HF 1384, Hicks / SF 1272, Maye Quade

**MA-EPD** Reform

Medical Assistance for Employed Persons with Disabilities (MA-EPD) has helped disabled Minnesotans to work, thrive, and contribute to Minnesota's communities and economy since 2001. Now, after over 20 years, it's time to eliminate the additional and unnecessary taxes on working people. We must update MA-EPD to minimize barriers, reduce unnecessary administrative burdens, and revitalize the workforce.

"The high monthly cost for MA-EPD means I make choices monthly between things like fresh produce and my premiums, or paying my car payment on time or paying for MA-EPD on time."

-MA-EPD Recipient

## How Minnesota Can Improve MA-EPD

- Eliminate the asset limit of \$20,000 for Employed Persons with Disabilities
  - o Removing the asset limit would align Minnesota's MA-EPD program with the state's MA for children, parents, single adults, pregnant people, and MinnesotaCare.
- Eliminate premiums
  - MA-EPD premiums are an unnecessary, additional tax on employed people with disabilities and an administrative burden on the state and lead agencies. People with disabilities who need services and supports through MA should be able to maintain employment. The premiums contribute to the cycle of poverty for working people with disabilities.
- Account for other health insurance payments
  - o People who use MA-EPD are often required to participate in Medicare and/or private insurance.
    - This proposal would make Medicare premiums reimbursable for all participants
- Streamline administrative aspects of the program
  - o Change the renewal process from every 6 months to 12 months
- Ensure people can re-enroll in the program
  - o For those who may have fallen off the program due to high premiums or barriers to the program, ensure they can re-enroll without penalty

