

Demographic	PRIVATE HEALTH INSURANCE			PUBLICLY-SPONSORED PROGRAMS						Other Programs & Resources
	Small Businesses (2-50 Employees)	Individuals Recently Covered by an Employer Health Plan	Individuals & Families	Individuals with Pre-Existing, Severe, or Chronic Medical Conditions	Low-Income Individuals & Families	Women	Lower-Income Individuals	Seniors & Disabled	Trade Dislocated Workers (TAA Recipients)	
Program	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Group Plans</b> Minnesota Association of Health Underwriters 651-917-6253 www.emahu.org</p>	<p><b>COBRA/Mini-COBRA</b></p> <p>Then convert to a plan under:</p> <p><b>HIPAA</b> Health Insurance Portability &amp; Accountability Act 866-487-2365 www.dol.gov</p>	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Individual Plans</b> Minnesota Association of Health Underwriters 651-917-6253 www.emahu.org</p>	<p><b>Minnesota Comprehensive Health Association (MCHA)</b> 952-593-9609 866-894-8053 www.mchamn.com</p> <p><b>Pre-Existing Condition Insurance Plan (PCIP)</b> Run by the U.S. Department of Health and Human Services 866-717-5826 www.PCIP.gov</p>	<p><b>Medical Assistance (Medicaid)</b> Twin-Cities Metro Area 651-431-2670 Outside Twin-Cities Metro Area 800-657-3739 www.dhs.state.mn.us www.bridgetobenefits.org</p>	<p><b>Sage Screening Program</b> 888-643-2584 888-6-HEALTH www.health.state.mn.us (Search: Sage)</p> <p><b>Women-Infant-Children (WIC)</b> 800-942-4030 State offices: 651-201-4404 or 800-657-3942, www.health.state.mn.us (Search: WIC)</p>	<p><b>MinnesotaCare</b> 651-297-3862 Outside Twin-Cities Metro Area 800-657-3672 TTY: 800-627-3529 www.bridgetobenefits.org</p>	<p><b>Medicare</b> 800-633-4227 www.medicare.gov</p> <p><b>Medicare Prescription Drug Program</b> 800-633-4227</p> <p><b>MinnesotaHelp.info</b> 800-333-2433 TTD: 800-627-3529 minnesotahelp.info</p>	<p><b>Health Coverage Tax Credit</b> 866-628-4282 www.irs.gov (keyword: HCTC)</p>	<p><b>VA Medical Benefits Package</b> 877-222-8387 www.va.gov</p>
Coverage	<p>Pre-existing conditions can be excluded for a limited time depending upon the type of group plan you are joining.</p> <p>There is a maximum 6-month look-back/12-month exclusionary period for pre-existing conditions on enrollees that do not have prior creditable coverage or whose prior coverage lapsed for more than 63 days.</p> <p>Benefits will vary depending on the chosen plan.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>COBRA/Mini-COBRA:</b> Coverage available for 18–36 months depending on qualifying events. Benefits are what you had with your previous employer.</p> <p><b>HIPAA:</b> Benefits are based on program selected. There is no expiration of coverage.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Options vary depending on applicant needs and plan selected.</p> <p>There is a maximum look-back period of 6 months and maximum exclusion period of 18 months for pre-existing condition for enrollees with no prior coverage.</p> <p>Elimination riders are not permitted.</p> <p><i>Pre-Existing Health Conditions Covered with Some Limitations</i></p>	<p><b>MCHA:</b> Professional service, prescription drugs and pharmacy services, mail service, hospital and ambulance services, home health care, outpatient, rehabilitation, mental health, substance abuse, durable medical equipment and prosthetics, organ and bone marrow transplant, dental, infertility services, hospice, reconstructive and restorative surgery, skilled nursing, emergency and more.</p> <p><b>PCIP:</b> Covers broad range of benefits, including primary and specialty care, hospital care, and prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Clinic and physician, immunizations, ambulance, emergency room services when used for emergency care, inpatient and outpatient hospital care, lab, x-ray, family planning, pregnancy related services, nurse midwife, medical equipment and supplies, hearing aids, physical, occupational, speech, respiratory and rehabilitative therapy, transportation, mental health services, alcohol and drug treatment, prosthetics, nursing facilities, home health services, hospice, and more.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Sage Screening Program:</b> Breast and cervical exams, Mammogram screenings, Pap smears and diagnostic services.</p> <p><b>WIC:</b> Nutrition education and services; breastfeeding promotion and education; monthly food prescription of nutritious foods; access to maternal, prenatal and pediatric health care services.</p>	<p>Dental services, doctor and health clinic visits for preventive and non-preventive care, emergency room visits, inpatient hospital coverage.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Medicare</b> offers Part A, inpatient care in hospitals and rehabilitative centers; Part B, doctor and some preventive services and outpatient care; Part C allows Medicare benefits through private insurance (Medicare Advantage); Part C includes Parts A, B, and C not covered by Medicare. Part D covers prescription drugs.</p> <p><b>MinnesotaHelp.info</b> is a Medicare counseling service.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Inpatient and outpatient care (lab tests, x-rays, etc.), Doctor visits, Preventive and major medical care (surgery, physical therapy, Durable medical equipment, etc.), Mental health and substance abuse care, and Prescription drugs.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Comprehensive preventive and primary care, outpatient and inpatient services.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Company size 2–50 employees.</p> <p>Owner can count as an employee. Proprietor-name on license must draw wages.</p> <p>Eligible employees must work at least 20 hours a week.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>COBRA:</b> Available for employees who work for employers with 20 or more employees. You have 60 days from date of termination to sign up for COBRA coverage.</p> <p><b>Mini-COBRA:</b> Available for employees who work for employers with less than 20 employees. Must elect coverage within 60 days from date of termination or date of receiving notice of right to continue coverage, whichever is later.</p> <p><b>HIPAA:</b> Must have had 18 months of continuous coverage and completely exhausted COBRA or state continuation coverage. Must not have lost coverage due to fraud or non-payment of premiums. You have 63 days to enroll in a HIPAA-eligible plan.</p>	<p>If you are denied coverage for a medical condition, you may be eligible for an MCHA plan or PCIP. See next column</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>MCHA:</b> You live in Minnesota and are eligible for Trade Adjustment Assistance (TAA) or you are HIPAA-eligible. Or you have been a Minnesota resident for the last 6 months, and are at least 65 years old and ineligible for the Federal Medicare program. Or, you can prove that you have been denied health coverage in the last 6 months due to a pre-existing condition. Or, you can prove you have been treated in the last 3 years for special medical "presumptive condition."</p> <p><b>PCIP:</b> Must have been uninsured for at least 6 months prior to applying. Must prove being a U.S. citizen or legal U.S. resident, a Minnesota resident, and having problems getting insurance due to a pre-existing condition.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be U.S. citizens or qualified aliens and live in Minnesota. Income limits for the following:</p> <p>Pregnant women: 175% FPL.</p> <p>Children ages 0–1: 280% FPL.</p> <p>Children ages 2–18: 150% FPL.</p> <p>Children ages 19–20: 100% FPL.</p> <p>Parents &amp; relative caretakers with children under 19: 100% FPL.</p> <p>Parents, legal guardians, foster parents and relative caretakers with children under 21: 275% FPL.</p> <p>Adults without children: 75% FPL.</p> <p>Aged, blind and disabled: 100% FPL.</p> <p>Medically-needy singles: \$677 monthly income with asset limit of \$3,000; couples with monthly income of \$911 with asset limit of \$6,000.</p> <p>Limited assets such as cash, savings, stocks and bonds (except for pregnant women and children).</p> <p>Disabled are allowed to "spend down" for eligibility.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Sage Screening Program:</b> Minnesota women with no insurance or whose insurance does not cover what Sage Screening provides. Income limit: 250% FPL. Must be age 40 or older.</p> <p>If younger than 40 and is determined by a clinician to be at elevated risk for breast cancer, Sage will cover her office visit and mammogram. If further follow-up is needed, the woman could also have a diagnostic mammogram, breast ultrasound, or outpatient breast biopsy.</p> <p><b>WIC:</b> Must live in Minnesota, have a nutritional need as determined by WIC staff, be a child under 5, a new mom, or a pregnant or breastfeeding woman. Income limit of 185% FPL.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be U.S. citizens or qualified aliens and live in Minnesota.</p> <p>Must have been uninsured in the last 4 months unless the insurance was Medical Assistance or paid for more than 50% of premium of employer-based insurance. Income limits for the following:</p> <p>Adults without children: 250% FPL.</p> <p>Parents of children under 21, pregnant women, and children under 21: 275% FPL.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Both:</b> Must be U.S. citizen or permanent U.S. resident, and:</p> <p>1) If 65 years or older, you or your spouse worked for at least 10 years in Medicare-covered employment, or</p> <p>2) You have a disability or end-stage renal disease (permanent kidney failure requiring dialysis or transplant) at any age.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Must be receiving TAA (Trade Adjustment Assistance), or</p> <p>Must be 55 years or older and receiving pension from the Pension Benefit Guaranty Corporation (PBGC).</p> <p>Must not be enrolled in certain state plans, or in prison, or receiving 65% COBRA premium reduction, or be claimed as a dependent in tax returns.</p> <p>Must be enrolled in qualified health plans where you pay more than 50% of the premiums.</p> <p>Also see MCHA.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>"Veteran status" = active duty in the U.S. military, naval, or air service and a discharge or release from active military service under other than dishonorable conditions.</p> <p>Certain veterans must have completed 24 continuous months of service.</p>
Monthly Cost	<p>Costs depend on employer contribution and ± 25% of the insurance company's index rate.</p>	<p><b>COBRA/Mini-COBRA:</b> Premiums range from 102%–150% of group health rates.</p> <p><b>HIPAA:</b> Premiums will depend on plan chosen.</p>	<p>Rates are ±25% of the base from individual market rate for health status, ±50% for age and ±20% for geography.</p>	<p><b>MCHA:</b> Monthly premiums range from \$107.98 to \$2,837.82 depending on your age, gender and deductible.</p> <p><b>PCIP:</b> Monthly premiums range from \$96 to \$414 depending on your age and plan chosen.</p>	<p><b>\$0</b> premiums. \$3 co-pay per office visit. \$6 per non-emergency visit in ER.</p>	<p><b>Sage Screening Program: \$0</b></p> <p><b>WIC: \$0</b> to minimal share of cost.</p>	<p><b>\$4–\$179</b> per person, depending on income.</p>	<p><b>Medicare: \$0</b> and share of cost for certain services; deductibles for certain plans. Part A: \$0 - \$450 based on length of Medicare-covered employment; Part B: \$96.40 - \$369.10 depending on annual income; Part C: Based on provider; Part D: Varies in cost and drugs covered.</p> <p><b>MinnesotaHelp.info: \$0</b></p>	<p><b>20%</b> of the insurance premium including COBRA premium if employer contributes less than 50%.</p>	<p><b>\$0</b> and share of cost and co-pays depending on income level.</p>

**Indian Health Services**  
Bemidji Area Office  
218-444-0458  
www.ihs.gov  
(Search: Bemidji)

**Partnership for Prescription Assistance**  
888-477-2669  
www.pparx.org

**Disabilities Linkage Line**  
866-333-2466  
www.semci.org/dll.html

**Family Planning**  
800-783-2287  
sexualhealthmn.org  
www.health.state.mn.us  
(Search: Family Planning)

**NOTE:** Government programs look at each family's circumstance to determine eligibility.

Income and assets tests may be required to determine eligibility for publicly-sponsored programs.

FPL means Federal Poverty Level. See explanation on reverse side of this matrix.

**Guaranteed Coverage** means you cannot be turned down due to your health conditions.

Programs and plan availability, eligibility requirements, costs, and coverages are subject to change.



## Using this Health Care Options Matrix

Each state has a variety of health care coverage options. This Matrix is designed to help residents determine which option is best for them.

**STEP 1** For applicants potentially eligible for public programs, check the chart below to determine his/her FPL percentage.

**STEP 2** See reverse side of this Matrix brochure to determine options for which the applicant might qualify.

**STEP 3** Make a list of the programs and insurance coverage options that may apply to the applicant and then use the contact information provided to access coverage or services.

### Your Federal Poverty Level (FPL) (Based on monthly family income)

Family Size (Household)	25%	50%	75%	81%	100%	133%	175%	200%	250%	300%
1	\$227	\$454	\$681	\$735	\$908	\$1,207	\$1,588	\$1,815	\$2,269	\$2,723
2	\$306	\$613	\$919	\$993	\$1,226	\$1,630	\$2,145	\$2,452	\$3,065	\$3,678
3	\$386	\$772	\$1,158	\$1,251	\$1,544	\$2,054	\$2,702	\$3,088	\$3,860	\$4,633
4	\$466	\$931	\$1,397	\$1,509	\$1,863	\$2,477	\$3,259	\$3,725	\$4,656	\$5,588
5	\$545	\$1,090	\$1,636	\$1,766	\$2,181	\$2,901	\$3,816	\$4,362	\$5,452	\$6,543
6	\$625	\$1,250	\$1,874	\$2,024	\$2,499	\$3,324	\$4,374	\$4,998	\$6,248	\$7,498
7	\$704	\$1,409	\$2,113	\$2,282	\$2,818	\$3,747	\$4,931	\$5,635	\$7,044	\$8,453
8	\$784	\$1,568	\$2,352	\$2,540	\$3,136	\$4,171	\$5,488	\$6,272	\$7,840	\$9,048

- A pregnant woman counts as two for the purpose of this chart.
- Add \$318/month for each additional family member after eight.
- Contact individual programs for deduction allowances on child/dependent care; working parent's work expenses; alimony/child support *received* or court ordered amount *paid*.

Source: Federal Register Vol. 76, No. 13, January 20, 2011, pp. 3637-3638. Valid through 2011 unless updated.  
Monthly percentage data calculated by FHCE and rounded to the nearest dollar.

Note: There is no universal administrative definition of income that is valid for all programs that use the poverty guidelines. The office or organization that administers a particular program or activity is responsible for making decisions about the definition of income used by that program (to the extent that the definition is not already contained in legislation or regulation). To find out the specific definition of income used by a particular program or activity, you must consult the office or organization that administers that program.

The Health Care Options Matrix is a registered trademark of Philip Lebherz and was originally developed by Philip Lebherz and the Foundation for Health Coverage Education®, [www.CoverageForAll.org](http://www.CoverageForAll.org).

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## Other Sources of Information

### Financial Aid & Free or Low-Cost Benefits

**Government Benefits Finder**  
800-333-4636  
[www.benefits.gov](http://www.benefits.gov)

(Search tool for grants, loans and other benefits)

**Catalog of Federal Domestic Assistance**  
[www.cfda.gov](http://www.cfda.gov)

(Search tool for grants, loans and other benefits)

### Finding Local Health Care Options

**Health Resources and Services Administration**  
888-275-4772  
[www.findahealthcenter.hrsa.gov](http://www.findahealthcenter.hrsa.gov)

**Department of Health and Human Services**  
[www.hhs.gov](http://www.hhs.gov)

(Various health care search tools)

**Self Help Clearing House**  
[www.mentalhelp.net/selfhelp](http://www.mentalhelp.net/selfhelp)

(Search tool for people sharing information on hundreds of diseases, health conditions and other health care related situations)

**Minnesota Department of Human Services**  
651-431-2000  
TTD: 800-627-3529  
[www.dhs.state.mn.us](http://www.dhs.state.mn.us)

(State program information)

### Laws & Regulations

**Minnesota Department of Commerce**  
651-296-4026  
TTD: 651-296-2860  
[www.commerce.state.mn.us](http://www.commerce.state.mn.us)

(General information on all types of insurance)

**Employee Benefits Security Administration**  
[www.dol.gov/ebsa](http://www.dol.gov/ebsa)

(Official information and rules from the U.S. Department of Labor)

### Help with This Matrix or Finding a Broker or Agent

**Minnesota Association of Health Underwriters**  
651-917-6253  
[www.emahu.org](http://www.emahu.org)

(State organization of insurance brokers)

## MINNESOTA

# Health Care Options Matrix™



This Matrix offers information about free and low-cost health care coverage for individuals, families, and small businesses.



Helping people navigate their health care options



The Foundation for Health Coverage Education® has created the Matrix public education program to ensure that every American has complete information about access and affordability to quality health care coverage. Every effort has been made to include the most up-to-date information available at the time of printing. Program and plan availability, eligibility requirements, costs, and coverages are subject to change. You are encouraged to call or visit the websites listed for each program to ensure that you have the most accurate information available.