



DEPARTMENT OF
HUMAN SERVICES

Minnesota Department of Human Services
Minnesota Health Care Programs

Minnesota Health Care Programs

Minnesota Health Care Programs can give you and your family coverage for most medical services or provide help paying your Medicare premiums, deductibles and copays. How much help you can get depends on the program you qualify for.

Medical Assistance

Medical Assistance (MA) is Minnesota's Medicaid program. There is no monthly cost to enrollees. MA pays for current and future medical bills. MA may also pay medical bills going back three months from when we get your application.

You can have other health insurance and still qualify. MA may help pay for the cost of your other health insurance.

Medical Assistance for Employed Persons with Disabilities (MA-EPD)

MA-EPD is a work incentive health care program that provides MA coverage to employed people with certified disabilities. You must earn more than \$65 a calendar month to be eligible for MA-EPD. An asset limit of \$20,000 applies. Assets owned by your spouse do not count. You pay a monthly premium based on your income. American Indians usually do not pay a premium.

Medicare Savings Programs

Medicare Savings Programs can help pay Medicare premiums, deductibles and copays for people enrolled or who can enroll in Medicare.

MinnesotaCare

MinnesotaCare is a Minnesota health care program. MinnesotaCare is low-cost health care coverage for Minnesotans who do not qualify for MA or Medicare, or cannot get affordable insurance through an employer. Most people pay a monthly premium. The premium is based on your household size and income. Coverage starts the first day of the month after you pay your premium.

What services are covered?

MA, MA-EPD and MinnesotaCare covered services include:

- Doctor's visits
- Outpatient care
- Emergency care
- Hospital care
- Maternity and newborn care
- Mental health care
- Alcohol and drug treatment
- Prescription drugs
- Rehabilitative services
- Laboratory services
- Preventive and wellness care
- Chronic disease management
- Dental care
- Vision care including eye glasses
- Chiropractic care
- Family planning
- Hearing aids
- Medical equipment and supplies

You may have to pay a copay for some medical services. Pregnant women and children under 21 do not pay copays.

The **Medicare Savings Programs** help pay Medicare related costs.

- **Qualified Medicare Beneficiary (QMB)** pays Medicare premiums, deductibles, copays and coinsurance ([DHS-2087E](#))
- **Service Limited Medicare Beneficiary (SLMB)** pays Medicare Part B premiums ([DHS-2087G](#))
- **Qualified Individual (QI)** pays Medicare Part B premiums for higher income individuals ([DHS-2087I](#))
- **Qualified Working Disabled (QWD)** pays Medicare Part A premiums if you cannot get free Medicare Part A ([DHS-2087F](#))

How can I qualify?

You must meet program rules including income limits. How much income you can have and still qualify depends on your household size, age, pregnancy status, if you are blind or have a disability, and the health care program you qualify for. **NOTE: Income guidelines are approximations only. Use these charts for general reference.**

**MA Monthly Income Limits
effective 7/1/25 – 6/30/26**

Family size	1	2	3	For each additional person, add
Infants under 2	\$3,690	\$4,987	\$6,284	\$1,297
Pregnant Women*		\$4,899	\$6,173	\$1,274
Children 2 through 18	\$3,586	\$4,846	\$6,107	\$1,260
Parents and caretaker relatives	\$1,734	\$2,344	\$2,953	\$609
Adults age 19 -64 without children	\$1,734	\$2,344	\$2,953	\$609
Adults age 65 and older	\$1,305	\$1,764	\$2,223	\$459
People who are blind or have a disability	\$1,305	\$1,764	\$2,223	\$459

*A pregnant woman counts as two or more.

Can I qualify if my income is more than these limits?

If your income is more than the income limits, you may still qualify for MA by meeting a spenddown. A spenddown is like an insurance deductible. You pay part of your medical bills and MA pays the rest.

I am pregnant. If I qualify, will my baby get health care?

If you get MA as a pregnant woman, your baby will get MA through the month of his or her first birthday. During the first year, your baby's coverage cannot stop if he or she continues to live in Minnesota.

MA Asset Limits

Assets are items you own. Assets that may count include cash, bank accounts, stocks, bonds, certain vehicles and property where you do not live. Assets that do not count include the home where you live, household goods, personal items such as clothing and jewelry, and certain assets owned by an American Indian.

There is no asset limit if you qualify as a pregnant woman, a parent or caretaker relative of a child under age 19, a child under age 21, or an adult under age 65 without children. Parents and caretaker relatives who qualify for MA with a spenddown have an asset limit of \$20,000.

The asset limit if you qualify as a person who is blind, has a disability or is age 65 or older is \$3,000 for one and \$6,000 for a household of two or more.

**Medicare Savings Programs Monthly Income Limits
effective 7/1/25 – 6/30/26**

Family size	1	2	For each additional person, add
Qualified Medicare Beneficiary (QMB)	\$1,325	\$1,784	\$459
Service Limited Medicare Beneficiary (SLMB)	\$1,585	\$2,135	\$550
Qualified Individual (QI)	\$1,781	\$2,400	\$619
Qualified Working Disabled (QWD)	\$2,629	\$3,546	\$917

The asset limit is \$10,000 for a single person and \$18,000 for a family of two or more, except for QWD. The QWD asset limit is \$4,000 for a single person and \$6,000 for a family of two or more.

**MinnesotaCare Yearly Income Limits
effective 1/1/25 – 12/31/25**

Family Size	Income limit
1	\$30,120
2	\$40,880
3	\$51,640
For each additional person, add	\$10,760

There is no asset limit for MinnesotaCare.

What if I do not qualify for a Minnesota Health Care Program but still need coverage?

You may be able to get health care coverage through your work. Ask your employer if they offer health insurance to you and your family. If your employer does not offer affordable health insurance, you may qualify for a tax credit to help you buy health insurance.

Qualified Health Plans (QHP) and MNsure

You may be able to buy qualified health plan (QHP) coverage, with or without a tax credit on MNsure. If you qualify for a tax credit, the tax credit can help pay the monthly premium.

MNsure is Minnesota's health insurance marketplace. You can find, compare, and choose, quality health care coverage that best fits your needs and budget. QHPs are commercial health insurance plans offered by insurance companies. All plans offer preventive services, mental health and substance abuse services, emergency services, prescription drugs and hospitalization. Some plans include more benefits.

Each plan is reviewed by state regulators, certified as a QHP and approved to be sold on MNsure.

You are able to enroll in a QHP during the annual open enrollment period. You may qualify to enroll at other times due to certain life events such as the birth of a child, marriage or loss of health insurance coverage.

Advance Premium Tax Credit

The advanced premium tax credit allows you to get a federal tax credit right away to pay a part of your QHP premium. To qualify, you must file taxes at the end of the year and enroll in a QHP through MNsure. The tax credit is paid to the health plan you choose. You must pay your portion of the health care premium to the health plan to start and keep coverage.

You may also qualify for cost sharing reduction. This benefit lowers the copays, coinsurance, and out-of-pocket costs you pay for health care services.

How can I apply?

Most people can apply for all Minnesota Health Care Programs:

- Online at www.mnsure.org
- By filling out the paper Application for Health Coverage and Help Paying Costs (DHS-6696). Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

The people listed here should apply for Medical Assistance (MA) by filling out the Minnesota Health Care Programs Application for Certain Populations (DHS-3876). Use this application if you meet ONE of the following:

- Are 65 years old or older
- Are blind or have a disability
- Are only requesting help with Medicare costs
- Are 21 years old or older, have no dependents, and have Medicare coverage
- Receive Supplemental Security Income (SSI)
- Are applying for Medical Assistance for Employed Persons with Disabilities (MA-EPD)

Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

If you want to apply for payment of long-term care services such as nursing home care or services to help you stay in your home, apply:

- By filling out the Minnesota Health Care Programs Application for Payment of Long-Term Care Services paper application (DHS-3531). Go to <http://mn.gov/dhs/general-public/publications-forms-resources/application-forms/index.jsp> or call your local county agency to get the application.

Can I get help filling out the application?

You can get help filling out either the online or paper application by:

- Calling 855-366-7873.
- Contacting an assister in your area. Visit www.mnsure.org or call 855-366-7873 for an assister network list.
- Calling your local county agency.



For accessible formats of this information or assistance with additional equal access to human services, email us at DHS.info@state.mn.us, call 800-657-3672, or use your preferred relay service. ADA1 (3-24)

NO ENGLISH



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انتباه. إذا احتجت الى مساعدة مجانية في ترجمة هذه الوثيقة، اتصل بالرقم الموجود في المربع أعلاه. Arabic

মেনাযোগ দিন। যিদ আপিন বিনামূলেয এই নিখটিৰ বযাযাৰ জেনয সহায় চান তাহেল উপেক্ষাকত বাকেস থাকা নমবৰটিতে কল কৰুন। Bengali

သတိပြုရန်။ ဤစာတမ်းကို ဘာသာပြန်ဆိုင်ရန်အတွက် အခမဲ့အကူအညီ လိုအပ်ပါက၊ အထက်ဖော်ပြပါ အကွက်ရှိ နံပါတ်ကို ခေါ်ဆိုပါ။ Burmese

ការយកចិត្តទុកដាក់។ ប្រសិនបើអ្នកត្រូវការជំនួយឥតគិតថ្លៃក្នុងការបកស្រាយឯកសារនេះ សូមហៅទូរសព្ទទៅលេខក្នុងប្រអប់ខាងលើ។ Cambodian

注意！如果您需要免費的口譯支持，請撥打上方方框中的電話號碼。

Cantonese (Traditional Chinese)

wánj. héčínhanj niyé wačhínjyAn wayúiyeska ki de wówapi sutá, ečíyA kin wóiyawa ed ophíye wanj. Dakota

Paunawa. Kung kailangan mo ng libreng tulong sa pag-unawa sa kahulugan ng dokumentong ito, tawagan ang numero sa kahon sa itaas. Filipino (Tagalog)

Attention. Si vous avez besoin d'aide gratuite pour interpréter ce document, appelez le numéro indiqué dans la case ci-dessus. French

સાવધાન. જો તમને આ દસ્તાવેજને સમજવા માટે નિ:શુલ્ક મદદની જરૂર હોય, તો ઉપરના બોક્સ પૈકીના નંબર પર કોલ કરો. Gujarati

ध्यान दें। यदि आपको इस दस्तावेज़ की व्याख्या में निशुल्क सहायता की आवश्यकता है, तो ऊपर बॉक्स में दिए गए नंबर पर कॉल करें। Hindi

NO ENGLISH



651-297-3862 or 800-657-3672

Hubachiisa:-Yoo barreeffama kana hiikuuf gargaarsa bilisaa barbaaddan, lakkoofsa saanduqa armaan olii keessa jirun bilbilaa Oromo

Atenção. Se você precisar de ajuda gratuita para interpretar este documento, ligue para o número na caixa acima. Portuguese

Внимание! Если Вам нужна бесплатная помощь в переводе этого документа, позвоните по телефону, указанному в рамке выше. Russian

Pažnja. Ukoliko vam je potrebna besplatna pomoć u tumačenju ovog dokumenta, pozovite broj naveden u kvadratu iznad. Serbian

Fiiro gaar ah. Haddii aad u baahan tahay caawimo bilaash si laguugu turjumo dukumiintigan, wac lambarka ku jira sanduuqa sare. Somali

Atención. Si necesita ayuda gratuita para interpretar este documento, llame al número que aparece en el recuadro superior. Spanish

Zingatia. Iwapo unahitaji msaada usio na malipo wa kutafsiri hati hii, piga simu kwa namba iliyo kwenye kisanduku hapo juu. Swahili

ልቢ ቦሉ፡ ነዚ ሰነድ ንምትርጓም ነፃ ሓገዝ እንተ ደልዮም፣ ቦቲ ኣብ ላዕሊ ኣብ ውሽጢ ሰደጅ ተቐጥ። Tigrinya

Увага! Якщо Вам потрібна безкоштовна допомога в перекладі цього документа, зателефонуйте за номером, вказаним у рамці вище. Ukrainian

Xin lưu ý: Hãy liên hệ theo số điện thoại trong ô trên nếu bạn cần bất kỳ sự hỗ trợ miễn phí nào để hiểu rõ về tài liệu này. Vietnamese

Àkíyèsí. Tí o bá nílò ìrànlówọ̀ pẹ̀lú tí tú mọ̀ àkọọlẹ̀ yìí, pe nọmbà tó wà nínú àpótí tí wà ló kè. Yoruba

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Lus Ceeb Toom. Yog tias koj xav tau kev pab txhais lus dawb ntawm cov ntaub ntawv no, ces hu rau tus nab npawb xov tooj nyob hauv lub npov plaub fab saum toj no. Hmong

ဟ်သုဉ်ဟ်သး. နမ့ၢ်လိဉ်ဘဉ် တၢ်မၤစၢၤကလီၤလၢ ကကိၣ်းထံလံာ်တီလံာ်မိတဖဉ်အဃိ, ကိးနီဉ်ဂံၢ်လၢ အအိဉ်ဖဲတၢ်လွံၢ်နၢဉ် လၢတၢ်ဖိခိဉ်အပူၤတက့ၢ်. Karen

이 문서의 내용을 이해하는 데 도움이 필요하시면 위에 있는
전화번호로 연락해 무료 통역 서비스를 받으실 수 있습니다. Korean

تکایه سهرنج بده. ئەگەر بۆ وەرگێڕانی ئەم بەڵگەنامەیە پێویستت بە یارمەتی بێبەرەمبەرە، ئەوا
پەڕه‌ندی به‌و ژماره‌یه‌وه بکه که له بۆکسه‌که‌ی سهره‌ه‌دایه. Kurdish Sorani

Baldarî. Ger ji bo wergerandina vê belgeyê hewcedariya we bi alîkariya belaş hebe, ji kerema xwe bi hejmara li qutiya jorîn re telefon bikin. Kurdish Kurmanji

Hoǎpín. Tóhán wanǵí thí wíyukčanpi kin yuhá níyunspe héčha čhéya, lé tkíčhun kin k'é nánpa opáwinyan. Lakota

ເອົາໃຈໃສ່. ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອພຣີໃນການຕີຄວາມເອກະສານນີ້,
ໃຫ້ໃບຫາເປີທີ່ຢູ່ໃນບ່ອງຂ້າງເທິງ. Lao

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Mandarin (Simplified Chinese)

P̄alɛ ɾɔ piny: Mi gööri luäk lɔrä kɛ luɔɕ kä mɛmɛ, yɔtni nämbär ɛmɔ tɛë
nhial guäth ɛmɛ. Nuer

Mah Biz'sin'dan.

Keesh'pin nan'deh'dam'mun chi'wee'chi'goo'yan chi'nis'too'ta'man
oo'weh ooshii'be'kan.

Ishi'kidoon ah'kin'das'soon ka'ooshi'bee'kadehk ish'peh'mik ka'shi
ka'ka'kak. Ojibwe