

MINNESOTACARE AND MA OVERLAP

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People cannot receive ongoing coverage from more than 1 health care program. In some situations, people may receive overlapping MinnesotaCare and MA for a limited period. Allow overlapping coverage when:

- MinnesotaCare enrollees eligible with benefit limits (programs XX, BB, FF or JJ) are found eligible for ongoing MA (program MA or NM). MMIS will prevent overlap with program FF. Close programs XX, BB and JJ for the 1st available month.

See §0907.21.07.05 (MA for Employed Persons With Disabilities) for information on MinnesotaCare enrollees who are found eligible for MA-EPD.

- MinnesotaCare enrollees with an MA basis of eligibility apply for MA for hospital bills not covered by MinnesotaCare. See §0913.21.07 (MinnesotaCare Inpatient Hospitalization).
- MinnesotaCare enrollees apply for and are found eligible for MA for services not covered under MinnesotaCare.

Both MinnesotaCare and MA cover some pregnancy terminations. In some cases, the procedure may be covered by MA but not MinnesotaCare. MinnesotaCare enrollees may apply for MA to cover these costs. Determine if the woman is eligible for MA-PW. Open and close MA on MAXIS and MMIS in 1 action. Allow overlapping coverage for the month of the service only. Leave MinnesotaCare open unless the enrollee requests ongoing MA. To ensure that these enrollees have expanded benefits during the 60-day post partum period, open program LL or KK for the 2 months following the month of pregnancy termination. Do not change the eligibility type for children under 21 on program LL or KK from C1/C2 to pregnant woman eligibility type P1/P2 as they already receive full MA benefits.

MinnesotaCare does not cover certain services such as long term care or waived services for adults who are not pregnant women (programs XX, BB, FF or JJ). Allow coverage to overlap when MinnesotaCare enrollees apply for and are found eligible for MA to cover these services. Close MinnesotaCare for the 1st available month if the client needs ongoing MA. If the client received short term MA services and wishes to remain on ongoing MinnesotaCare, open and close MA in 1 action.

See the MMIS User Manual MC-II-22 (Coordination of Coverage) for more information.

MinnesotaCare and GAMC may not overlap. **This includes people who are changing from GAMC Hospital Only (GHO) to MinnesotaCare Limited Benefit (MLB) or the reverse.** In some cases, MMIS may require both programs to remain open for 1 month if

changes occur after capitation or 10-day notice cutoff.

If it is not possible to close GAMC Hospital Only (GHO) before the approval month for MinnesotaCare, contact the MMIS User Services Help Desk to back date the GHO closing span before approving MinnesotaCare.

EXAMPLE:

Kwame is hospitalized from November 20-23. He is approved for GHO for those dates on November 28. He is then determined to qualify for retroactive MinnesotaCare Limited Benefit (MLB) starting December 1. It is not possible to close the GHO span until December 31. Contact the MMIS User Services Help Desk before approving MinnesotaCare.

EXAMPLE:

Eloise receives MLB. She enters the hospital on March 28 and voluntarily cancels MinnesotaCare the same day. April capitation has already been paid. MinnesotaCare will close at the end of April. Eloise is still hospitalized on April 1, so she requests GHO. MMIS will allow GHO and MLB to overlap for April only.

See Bulletin #99-21-1 (Prevention of Overlapping GAMC and MinnesotaCare Eligibility) dated August 13, 1999, and the MMIS User Manual for more information.