The four new or updated areas of the online application include the retroactive request, date of death, date of residency and temporary absence.
Retroactive Request
Retroactive questions are still in the same place of the online application.
Here is a visual of how the retroactive months will display if retroactive coverage is requested. A consumer can now select any of the months for retroactive coverage.
In this fictional case, the consumer has selected May and July for their Retroactive request. June is not required to be requested.
When Medical Assistance eligibility is approved and activated the system notice will display which retroactive months were requested and which the consumer were eligible for.
Date of Death
Date of death is a new field that can be added during application. It is in the information about you section on the application.

When possible, do not load a deceased member as the primary applicant or application filer, unless the deceased member is the only member on the application.
Date of death will display on the household information summary screen.

Date of death will affect retroactive requests as well, if a date of death is indicated for a member, any retroactive request for that member will need to be processed manually.
Date of death will also be displayed on the consumer’s notice.

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Action</th>
<th>Coverage Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/01/2020</td>
<td>Approved</td>
<td>Medical Assistance</td>
</tr>
<tr>
<td>08/11/2020</td>
<td>Does not qualify</td>
<td>Medical Assistance</td>
</tr>
<tr>
<td>08/17/2020</td>
<td>Does not qualify</td>
<td>MinnesotaCare</td>
</tr>
<tr>
<td>08/17/2020</td>
<td>Does not qualify</td>
<td>Qualified Health Plan with Advanced Premium Tax Credit/Cost-Sharing Reductions</td>
</tr>
<tr>
<td>08/17/2020</td>
<td>Does not qualify</td>
<td>Qualified Health Plan without financial assistance</td>
</tr>
</tbody>
</table>

1. You qualify for Medical Assistance as an adult 21 through 64 years old starting 08/01/2020. (Code of Federal Regulations, title 42, section 435.119; Minnesota Statutes, sections 256B.055, subd. 15, and 256B.056, subd. 4(c)).

2. You do not qualify for Medical Assistance because you are deceased. (Minnesota Statutes, sections 256B.055 and 256B.056).

1. You do not qualify for MinnesotaCare because you are deceased. (Minnesota Statutes, section 256L.04).

2. You do not qualify for a Qualified Health Plan with Advanced Premium Tax Credit/Cost-Sharing Reductions because you are deceased. (Code of Federal Regulations, title 45, sections 155.330 and 155.430(d)(7)).

3. You do not qualify for a Qualified Health Plan because you are deceased. (Code of Federal Regulations, title 45, sections 155.330 and 155.430(d)(7)).
Date of Residency
Within the information about you section of the application new questions have been added regarding an applicant’s date of residency.

Did the member move to Minnesota in the last three months? If that question is answered as Yes, a follow-up is asked to report the date the member moved to Minnesota.

These questions will affect retroactive requests as state residency impacts health care eligibility.

If a member has recently moved to Minnesota and also requests retroactive Medical Assistance the retroactive request will need to be processed manually.
The consumer’s notice will also display the date of residency as the first date of eligibility if they have recently moved to Minnesota.
Temporary Absence
Temporary absence questions have been added to the METS application entry in the caseworker and client portals. They are within the Information about you section after the state residency questions.

The temporary absence questions populate based on the answers given. The first screenshot above displays that temporary absence is being reported without an expected return date. If the consumer does not know their return date the question “Will you be absent for more than 30 days?” will display.

The reason for the absence is a required field to be completed during the application, however the consumer is not required to provide a reason. If no reason is given, select “other”.

The current version of the paper application already has the temporary absence questions as well.
This screenshot displays the other path if a temporary absence is reported. If the consumer knows when they are returning to Minnesota the next question will prompt the consumer to report the expected return date.

An individual should only report a temporary absence at application if they are currently absent on the date of the application. A future temporary absence will need to be reported to the county agency when it occurs.

After submission of the application Temporary Absence evidence is created on the IC within the Household Section. There is no impact to health care eligibility within METS.

If a temporary absence is reported at application the individual may be excluded from managed care for the length of the absence. See Bulletin #20-21-01 Temporary Absence for more information on temporary absence policy.
Thank you