Minnesota Health Care Programs and MNsure

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Deputy Assistant Commissioner
Health Care Administration
Health Care Administration

- Operates the state’s public health care programs, including Minnesota’s Medicaid program and MinnesotaCare
  - Determine Eligibility
  - Administer Benefits
  - Determine Payment Rates
  - Contracting/Purchasing for Health Care Services
  - Enrollee and Provider customer service
  - Claims Processing and Systems
  - Performance Measurement/Evaluation
Minnesota’s Public Health Care Programs 2013

- Medical Assistance – Minnesota's Medicaid program – approximately 770,000 enrollees

- MinnesotaCare – subsidized state insurance program – approximately 140,000

- MA provides coverage for approximately 186,000 elderly and disabled individuals, including elderly Minnesotans who are also eligible for Medicare but have low incomes and need assistance with cost sharing
ACA Changes to Medicaid – 1/1/14

- New Streamlined Eligibility Requirements to Eliminate Coverage Gaps
  - New income counting method – MAGI
  - Streamlined online application and verification
  - Improved renewal process
  - Other eligibility changes to maintain coverage

- Populations Eligible under MAGI Methodology
  - Pregnant Women and Infants
  - Parents and Children
  - Adults to 133% FPL

- No Asset Test for MAGI Populations
- Consistent Requirements for Medicaid and Tax Credits
MNCare Changes – 1/1/14

- **Income and Asset Standards**
  - 19–20 year old children and adults with income > 133%–200% FPL
  - Asset test for parents and caretakers is eliminated
  - Individuals who are eligible for MA are not eligible for MNCare

- **Income Methodology Changed to MAGI**

- **Insurance Barriers**
  - 4–month waiting period for individuals who had access to other coverage or who fail to pay a premium is eliminated
  - 18–month waiting period for individuals who had access to employer–subsidized insurance is eliminated

- **Benefit Changes**
  - Elimination of $10,000 hospital cap
  - Elimination of $1,000 hospital co-pay
Minnesota Coverage Continuum in 2014*

Federal Poverty Level (FPL)

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Qualified Health Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>0%</td>
<td>Medicaid</td>
</tr>
<tr>
<td>100%</td>
<td>Infants to age 2**</td>
</tr>
<tr>
<td>200%</td>
<td>Pregnant Women and Children ages 2 - 18**</td>
</tr>
<tr>
<td>300%</td>
<td>Parents and Children ages 19 – 20</td>
</tr>
<tr>
<td>400%</td>
<td>Adults under age 65</td>
</tr>
<tr>
<td>500%</td>
<td>Adults age 65 and older and Individuals who have a disability or are blind</td>
</tr>
</tbody>
</table>

- Medicaid
  - Infants to age 2**: 280% FPL converted to a MAGI equivalent standard
  - Pregnant Women and Children ages 2 - 18**: 275% FPL converted to a MAGI equivalent standard
  - Parents and Children ages 19 – 20: 133% FPL
  - Adults under age 65: 133% FPL
  - Adults age 65 and older and Individuals who have a disability or are blind: 100% FPL

- Premium Tax Credits
  - > 280% - 400% FPL
  - > 275% - 400% FPL
  - > 133% - 200% FPL
  - > 200% - 400% FPL

- No Subsidy

* Subject to additional federal guidance related to maintenance of effort requirements.
** Income standard in effect on June 1, 1997, must be maintained to comply with the CHIP maintenance of effort.

Department of Human Services
May 7, 2013
## 2013 Federal Poverty Levels

<table>
<thead>
<tr>
<th>Family Size</th>
<th>75% FPL</th>
<th>100% FPL</th>
<th>133% FPL</th>
<th>200% FPL</th>
<th>275% FPL</th>
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<tr>
<td>1</td>
<td>$8,618</td>
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<td>$31,792</td>
<td>$47,100</td>
<td>$64,763</td>
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Income limits increase for additional family members.
## MNCare Premium Table 1/1/14

<table>
<thead>
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<th>FPG Greater Than or Equal To</th>
<th>FPG Less Than</th>
<th>Individual Premium Amount</th>
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<td>190%</td>
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<td>$50</td>
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Minnesota’s Public Health Care Programs – Looking Forward

**In 2014**
- 45,000 New Medical Assistance Enrollees
- 110,000 MNCare Enrollees move to MA
- 10,000 MNCare Enrollees move to Tax Credits
- 40,500 New MNCare Enrollees in January 2014

**By 2016**
- Medical Assistance
  - 895,000 enrollees overall
  - 690,000 on MAGI programs
- MNCare
  - 190,000 Enrollees
Customer Service

- **Medical Assistance**
  - Counties provide primary eligibility and enrollment support
  - Thousands of county eligibility and financial workers
  - $98,000,000 in calendar year 2011
  - 155,000 new MA cases to the counties in 2014
  - Each county operates a call center to support clients
  - DHS operates a call center to support county efforts

- **MinnesotaCare**
  - Department of Human Services provides eligibility, enrollment, and premium support
  - Approximately 230 customer service workers
  - $15,000,000 in calendar year 2011
  - Operate a call center to support clients
Currently

- **Medical Assistance**
  - County workers mail options to clients after eligibility
  - Significant paper and cost
  - 45 day timeline
  - Default plan provided if no action in 45 days

- **MinnesotaCare**
  - DHS mails options to clients after eligibility determined and premium paid
  - Significant paper and cost
  - Default plan provided if no action in 45 days
Enrollment in a Health Plan

- Desired Solution
  - Medical Assistance
    - After eligibility determination, clients select a health plan, online in real time
    - Default health plan provided automatically, and the client may change plans within 45 days
  - MinnesotaCare
    - After eligibility determination and premium payment, clients select a health plan, online in real time
    - Default health plan provided automatically, and the client may change plans within 45 days
Other Areas of Overlap

- Families on both public programs and tax credits
- Navigators and In-Person-Assistors doing outreach
- Premium payments (MNCare)
- Appeals of eligibility determinations
- Displaying comparative information about health plan options
- Common IT systems
- Common customer service systems
Thank You

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