
MinnesotaCare:

No provisions.

MA/GAMC:

The following excluded people may volunteer to enroll in MA or GAMC managed care:

- > People who currently have private health insurance through an HMO licensed by the Department of Health. The private HMO must be the same as the health plan the person will select under managed care. See §0914.03.03 (Managed Care Exclusions).
- > Children with severe emotional disturbance (SED).
- > Adults with serious and persistent mental illness (SPMI) if they have a Method A basis of eligibility.
- > **People with an LTC spenddown may enroll in MSHO. People with a medical spenddown are not eligible to enroll in MSHO. See §0914.03.25 (Minnesota Senior Health Option – MSHO).**
- > People enrolled in SIS EW with a waiver obligation (those with gross incomes over the maintenance needs allowance but less than or equal to the Special Income Standard).
- > People under age 65 who are certified as disabled but who choose a non-disabled basis of eligibility. See §0907.17.03 (MA Basis: Multiple Bases of Eligibility).
- > People ages 18 through 64 who are certified disabled with a primary diagnosis of physical disability and who reside in Anoka, **Carver**, Dakota, Hennepin, Ramsey, **Scott** or **Washington** counties. These people may voluntarily enroll in Minnesota Disability Health Options **for people with physical disabilities (MnDHO-PD)**. See §0914.03.27 (Minnesota Disability Health Options (MnDHO-PD)).
- > **People age 18 through 64 who are determined by the county to have mental retardation or a related condition, who reside in Carver, Hennepin or Scott counties and are currently receiving residential habilitative services in a Mount Olivet Rolling Acres (MORA) owned ICF/MR or a MORA-managed**

foster home, or receiving residential habilitative services from MORA in their own homes are eligible to enroll. These people may voluntarily enroll in Minnesota Disability Health Options – Developmental Disabilities (MnDHO- DD).

- > Children receiving IV-E or state adoption assistance.

Volunteers may choose to disenroll at any time for the next available month on MMIS. Request a written statement from the enrollee or authorized representative that the enrollee wishes to disenroll from the health plan. See §0914.03.11 (Managed Care Disenrollment).