



Arc Guide to Medical Assistance (MA) Renewals

All Medical Assistance enrollees are required to renew their healthcare either every 6 or 12 months.

The type of renewal form enrollees receive depends on what type of MA program they are on and how they applied.

MNSure - Standard MA or MA Fee-for-Service (MA FFS)

If the enrollee applied for MA through the online MNSure application and receives MA through a managed care plan (known as a Prepaid Medical Assistance Program or PMAP) or are on MA FFS, the enrollee will either receive an auto-renewal notice from MNSure or a need-to-renew form.

Auto-Renewal

If the state can determine the enrollee's eligibility for MA with information it has access to through the MNSure system, then the enrollee is "auto-renewed." The enrollee will receive a notice that coverage has been auto-renewed and directions on how to follow up with MNSure if any information needs to be changed. If all information is correct, the enrollee does not have to sign or return paperwork for that renewal.

Need-to-Renew

Sometimes the enrollee's healthcare cannot be renewed using available information. Need-to-renew notices go out to those who:

- Need to submit verifications (e.g., paystubs, copy of private health insurance card). Required verifications will be listed on the document.
- Did not agree to use of federal data for renewal on their initial application

The enrollee will receive a form with the information MNSure has on file. They will be asked to review the form and write in any changes. Then they will sign and return the renewal form with required copies of verifications. The form will indicate where and when to return the information.



MNsure or County - Disability-based MA (MA-TEFRA or MA for Employed Persons with Disabilities)

Whether the enrollee applied for disability-based MA online through MNsure or by paper through their county, the county will mail a notice and a renewal form. The form may be county- specific or be the [DHS 3418 Minnesota Health Care Programs Renewal Form](#). This renewal form needs to be completed, signed, dated and sent back to the county along with the required verifications listed on the form. These verifications may include paystubs and bank statements. Please mail or fax back to the appropriate address or fax number. For a listing of county addresses and contact information, click [here](#).

Tips for filling out the MA renewal forms:

- Read all instructions before completing the renewal application.
- Submit copies of verifications, not originals.
- Write the case number and financial team number on top of each page of the renewal form and verifications.
- Return the renewal application to the county by the date listed.
 - Late renewals will be processed if received during the renewal month.
 - If late renewals are received after the renewal month, the enrollee will receive a case closure letter and will need to reapply.
- Mail, fax or drop off renewal forms to the county.
- If renewing for someone who receives Supplemental Security Income (SSI) or Social Security Disability Income (SSDI), send in a copy of the Social Security award letter (or most recent benefit amount notice) showing the amount of disability benefit awarded.
- If the enrollee is under 21, bank statements and other asset information are not required when submitting the renewal application.
- If anyone in the household is claiming the enrollee on their taxes as a dependent, regardless of the individual's age, the tax filer claiming the enrollee will need to document their employment and submit income and asset proofs. Note:
 - If the enrollee is over 21 years old, include copies of their bank accounts and other assets listed as well
- If the enrollee is not claimed by any household member on their taxes, only the enrollee's employment, income, and assets need to be listed
- Signatures:
 - Parents/stepparents must sign the "Signature page" on behalf of an enrollee under age 18.



- If the enrollee is 18 years old or older, they must sign the renewal form in the box titled “your signature” on the Signature page.
 - If the enrollee is under guardianship or has designated an Authorized Representative, the Authorized Representative must sign the form in the box titled “Signature of Authorized Representative.”
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- Once the renewal has been submitted, call and follow up with the county financial team or worker to ensure the renewal was received and is being processed. Please wait 5-7 business days before calling for updates.
 - The enrollee will receive a notice that their healthcare was renewed.
 - Call the financial team or worker listed on the renewal notice with questions or concerns.
 - Call The Arc Minnesota for further assistance.

For further information or advocacy services, contact The Arc Minnesota at 952-920-0855 or toll-free at 833.450.1494 or visit www.arcminnesota.org. (Please note: *This document is not legal advice, and should not be construed as such. Thus, no information herein should replace the sound advice of an attorney.*)

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