

HEALTHCARE AND RELATED PROGRAMS CHART

Name	Requirements	Benefits	Resources
<p>Medical Assistance (MA) TEFRA For children with a disability who are ineligible for MA because of household income.</p>	<ul style="list-style-type: none"> •Under age 19 •Live with at least one biological or adoptive parent •Require a level of care: <ul style="list-style-type: none"> ◦comparable to that provided in a hospital, nursing home, or an intermediate care facility for people with developmental disabilities, and ◦for which the cost for home care would not be more than MA would pay for the child's care in a medical institution. •Are certified disabled 	<p>Provides Medical Assistance benefits for children with disabilities who would not qualify due to the parents' income being above program limits. Parents pay a monthly fee based on their Adjusted Gross Income (AGI) in order for their children to access services and supports.</p>	<ul style="list-style-type: none"> • Arc Guide to MA TEFRA
<p>MA for Employed Persons with Disabilities (MA EPD) For people with disabilities who are working.</p>	<p>MA-EPD allows working people with disabilities to qualify for MA under higher income and asset limits than standard MA.</p>	<p>MA-EPD covers the same services as standard Medical Assistance (MA).</p>	<ul style="list-style-type: none"> • Arc Guide to MA EPD
<p>MA Managed Care (PMAP)</p>	<p>Each applicant must meet a basis of eligibility for MA. The basis of eligibility is a federally established set of characteristics such as age, income, disability, or family status.</p>	<ul style="list-style-type: none"> • Managed Care Organization (MCO) pays for covered services (covers basic MA services including PCA services) • Covers gym membership discounts and wellness incentive programs • Enrollees go to MCO's doctors clinics, hospitals, pharmacies & specialists • Enrollees may have cost sharing 	<ul style="list-style-type: none"> • Arc Guide to Managed Care • Arc Guide to MA
<p>MA Fee for Service ("Straight MA")</p>	<p>Each applicant must meet a basis of eligibility for MA. The basis of eligibility is a federally established set of characteristics such as age, income, disability, or family status.</p>	<ul style="list-style-type: none"> • State billed directly by providers • Enrollees must find providers that accept MA • Enrollees may have cost sharing 	<ul style="list-style-type: none"> • Arc Guide to Managed Care • Arc Guide to MA
<p>Special Needs Basic Care (SNBC) Managed care for people disabilities</p>	<p>Generally, the program is open to people who are:</p> <ul style="list-style-type: none"> •Enrolled in MA and do not have a spenddown at the time of SNBC enrollment •Certified blind or disabled •Between 18 and 64 years old, with or without Medicare 	<ul style="list-style-type: none"> • Managed care with extra benefits tailored specifically to people with disabilities. • No extra cost to you 	<ul style="list-style-type: none"> • SNBC Brochure
<p>Medicare</p>	<p>Persons age 65 and older or</p>	<p>Health insurance that may pay 100% of an approved amount for</p>	<ul style="list-style-type: none"> • Medicare eligibility tool

HEALTHCARE AND RELATED PROGRAMS CHART

	Persons who are under age 65 and have a disability.	some services and require a deductible and/or co-pay for other services.	<ul style="list-style-type: none"> • Medicare website
Supplemental Security Income (SSI) For people who are: <ul style="list-style-type: none"> • Blind or have a disability (adults and children) and have limited income and resources • Age 65 or older without disabilities 	<ul style="list-style-type: none"> • Must be certified disabled by Social Security or SMRT. • No payments are made for partial or short-term disability. 	Cash Benefits	<ul style="list-style-type: none"> • Arc guide to SSI
Social Security Disability Insurance (SSDI) For people who have worked a certain length of time and paid Social Security taxes.	<ul style="list-style-type: none"> • Must be certified disabled by Social Security or SMRT. • No payments are made for partial or short-term disability. • Must have paid a certain amount of Social Security (SS) taxes, or have a parent who paid SS taxes (child must have had disability before age 22). 	Insurance Benefits	<ul style="list-style-type: none"> • Self-employment and SSDI • SSDI Work Incentives
Retirement, Survivors, and Disability Insurance (RSDI) For retired people, survivors or dependents of insured people, and people with disabilities.	Meet one of the following qualifications: <ul style="list-style-type: none"> • Be full retirement age (65 years for anyone born before 1960 and 67 years for anyone born since 1960) AND be insured under SSDI. • Be a survivor of someone who was covered by SSDI. (Widows, widowers, or dependent children. • Be certified as having a disability by SMRT or the SSA. 	Cash Benefits	<ul style="list-style-type: none"> • Arc Guide to SSI
Consumer Support Grant Alternative to Medicaid home care services of: <ul style="list-style-type: none"> • Home care nursing (HCN) • Home health aide (HHA) • Personal care assistance (PCA) 	People eligible for CSG: <ul style="list-style-type: none"> • Are eligible for Medical Assistance • Have a functional limitation that requires ongoing supports to live in the community • Live in a natural home setting 	Participants may use CSG funds to purchase a variety of goods, supports, and services beyond the usual home care categories. The services or items selected must: <ul style="list-style-type: none"> • Provide the supports needed for the person to live in their own home • Relate to the functional limitation of the person. 	<ul style="list-style-type: none"> • Arc Guide to CSG
Family Support Grant (FSG) For children with disabilities who	The Family Support Grant is available to children under 21 years: <ul style="list-style-type: none"> • Certified as having a disability 	The FSG Program provides cash grants to eligible families with children who have certified disabilities. These grants offset	<ul style="list-style-type: none"> • FSG Fact Sheet

HEALTHCARE AND RELATED PROGRAMS CHART

<p>live with their family.</p>	<ul style="list-style-type: none"> • Who live or will live in their biological or adoptive family home • Whose family has annual adjusted gross income \$100,008 or less 	<p>the higher than average expenses directly related to a child's disability and can be no more than \$3,113.99 per calendar year for each eligible child.</p>	
<p>Brain Injury (BI) Waiver For people who have a brain injury.</p>	<ol style="list-style-type: none"> 1. Eligible for Medical Assistance. 2. Certified disabled by Social Security or SMRT. 3. Under the age of 65 years at the time of opening to the waiver. 4. Diagnosed as having a brain injury. 5. Determined by the case manager/service coordinator to meet one of the following level of care criteria: <ul style="list-style-type: none"> • Nursing Facility (BI-NF) or • Neurobehavioral Hospital (BI-NB) 6. Has an assessed need for supports and services over and above those available through the MA State plan. 	<p>Home and community-based services necessary as an alternative to institutionalization that promote the optimal health, independence, safety and integration of a person and who would otherwise require the level of care provided in a specialized nursing facility or neurobehavioral hospital.</p>	<ul style="list-style-type: none"> • BI Waiver Fact Sheet
<p>Community Alternative Care (CAC) Waiver For people who are chronically ill or medically fragile and who would otherwise require the level of care provided in a hospital.</p>	<ol style="list-style-type: none"> 1. Eligible for Medical Assistance 2. Certified disabled by Social Security or SMRT. 3. Under the age of 65 years at the time of opening to the waiver 4. Determined by the case manager/service coordinator to meet the hospital level of care criteria 5. Has an assessed need for supports and services over and above those available through the MA State Plan. 	<p>Home and community-based services necessary as an alternative to institutionalization that promote the optimal health, independence, safety and integration of a person who is chronically ill or medically fragile and who would otherwise require the level of care provided in a hospital</p>	<ul style="list-style-type: none"> • CAC Waiver Fact Sheet
<p>Community Access for Disability Inclusion (CADI) Waiver For people who would otherwise require the level of care provided in a nursing facility.</p>	<ol style="list-style-type: none"> 1. Eligible for Medical Assistance 2. Certified disabled by Social Security or SMRT. 3. Under the age of 65 years at time of opening to the waiver 4. Determined by the case manager/service coordinator to need nursing facility level of care 5. Has an assessed need for supports and services over and above those available through the MA State plan. 	<p>Home and community-based services necessary as an alternative to institutionalization that promote the optimal health, independence, safety and integration of a person who would otherwise require the level of care provided in a nursing facility.</p>	<ul style="list-style-type: none"> • CADI Waiver Fact Sheet
<p>Developmental Disabilities (DD) Waiver For people with disabilities who would require the level of care provided in an</p>	<ol style="list-style-type: none"> 1. Eligible for Medical Assistance based on a disability diagnosis 2. Have a developmental disability or a related condition 3. Determined by the case manager/service coordinator to meet the ICF/DD level of care criteria 4. Require daily interventions, daily service needs and a 24-hour plan of care 	<p>Home and community based services necessary as an alternative to institutionalization that promote the optimal health, independence, safety and integration of a person who meets the waiver eligibility criteria and who would require</p>	<ul style="list-style-type: none"> • Arc Guide to DD Waiver

HEALTHCARE AND RELATED PROGRAMS CHART

Intermediate Care Facility for Persons with Developmental Disabilities.	that is specified in the community support plan 5. Have an assessed need for supports and services over and above those available through the MA State Plan.	the level of care provided in an Intermediate Care Facility for Persons with Developmental Disabilities.	
Elderly Waiver For people age 65 and older who require nursing home level of care, but choose to live in the community.	<ul style="list-style-type: none"> • Be a Minnesota resident • Be age 65 or older • Be assessed by a Long Term Care Consultation (LTCC) to need nursing facility level of care • Be eligible for payment of long term care under Medical Assistance 	Funds home and community-based services for people age 65 and older who require the level of care provided in a nursing home and choose to live in the community. Offers services that go beyond what is available through Medical Assistance.	<ul style="list-style-type: none"> • Elderly Waiver Fact Sheet

*All information on this chart can be found on the [Minnesota Department of Human Services'](#) website, or on [The Arc Greater Twin Cities'](#) website.

Other Resources:

- [Disability Benefits 101](#)
- [Arc Guides](#)