

**MinnesotaCare:**

An adjustment is either:

- > Making a capitation payment to a health plan for a current or past month.
- OR
- > Recovering a capitation payment from a health plan.

Request adjustments in the following situations:

- > When an enrollee is hospitalized on the effective date of a change in health plans. In this case DHS will recover the capitation payment made to the new plan and will make a retroactive capitation payment to the previous plan.
- > When necessary to maintain continuous coverage, continuity of care, or to resolve a service issue. Refer these requests to appropriate staff. Decisions are made on case-by-case basis.

Do not make an adjustment when there has been a systems, coding, or enrollment form error. The household's enrollment will be changed for the next available month.

**M.S. 256L.12****MA/GAMC:**

Request adjustments from the DHS managed care unit when:

- > People are enrolled into health plans incorrectly and retroactive disenrollment would result in continuity of care issues. If there are no service issues, disenroll the person for the next available month.
- > People are disenrolled from health plans incorrectly.
- > People are hospitalized on the effective date of an enrollment change.
- > MA enrollees are incarcerated at the time of initial managed care enrollment.

NOTE: Incarcerated GAMC enrollees remain in the health plan.

If the change is for a future month and no erroneous capitation payment has been made, delete the incorrect span or change the incorrect information on the RPPH panel. See instructions for adding newborns under §0914.03.13 (Adding/Removing People From Managed Care).

A request does not guarantee an adjustment will be made. The DHS Managed Care unit reviews each request on a case-by-case basis based on federal and state law and health plan contract terms.