

Frequently Asked Questions

Medical Assistance Coverage Renewals

Do all Medical Assistance (MA) members have to do a renewal and are they happening at the same time?

Yes. All MA members have to complete a renewal to remain enrolled in the program, but the renewals are not all happening at the same time. The renewals have been spread over a 12-month time period and will occur over the next year. Groups of members who do not complete a renewal, or are ineligible for MA for other reasons, will lose eligibility on the first of each month.

If a MA member loses eligibility, will they be able to obtain retroactive eligibility?

Yes. If a MA member completes a renewal after losing eligibility, they can gain retroactive eligibility. However, the Minnesota Department of Human Services (DHS) cannot guarantee that all members that lose eligibility will be gain retroactive eligibility. While it is expected that the majority of members that are currently eligible for the program now will remain eligible going forward, the only way this can be confirmed is for the member to submit a renewal and be determined to be eligible for the program again.

Who determines whether a member is eligible for the program? Does DHS renewals and do eligibility determinations?

DHS does not process renewals or do eligibility determinations. The counties and tribal agencies process renewals and do eligibility determinations. If a MA member has questions about their renewal form, they can contact their local county or tribal agency. Contact information for each county and tribal agency are available online at: <https://mn.gov/dhs/people-we-serve/seniors/health-care/health-care-programs/contact-us/county-tribal-offices.jsp>.

Does the renewal process impact fee-for-service members, members enrolled with the Managed Care Organizations or both?

Both. The renewals apply to all MA members.

MA does not allow pharmacies to accept cash payments for covered prescription drugs unless the member and prescriber complete the Advance Member Notice of Noncovered Prescription form. Are pharmacies still prohibited from accepting cash payments from members that lose eligibility?

No. Pharmacies are not prohibited from accepting cash payments for prescription drugs from members that have lost eligibility for MA. If the member is not eligible for MA on the date of service, then the MA program requirements, including the use of the Advance Member Notice of Noncovered Prescription form, do not apply to them. However, pharmacies should be aware that members may receive retroactive MA eligibility. Utilizing the Advance Member Notice of Noncovered Prescription form for member that have lost eligibility during the renewal process may be in the pharmacy's interest if the member regains coverage and the prescription is not covered by MA.

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If a member loses MA eligibility and needs a prescription refilled, will the member's eligibility be reactivated on the same day if they contact the county or tribal agency?

Unfortunately, no. Members who lose eligibility may gain retroactive eligibility for MA if they complete a renewal, but there will be period of time between when the renewal is submitted, and the eligibility is restored.

If a member loses MA eligibility and needs a prescription refilled, can the pharmacy dispense a small quantity of the prescription to the member, without charging the member, and bill for the prescription once the member obtains retroactive coverage?

Yes. However, DHS cannot guarantee payment for these claims. If the member obtains retroactive coverage and the prescription is for a covered drug, the pharmacy can submit these claims after the eligibility is restored. If the member is not granted retroactive coverage, or is ineligible for MA, the pharmacy will not be able to bill the claim to DHS or the MCOs and receive payment.

If a member loses MA eligibility and needs a prescription refilled, can the pharmacy submit a claim for the prescription to a prescription discount card?

Yes. A prescription discount card may help the member gain, or retain, access to their needed medications. However, it is important that the member understands that they may still be eligible for MA. DHS does not want to encourage the use of prescription discount cards over the member submitting a renewal. MA eligibility would not only help ensure the member has access to their prescription drugs, but MA provides a comprehensive healthcare benefit set to the member that a prescription discount card does not.

If a member has MA and they can't pay their copay a pharmacy is required to still dispense the prescription to the member. If a MA member loses eligibility and cannot afford the prescription, is the pharmacy required to dispense the prescription to the member?

No. MA program requirements, including the prohibition on providers withholding access to services if the member is unable to pay a copay, do not apply to members that lose eligibility. DHS encourages the pharmacy to work with the member to minimize or prevent gaps in their treatment regimens, but DHS cannot require the pharmacy to dispense the prescription without payment.