal, state and county funds.

Expenditures for FY 2015	\$10.5 billion
Federal share	\$6.0 billion (largest single source of federal funding in Minnesota's budget)
State share	\$4.4 billion
County share	\$0.1 billion

- Families with children made up 64 percent of the total enrollment, but only 26 percent of total expenditures. Elderly and people with disabilities made up 17 percent of total enrollment, but only 58 percent of total expenditures. Adults without children accounted for 19 percent of total enrollment and 16 percent of total expenditures in FY 2015.
- Income limits vary, depending on a variety of factors. Examples of income limits for MA:

Effective July 1, 2016	Monthly
Parents and adults without children	\$1,316
Children under age 2	\$2,801
Children age 2 to 18	\$2,722
Children age 19 to 20	\$1,316
Pregnant women*	\$3,715
Elderly and people with disabilities	\$990

*A pregnant woman counts as two or more.

If their income is too high, some applicants may still qualify for MA if they have enough medical bills to meet a spenddown (similar to an insurance deductible).

MinnesotaCare (Minnesota's Basic Health Plan)

- The average monthly MinnesotaCare enrollment in FY 2015 was 91,000.
- MinnesotaCare provides coverage for people who do not have access to affordable health insurance and have higher income levels than those served on the MA program.
- MinnesotaCare is the state's Basic Health Program (BHP).
- MinnesotaCare is paid for by enrollee premiums and draws on appropriations from the state Health Care Access Fund and federal BHP funds.
- MinnesotaCare expenditures totaled \$510 million in FY 2015. This represented 3.4 percent of the DHS overall budget. The average medical payment per enrollee was \$466 a month.
- In FY 2015, program costs were covered by 54 percent from state funds, 43 percent from federal funds and 3 percent from enrollee premiums. Premiums and provider taxes go into the state-administered Health Care Access Fund.
- Enrollee premiums are determined using a sliding-fee scale based on family size and income. The current monthly premium max is \$80 per adult. Children, and certain other groups, do not pay a premium.
- Some examples of annual income limits for MinnesotaCare:

Effective Jan. 1, 2016 to Dec. 31, 2016

	Yearly
Household of one	\$23,540
Household of two	\$31,860
Household of three	\$40,180

- There is no asset limit for MinnesotaCare.

Eligibility requirements

MA and MinnesotaCare applicants must meet any applicable income limit, non-financial eligibility rules and be Minnesota residents. Certain MA applicants have an asset limit. MinnesotaCare applicants who have minimum essential coverage (such as Medicare or employer-sponsored coverage) are not eligible.

Covered services

Health care services for MA enrollees are provided by fee-for-service medical providers or health plans. The majority of MA enrollees are enrolled in health plans and all MinnesotaCare enrollees are in health plans.

Limits on coverage and copays may apply to some services for some people. Some people may have copays for some services. More information is available in the [Minnesota Health Care Programs Summary of coverage, cost sharing and limits DHS-3860 \(PDF\)](#).

MA and MinnesotaCare covered services may include:

- Alcohol and drug treatment
- Chiropractic care
- Dental care (limited for nonpregnant adults)
- Doctor/clinic visits
- Eyeglasses
- Family planning services
- Hearing aids
- Home care
- Hospice care
- Hospital services (inpatient and outpatient)
- Immunizations and vaccines
- Interpreter services
- Labs and X-rays
- Licensed birth center services
- Medical equipment and supplies
- Medical transportation (emergency and certain non-emergency)
- Mental health care
- Nursing homes and ICF/DD facilities
- Outpatient surgery
- Prescriptions
- Medication Therapy Management
- Rehabilitative therapy
- Urgent care

Applying for health care programs

Apply for Minnesota Health Care Programs by:

- Apply online at mnsure.org, Minnesota's online health insurance marketplace.
- Apply for family planning services only or help paying your costs in a long-term care facility such as a nursing home at applymn.dhs.mn.gov/.
- Fill out a [paper application](#).
- Go to the [DHS website](#) or call your local county agency to get an application.

More information

More information is online at mn.gov/dhs/people-we-serve/adults/health-care/health-care-programs/.

For accessible formats of this publication or assistance with additional equal access to human services, write to dhs.info@state.mn.us, call 651-431-2019, or use your preferred relay service.