

People enrolled in Minnesota health care programs receive medical services in 1 of 2 ways:

- ▶ **Managed care.** In a managed care system, DHS contracts with a health plan to provide services to people enrolled in MA, GAMC, or MinnesotaCare. The health plan must provide most services covered by the program the person is enrolled in. DHS pays a fixed monthly fee, called a capitation payment, to the health plan. Enrollees must receive services through their health plans. MA services that are not covered in the managed care contract will be billed under fee-for-service.

All MinnesotaCare enrollees receive services through managed care. Some MA and GAMC enrollees receive services through managed care depending on the county they live in and whether they are excluded from managed care. See §0914.03.03 (Managed Care Exclusions).

The following are managed care counties for MA and GAMC as of 9-1-03:

Aitkin, Anoka, Becker, Benton, **Big Stone**, **Blue Earth**, Brown, Carlton, Carver, Chippewa, Chisago, Clay, Cook, Cottonwood, Dakota, Dodge, **Douglas**, Faribault, Fillmore, Freeborn, Goodhue, **Grant**, Hennepin, Houston, Isanti, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac Qui Parle, Lake, LeSueur, Lincoln, Lyon, Mahnomen, Marshall, Martin, **McLeod**, **Meeker**, Mille Lacs, Murray, Nicollet, Nobles, Norman, **Olmsted**, Otter Tail, Pennington, Pine, **Pipestone**, **Pope**, Ramsey, Red Lake, Redwood, **Renville**, Rice, Rock, Roseau, St. Louis, Scott, Sherburne, Sibley, Stearns, Steele, **Stevens**, Swift, **Traverse**, Wabasha, Waseca, Washington, Watonwan, Wilkin, Winona, Wright, Yellow Medicine, **Mille Lacs Tribal TANF**.

The following are managed care counties except for dental services. MA, GAMC and MinnesotaCare clients in these counties who are enrolled in managed care receive dental services through fee-for-service. The health plans are not responsible for dental services or transportation to dental appointments. The health plans provide all other managed care services:

Cass, Crow Wing, Morrison, Todd, Wadena

In most counties, managed care enrollees choose 1 of 2 or more health plans. If required, enrollees must also choose specific clinics within the health plan network. See §0914.03.05 (Managed Care Enrollment Process) and §0914.03.05.01 (Managed Care Enrollment Process--MA/GAMC).

Managed care enrollees receive a Minnesota Health Care Programs Identification Card and an identification card from the health plan. See §0914.07 (Minnesota Health Care Programs Card).

- ▶ Fee-for-service. MA and GAMC enrollees who are not enrolled in a managed care plan receive medical services on a fee-for-service basis. MinnesotaCare enrollees do not receive care through fee-for-service on an ongoing basis, but may be enrolled in fee-for-service for a limited period in some circumstances. See §0914.05 (Fee-for-Service). In a fee-for-service system, people may receive services from any provider who is enrolled as a Minnesota Health Care Programs provider. Providers bill DHS for each service provided. DHS makes payments for approved services at a predetermined rate.

Fee-for-service enrollees receive a Minnesota Health Care Programs Identification Card. See §0914.07 (Minnesota Health Care Programs Card).