

Overview of Public Assistance Programs

Public Assistance Programs: A Series

November 2024

Public Assistance Programs is a series of publications that describe state and federal programs that provide assistance in the form of health care, income, food, housing, and child care. This work provides an overview of each program. Please see the list on the last page for other works in this series, each of which describes an individual program.

Overview

This publication provides legislators with an overview of the following public assistance programs that provide health coverage and financial and other benefits to Minnesotans:

- General Assistance (GA)
- Minnesota Family Investment Program (MFIP)
- Minnesota Supplemental Aid (MSA)
- Supplemental Security Income (SSI)
- Medical Assistance (MA)
- MinnesotaCare
- Subsidized health coverage through MNsure
- Child Care Assistance Program (CCAP)
- Nutrition Assistance Programs
- Housing Support

For each program, there is a discussion of the program’s general purpose, eligibility requirements (including income and asset limits), administration and governance, and expenditures and caseloads. Much of this information is provided in tables that allow comparisons across the programs.

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Program Descriptions

Income Assistance Programs

The first four programs, GA, MFIP, MSA, and SSI, provide income assistance to eligible needy families and individuals.

General Assistance (GA) is a state program that provides cash assistance to low-income childless individuals or couples who are unable to work enough to support themselves and who meet the GA eligibility requirements, including income and asset requirements.

The **Minnesota Family Investment Program (MFIP)** is a jointly funded, federal-state program designed to provide income assistance for eligible low-income families. MFIP replaced the Aid to Families with Dependent Children (AFDC) program, which was repealed by Congress in 1996.

Minnesota Supplemental Aid (MSA) is a state program that provides supplemental cash assistance to people: (1) who are aged, blind, or disabled and SSI recipients; or (2) who would qualify for SSI except for excess income.

Supplemental Security Income (SSI) is a federal program that provides cash assistance to low-income aged, blind, and disabled persons.

Health Care Programs

MA and MinnesotaCare cover the cost of health care for eligible low-income families and individuals. MNsure, the state's health insurance exchange, makes subsidized health coverage available to low- to middle-income families and individuals.

Medical Assistance (MA) is a jointly funded, federal-state program that pays for health care services provided to parents and caretakers, children, pregnant women, adults without children, persons who are age 65 and over, persons who are blind or have disabilities, and other specified groups. MA is Minnesota's Medicaid program, and is administered by the counties, under the supervision of the Department of Human Services (DHS). Federal Medicaid law allows states considerable flexibility in designing their Medicaid programs. MA income and asset limits vary by eligibility group. Most MA enrollees receive services through a managed care delivery system; persons who are blind or have disabilities may opt out of managed care and receive care through fee-for-service. The program has no cost-sharing requirements and most enrollees are not subject to premiums.

MinnesotaCare provides subsidized health coverage to eligible Minnesotans—mainly parents and caretakers and adults without children who do not qualify for MA. It is administered by DHS under federal guidance as a Basic Health Program. MinnesotaCare covers most, but not all,

services provided under MA. The program has an income limit but no asset limit, and individuals must meet requirements related to lack of access to, and no enrollment in, other health coverage. The vast majority of MinnesotaCare enrollees receive services through a managed care delivery system. Some enrollees are subject to cost-sharing requirements and pay premiums based on a sliding scale.

MNsure, the state's health insurance exchange, was established by the Minnesota Legislature as part of implementation of the federal Affordable Care Act (ACA). Individuals who are not eligible for Medical Assistance (MA) or MinnesotaCare may be eligible for premium tax credits and cost-sharing reductions to purchase health coverage on a subsidized basis through MNsure. Health coverage purchased through MNsure covers the essential health benefits required by the ACA. Enrollees are subject to cost-sharing requirements and pay premiums based on a sliding scale.

Programs Providing Financial Assistance for Specific Purposes

The remaining three programs provide financial assistance to recipients for certain living expenses. The Child Care Assistance Program (CCAP) subsidizes child care costs for individuals eligible for MFIP and other low-income families. The Food Support program provides food purchasing assistance to eligible low-income households. The Housing Support program subsidizes the housing costs of certain low-income individuals who live in community-based group residences.

CCAP is a federal-state program that subsidizes the child care expenses of eligible low-income families. The purpose of the assistance is to help parents with the cost of child care so that the parents can seek or retain employment or participate in education or training that leads to employment.

Nutrition Assistance Programs increase the food purchasing power of low-income households and include a variety of programs such as the food support program, food shelf grants, and the American Indian Food Sovereignty Program. Food Support is also called "Food Stamps" or the Supplemental Nutrition Assistance Program (SNAP), and is the largest of the nutrition assistance programs.¹ The majority of the funding is from the federal SNAP program. However, Minnesota also administers a state-funded food assistance program for certain lawfully present noncitizens who are not eligible for the federal SNAP benefits. This brief primarily focuses on the Food Support program.

The **Housing Support Program** (formerly known as group residential housing or GRH) is a state program that provides payments on behalf of eligible persons to pay for room and board and related housing services.

¹ In Minnesota, the program is referred to as Food Support. The federal program was called Food Stamps until October 1, 2008, when its new name became effective: Supplemental Nutrition Assistance Program (SNAP).

Program Eligibility

In general, individuals must be categorically and financially eligible to participate in each of the public assistance programs and must meet other eligibility criteria that vary across programs.

Categorical Eligibility

Categorical eligibility means that an individual belongs to a population group, such as one based on demographics or disability status, for which eligibility is available under a program.

Categorical eligibility varies across the programs. Some programs are limited to specified categories of individuals while other programs are available to all individuals who meet the financial and other eligibility criteria.

Financial Eligibility

Financial eligibility also varies across the programs and is generally assessed using income and asset limits.

An **income limit** is typically assessed by measuring an individual's or family's income against a standard measure, such as the federal poverty guidelines (FPG). All the programs except the tax credits for health insurance coverage have an income limit, but the limits vary across the programs and may also vary within a program. This means that a family or household unit may be eligible for some but not all programs, and certain family or household members may be eligible for a specific program, while other family members are ineligible for that program. Programs may disregard certain amounts of income or disregard certain types of income.

Most, but not all, of the programs have an **asset limit**. Asset limits are expressed as a specified dollar amount. For eligibility purposes, the value of an applicant or individual's cash and liquid assets, and other specified asset types, cannot exceed the dollar value of the asset limit. Programs with asset limits in place typically exempt certain types of assets from being counted toward the program asset limit. For example, for each program with an asset limit, the value of homesteads and at least one car is exempt from the limit.

Table 1 summarizes eligible groups and income and asset limits for the programs.

Table 1: Income and Asset Limits

Program	Eligible Group	Income Limit	Asset Limit (Excluding exempt assets)
GA	Single adult	\$203/month (As specified in law)	\$10,000
GA	Married couple with no children	\$260/month (As specified in rule)	\$10,000

Program	Eligible Group	Income Limit	Asset Limit (Excluding exempt assets)
MFIP	Eligible family with no unrelated household member	\$1,812/month for a family of four in FFY 2024 (As specified in statute, based on family size)	\$10,000
MSA	Single adult living alone	\$1,004/month in CY 2024 (As specified in statute and rule)	Uses SSI (\$2,000) or GA (\$10,000) asset limits, depending on the characteristics of the individual
MSA	Married couple living alone	\$1,506/month in CY 2024 (As specified in statute and rule)	Uses SSI (\$2,000) or GA (\$10,000) asset limits, depending on the characteristics of the individual
MSA	Individual eligible for personal needs allowance only	\$125/month in CY 2024 (As specified in statute and rule)	Uses SSI (\$2,000) or GA (\$10,000) asset limits, depending on the characteristics of the individual
SSI	Individual living alone	\$943/month in CY 2024 (Does not exceed maximum monthly SSI benefit)	\$2,000 for single person; \$3,000 for married couple
SSI	Married couple living alone	\$1,415/month in CY 2024 (Does not exceed maximum monthly SSI benefit)	\$2,000 for single person; \$3,000 for married couple
SSI	Individual living with others	\$629/month in CY 2024 (Does not exceed maximum monthly SSI benefit)	\$2,000 for single person; \$3,000 for married couple
SSI	Married couple living with others	\$943/month in CY 2024 (Does not exceed maximum monthly SSI benefit)	\$2,000 for single person; \$3,000 for married couple
MA	Parents, caretakers, and children; pregnant women; adults without children; persons aged 65 and over, or who are blind or have disabilities	100% to 283% of FPG (depending upon the eligibility group)	Persons aged 65 and over, or who are blind or have disabilities: \$3,000 for one person; \$6,000 for two people; \$200 for each additional person.

Program	Eligible Group	Income Limit	Asset Limit (Excluding exempt assets)
			Parents and caretakers on a spend-down: ² \$10,000 for one person and \$10,000 for two or more.
MinnesotaCare (MNCare)	Mainly adults without children and parents and caretakers	200% of FPG ³	No asset limit
Premium Tax Credits (MNsure)	All eligible individuals	Greater than 200% of FPG; ⁴ no maximum income limit through CY 2025	No asset limit
Cost-sharing Reductions (MNsure)	All eligible individuals	Greater than 200% but not exceeding 250% of FPG, for most individuals	No asset limit
CCAP	Families with one or more children under age 13 (or 15 if the child has a disability)	47% - 67% of SMI at program entry	\$1,000,000
SNAP	Household with disabled or elderly (age 60+) member	Net income at or below 100% of FPG	No asset limit
SNAP	Household	Gross income at or below 165% of FPG and net income at or below 100% of FPG	No asset limit
Housing Support	Individual	\$1,135/month for a group setting and \$1,185/month for a community setting in FY 2024 (An individual's income, after exclusions, must be less than the monthly rate for the Housing Support setting)	\$10,000

Sources: Minnesota Statutes, Rules, and state agency guidance.

Note: "SMI" is state median income.

² Certain eligibility groups with income above the program income limit may qualify through a "spend-down," under which the individual incurs medical bills equal or greater to the difference between that individual's income and the MA spend-down limit.

³ For most persons, income must also be greater than 133 percent of FPG.

⁴ Persons with incomes not exceeding 200 percent of FPG are not eligible for premium tax credits because they are eligible for MA or MinnesotaCare.

Other Eligibility Criteria

In addition to being categorically and financially eligible for the programs covered in this brief, applicants must meet other eligibility criteria.

All the programs require that applicants reside in Minnesota, and all except MinnesotaCare require that applicants are U.S. citizens or lawfully present in the United States.⁵

In some cases, applicants must also meet program-specific eligibility criteria. For example, to participate in CCAP, parents must work or participate in training or educational activities and cooperate with Child Support. To enroll in MinnesotaCare, applicants must not have access to, or be enrolled in, certain types of health care coverage.

Program Administration and Governance

Just as the programs are financed in different ways, they are also governed and administered in different ways. Many of the programs are jointly governed by federal and state laws, while others are subject only to federal or state laws. Table 2 lists the federal and state laws and regulations that govern each of the programs covered in this publication.

Joint Federal-State Programs

The following programs described in this guide were established under federal law and are administered jointly by the federal government and the state:

- Medical Assistance (MA)
- MinnesotaCare⁶
- Minnesota Family Investment Program (MFIP)
- Child Care Assistance Program (CCAP)
- Food Support (FS)

For these programs, the U.S. Congress enacts laws that set broad standards and requirements for the programs, and federal agencies adopt regulations and provide administrative guidance to states. State programs must remain within these federal standards and meet federal requirements to receive federal program funding, but states often have considerable flexibility in program design and administration. For example, states under MA are required to cover certain individuals and provide certain services but have the option under federal law to cover additional groups of individuals and provide additional services.

⁵ Beginning January 1, 2025, undocumented persons are eligible for MinnesotaCare coverage.

⁶ MinnesotaCare was initially established as a state-only program, but now it operates under federal law as a Basic Health Program under [42 United States Code](#), section 18051.

State-Only Programs

The following programs are state-only and were authorized under state rather than federal law:

- General Assistance (GA)
- Minnesota Supplemental Aid (MSA)
- Housing Support

For these programs, the administering state agency adopts rules and provides guidance to county agencies, health care providers or vendors, and program enrollees.

Federal-Only Programs

The following programs were established under federal law and, while administered by MNsure, the state’s insurance exchange, the state has little flexibility about how the program is designed or operated in the state, unless a federal waiver or other special approval is obtained:

- Premium tax credits
- Cost-sharing reductions

Finally, the Supplemental Security Income program was established by federal law and is administered by local offices of the Social Security Administration in each state. The local offices determine if an applicant is eligible for benefits, determine the amount of the grant, and authorize the payment.

Table 2: Federal and State Laws and Regulations Governing Public Assistance Programs

Program	State Governance			Federal Governance		
	Administering Agency	Minnesota Statutes	Minnesota Rules	Administering Agency	United States Code	Federal Regulations
GA	DHS	§§ 256D.01 to 256D.21; Chapter 256P	Parts 9500.1200 to 9500.1272	N/A	N/A	N/A
MFIP	DCYF	Chapters 142G , 256P	N/A	DHHS	42 USC § 601 , et seq.	45 CFR Parts 260 to 265
MSA	DHS	§§ 256D.33 to 256D.54; Chapter 256P	N/A	DHHS	42 USC § 1382	20 CFR Part 416 , subpart T
SSI	N/A	N/A	N/A	SSA	42 USC § 1381	20 CFR Part 416

Program	State Governance			Federal Governance		
	Administering Agency	Minnesota Statutes	Minnesota Rules	Administering Agency	United States Code	Federal Regulations
MA	DHS	Chapter 256B	Chapters 9505 , 9549 , 9553	DHHS	42 USC § 1396 , et seq.	42 CFR Parts 430 to 498
MNCare	DHS	Chapter 256L	Chapter 9506	DHHS	42 USC § 18051	42 CFR Part 600
Premium Tax Credits	N/A	N/A	N/A	IRS	26 USC § 36B	26 CFR Part 1
Cost-Sharing Reductions	N/A	N/A	N/A	DHHS	42 USC § 18071	45 CFR Parts 155.305 , 156.420
CCAP	DCYF	Chapter 142E	Chapter 3400	DHHS	42 USC § 9858 , et seq.	45 CFR Parts 98 to 99
Food Support	DCYF	§ 142A.03 ; §§ 142F.05 to 142F.102 ; §§ 142F.11 to 142F.12; § 256J.28 ; § 393.07	N/A	USDA	7 USC § 2011 , et seq.	7 CFR Parts 271 to 285
Housing Support	DHS	Chapters 256J , 256P	N/A	N/A	N/A	N/A

Notes: “N/A” means not applicable. “DHHS” is the federal Department of Health and Human Services.

County Administration

Many of the state’s public assistance programs are county-administered. In such cases, a state agency (typically DHS or DCYF for the programs covered in this brief) supervises program administration, promulgates rules, develops program manuals and bulletins governing the administration of the programs, and provides administrative and technical support to counties. But it is the counties that do much of the hands-on work in administering the programs. County human services agencies process applications, determine the eligibility of applicants, and perform other administrative duties under the supervision of the state agency that administers the program.

Tribal Administration

Federal law allows federally recognized Tribal groups to administer their own Temporary Assistance for Needy Families (TANF) programs. If a Tribal group wants to administer its own TANF program, the Tribe must submit a plan to the federal Department of Health and Human Services (DHHS). Funding for Tribal TANF programs comes from the state TANF block grant of the state in which the Tribe’s service area is located. Currently, two Tribes located in Minnesota administer their own TANF program: Mille Lacs Band of Ojibwe and Red Lake Band of Chippewa Indians.

Program Expenditures and Caseloads

The costs of the public assistance programs are financed in different ways. Some of the programs, which have been referenced as “federal-state programs” are financed with state and federal funding. Federal funding provided to Minnesota for these programs may be:

- based on a percentage of state program expenditures (e.g., the federal government reimburses the state for 51.16 percent of the cost of most medical assistance services for federal fiscal year 2025);
- provided as a block grant, meaning the federal government provides a set amount of funding to a state for a general purpose (as is the case for the MFIP program); or
- provided to any eligible household (as is the case with SNAP).

Some programs are state-only, meaning the state does not receive federal funding for the program, and others operate in the state with only federal funding. A few programs are also financed with county funding, in addition to any federal or state funding.⁷

Table 3 below summarizes expenditures and enrollment for each program.

Table 3: Expenditure and Caseload Data by Public Assistance Program (State Fiscal Year 2023 unless otherwise specified)

Program	Program Expenditures				Average Monthly Recipients or Enrollees
	Total	Federal Share	State Share	Other	
GA	\$50,276,075	N/A	\$49,581,093	\$694,982 (county share)	21,777 (cases)

⁷ Beginning January 1, 1991, the state assumed responsibility for, or “took over,” the historic county share of expenditures for public assistance benefits. From that point on, counties were not responsible for paying a share of the program costs of certain state-mandated assistance programs, except in specific circumstances or for certain health services.

Program	Program Expenditures				Average Monthly Recipients or Enrollees
	Total	Federal Share	State Share	Other	
MFIP plus DWP, Work Benefit Program, and Housing Assistance Grant	\$313,191,770	\$245,398,571	\$67,793,199	N/A	66,671
MSA	\$54,581,396	N/A	\$54,581,396	N/A	30,152
SSI	\$727,175,000	\$727,175,000	N/A	N/A	88,255
MA	\$18,143,230,782	\$11,708,318,123	\$6,261,213,354	173,699,305 (county share)	1,404,673
MNCare	\$676,469,952	\$617,661,234	\$57,855,771	\$952,947 (enrollee premiums)	101,039 (as of May 2024)
Premium Tax Credits (MNSure)	N/A	\$263,720,089 (CY 2023)	N/A	N/A	64,201 (CY 2023)
Cost-Sharing Reductions (MNSure)	N/A	\$2,388,076 (CY 2023)	N/A	N/A	7,709 (CY 2023)
CCAP	\$236,747,592	\$182,706,104	\$51,100,254	\$2,941,235	11,539 (families)
Food Support	\$1,234,228,668	\$1,232,211,677	\$2,016,990	N/A	449,203
Housing Support	\$199,791,604	N/A	\$197,595,775	\$2,195,829 (county share)	20,218

Sources: Data for MFIP, GA, MSA,CCAP, and Housing Support from DHS’s Background Data Tables for February 2024 Forecast, available at <https://mn.gov/dhs/general-public/publications-forms-resources/reports/financial-reports-and-forecasts.jsp>. Data for premium tax credits and cost-sharing reductions are from MNSure email communications, June 18, 2024, and September 20, 2024. Data for SSI and Food Support are from DHS’s Minnesota Family Self-Sufficiency and Health Care Program Statistics, August 2024.

Notes: “N/A” means not applicable. The program expenditures are for program costs or direct benefits only.

Appendix: Income Limits

The table below shows the dollar amounts for the income limits in the body of this publication that are expressed as a percentage of the federal poverty guidelines or the state median income.

Selected Income Limits by Household Size

Household Size	Federal Poverty Guidelines (FPG)					State Median Income (SMI)	
	100%	165%	200%	250%	283%	47%	67%
1	\$15,060	\$24,601	\$30,120	\$37,650	\$42,619	N/A	N/A
2	20,440	33,389	40,880	51,100	57,845	\$44,006	\$62,731
3	25,820	42,177	51,640	64,550	73,070	54,360	77,492
4	31,200	50,965	62,400	78,000	88,296	64,714	92,252
5	36,580	59,753	73,160	91,450	103,521	75,068	107,012
6	41,960	68,542	83,920	104,900	118,746	85,423	121,773
7	47,340	77,330	94,410	118,350	133,972	87,365	124,541
8	52,720	86,118	105,440	131,800	149,197	89,306	127,308

Sources: The dollar limits corresponding to the FPG were calculated by the authors using the 2024 FPG for the 48 contiguous states. The dollar limits corresponding to the SMI are from the Minnesota Child Care Assistance Program Copayment Schedules, effective October 14, 2024.

Note: “N/A” means not applicable.

About This Series

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Current works in this series include:

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- Child Care Assistance Program (CCAP)
- Food Support
- Housing Support

Please see the health and human services area of the House Research website for more information about these programs and related topics.

Earlier Versions

Information in the series was originally published as the *Minnesota Family Assistance: A Guide to Public Programs Providing Assistance to Minnesota Families*, which was a comprehensive guide to these programs.



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