



Health Care for Noncitizens

Can I get help with health care if I'm not a US citizen?

Minnesota has 3 health care programs for low-income people. If you are a noncitizen, you might be able to get help from one of these programs, BUT it depends on your **income**, your **immigration status**, and the **date** you got your immigration status.

The programs are:

1. Medical Assistance (MA)
2. MinnesotaCare (MNCare)
3. Emergency Medical Assistance (EMA)

1. Medical Assistance (MA)

The first MN health care program is MA. MA covers most necessary medical services. To be able to get MA, you have to be **low income**, have a basis for **eligibility**, and meet **immigration criteria**.

Can I get MA?

To be able to get MA, you have to be at least one of these:

- pregnant
- part of an MFIP household or living with minor children
- younger than 21
- certified disabled (by Social Security or the State)
- 65 or older
- 21 or older with no minor children in your household



Income guidelines depend on your age and if you have children, are disabled, or are pregnant. Only people in the elderly or “disabled” category have asset limits for MA.

If you don't fit into any of those categories, you probably can't get MA.

If you do fit into one of the categories above, you usually have to also be a “**qualified**” **noncitizen** under federal law.

You are a “**qualified**” noncitizen if you:

- Have a **green card**. (Meaning you are a legal permanent resident or have LPR status).
- Have been granted **asylum**.
- Were **paroled** into the U.S. for at least a year, and your parole is not expired.
- Have **withholding** or **cancellation of removal**.
- Have a **T-visa** as a victim of severe trafficking.
- Have **battered immigrant** status.

- Are a **refugee** or **treated as if you are a refugee**. This means you are:
 - An “Amerasian” immigrant whose father was a US citizen in Southeast Asia during the Vietnam War years.
 - A Cuban or Haitian entrant
 - An Afghan or Iraqi Special Immigrant
 - An evacuee from Afghanistan by the US military between 7/31/21 and 9/30/22 (until your parole ends)
 - The immediate relative of an evacuee from Afghanistan described above who was paroled after 9/30/22
 - Paroled from Ukraine between 2/24/22 and 9/30/23
 - A citizen of the “Compacts of Free Association.” This means you are from Palau, Micronesia, or the Marshall Islands.

5-Year Waiting Period

Even if you are a “qualified” noncitizen, **you may have to wait 5 years** (from the date you became “qualified”) to get MA. You do **NOT** have to wait 5 years if you are any of these:

- a refugee
- someone who has been granted asylum
- someone who has withholding of removal
- a U.S. veteran or on active duty with the U.S. armed forces
- the spouse or minor child of a veteran or of someone on active duty with the U.S. armed forces.
- from Palau, Micronesia, or the Marshall Islands.
- From Ukraine and granted humanitarian parole or the immediate relative of someone granted humanitarian parole between 2/4/22 and 9/29/23
- An evacuee from Afghanistan by the US military between 7/31/21 and 9/30/22 or the immediate relative of an evacuee who was paroled after 9/30/22



What if I have a Sponsor?

Most people who come to the U.S. have a relative in the U.S. sponsor them. A relative sponsor is a family member who is a citizen or LPR. The sponsor agrees to be responsible for you in the U.S. Sponsors have promised the USCIS that if you become poor, they will support you.

If you came to the U.S. after December 19, 1997 through a relative petition, the government can count the income and assets of your sponsor and your sponsor’s spouse as if they were your income and assets. If more than one person sponsored you, the other sponsor’s income and assets also count as your income and assets. Sponsor income and assets count until you become a U.S. citizen, your sponsor dies or permanently leaves the U.S., or you have worked 10 years at work where FICA taxes are deducted from your pay. You may also get credit for work done by your spouse or by your parent(s) when you were a minor.

Counting your sponsor's income and assets may put you over the income or asset limits for the MA program. There is a special state policy where the state won't count your sponsor's income and assets for 12 months if you are a victim of domestic abuse. You must show a strong connection between the abuse and your need for health care. If your income – without adding in your sponsor's income- is below federal poverty guidelines, you may be able to get MA.

Note: Sponsor income **IS NOT COUNTED** for **pregnant people** or **children**. This includes the 12-month post-partum period for pregnant people.

Note: Sponsor income and assets are counted in MA but not in MNCare. Because of this, you could have too much income to get MA, but not enough to get MNCare. To help with this problem, the state created a "safety net" program. Under the program, you should be able to get either MA or MNCare, depending on your projected income. See *Safety Net Program* below in the MNCare section.

There are 2 Special MA Programs:

- **MA through Center for Victims of Torture**

Minnesota has a special state-funded MA program. It is only for people getting services from the Center for Victims of Torture (CVT) or a similar program. Find CVT's website at www.cvt.org.

If you are getting care and services from CVT or a similar program, you automatically qualify for this special MA program. You don't have to be a "qualified" noncitizen. You don't have to be in an MA category. You don't even have to have a low income or assets!

- **MA for Pregnant People and Children – Children's Health Insurance Program (CHIP)**

Children who are in the U.S. **legally** are eligible for MA. This includes children who have Temporary Protected Status (TPS), who have applied for but don't yet have asylum, etc. They don't have to be "qualified" noncitizens. Funding for MA for children who are not "qualified" comes from CHIP.

If you are pregnant, you can get MA during your **entire pregnancy** and for **12 months** after you give birth. You don't have to have a certain immigration status to qualify. You can even get MA if you are undocumented. Your MA benefits are paid by CHIP.

See our fact sheet [Medical Assistance and Pregnancy](#).



2. MinnesotaCare (MNCare)

The second MN health care program is MinnesotaCare (MNCare). You can get MNCare if you aren't eligible for MA because your income is too high. You have to pay a premium in MNCare. MNCare has sliding fees so you pay based on your income. You can also get MNCare if you don't fall in an MA category, if you are in your 5-year waiting period for MA, or if you are not a "qualified" noncitizen. Unlike MA, MNCare does not offer home health care services, non-

emergency medical transportation, mental health case management, or housing stabilization services.

Can I get MNCare?

You can get MNCare if you are **living legally** in the U.S. on a permanent basis. You are considered legal if you have one of these, or a similar immigration status:

- Legal temporary residence
- A pending application for asylum, withholding, or removal if you have work authorization. Or if you are younger than 14, an asylum application that has been pending for at least 6 months.
- Deferred Enforced Departure, Deferred Action, or a stay of deportation
- A grant of humanitarian parole
- Pending immigration status
- Temporary Protected Status (TPS)
- A U-visa
- Deferred Action for Childhood Arrivals (DACA).

Note: Starting in January 2025, people without legal status can now get MNCare.

Does MNCare have rules about sponsor income and waiting periods?

Unlike MA, MNCare does **not** count income from sponsors. Also, there is **no** 5-year waiting period to get MNCare.

Safety Net Program

In most cases, noncitizens who are living in the U.S. legally must have income between 137% and 200% of the federal poverty guidelines (FPG) to qualify for MNCare. Because MA counts sponsor income but MNCare doesn't, noncitizens can be over the MA income limits but not have enough income to qualify for MNCare. The [income levels](#) depend on the number of people in the household. Because of this gap, the state created a Safety Net Program so people in this situation can get MA or MNCare, depending on their projected annual income.

3. Emergency Medical Assistance (EMA)

EMA is the third MN health care program. You can get EMA with **any, or no, immigration status**. But EMA has limited services.

Can I get EMA?

To qualify for EMA, you have to be at least one of these:

- pregnant,
- a minor child or living in a household with minor children
- certified disabled
- 65 or older
- 21 or older with no minor children in your household

You may also be able to get EMA if:

- you are getting Elderly Waiver Services
- you are staying in a nursing or psychiatric care facility
- you were discharged from a hospital or ER and will have a medical emergency in the next 48 hours if you don't get services

What does EMA pay for?

EMA pays for **emergency medical services**. To get EMA, you have to have a really serious medical condition or medical problem. The condition or problem has to be so serious that if you don't get medical treatment, your health or body parts will be at risk.

If you have a medical emergency, EMA will pay for your care. The care is usually delivered in an emergency room or ambulance. EMA can also pay for your care if you are a patient in a hospital, or if you were recently discharged from the hospital and need follow-up care.

You can get EMA for heart or breathing problems **if**, without medical treatment, you are likely to end up in crisis within 2 days.

Usually, EMA **does not pay** for medical care for conditions that are ongoing. EMA **does not pay** for home health services, mental health care, or other medical services for health problems considered "non-emergency."



But EMA pays for medical care **for some chronic conditions**, like **cancer** and **kidney disease**. EMA can pay for kidney dialysis, kidney transplants, and services related to a kidney transplant. EMA **does not pay for** transplants of other organs.

For more information on EMA, see our fact sheet [Emergency Medical Assistance](#).

Fact Sheets are legal information NOT legal advice. See a lawyer for advice.

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