Features	Minnesota Senior Care Plus (MSC+)	Minnesota Senior Health Option	MinnesotaCare PMAP	Preferred Integrated	Prepaid Medical Assistance Plan	Special Needs Basic Care
Program type	Comprehensive MCO + any other	Comprehensive MCO + any other	Comprehensive MCO	Comprehensive MCO	Comprehensive MCO	Comprehensive MCO
Statewide or region-specific?	Statewide	Statewide	Statewide	Dakota	Statewide	Statewide
Federal operating authority	1915(b)/1915(c)	1915(a)/1915(c)	1115 demonstration	1915(a), 1915(a)/1915(c)	1115 demonstration,	1915(a), 1915(a)/1915(c)
Program start date	6/1/2005	3/1/1997	7/1/1995	9/1/2009	12/1/1985	1/1/2008
Waiver expiration date (if applicable)	6/30/2016		12/31/2014			
If the program ended in 2013, indicate the end date						
Populations enrolled					•	•
Low-income Adults			Mandatory		Mandatory	
Aged, Blind or Disabled Children or Adults	Mandatory	Voluntary		Voluntary	Voluntary	Voluntary
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)			Mandatory		Mandatory	
Individuals receiving Limited Benefits						
Low-income adults not otherwise eligible and covered prior to 2014 under a waiver or other authority			Mandatory		Mandatory	
Full Duals	Mandatory	Voluntary			Voluntary	Voluntary
Partial Duals						
Children with Special Health Care Needs			Voluntary	Voluntary	Voluntary	
Native American/Alaskan Natives	Mandatory	Voluntary	Mandatory	Voluntary	Voluntary	Voluntary
Foster Care and Adoption Assistance Children	Exempt	Voluntary	Mandatory	Voluntary	Voluntary	Voluntary
Enrollment choice period	30 days	30 days	30 days	30 days	30 days	30 days
Enrollment broker name (if applicable)						
Notes on enrollment choice period						
Benefits covered	<u> </u>					
Inpatient hospital physical health	Х	Х	Х	X	Х	Х
Inpatient hospital behavioral health (MH and/or SUD)	Х	Х	Х	Х	Х	Х

Features			MinnesotaCare PMAP	Preferred	Prepaid Medical	Special Needs
	Care Plus (MSC+)			Integrated	Assistance Plan	Basic Care
Outpatient hospital physical health	Х	Х	X	Х	Х	Х
Outpatient hospital behavioral health (MH and/or SUD)	Х	Х	X	X	Х	Х
Partial hospitalization	Х	Х	Х	Х	Х	Х
Physician	Х	Х	Х	X	X	Х
Nurse practitioner	Х	Х	Х	X	Х	Х
Rural health clinics and FQHCs	Х	Х	Х	X	Х	Х
Clinic services	X	Х	Х	X	Х	Х
Lab and x-ray	Х	Х	Х	X	Х	Х
Prescription drugs and prosthetic devices	Х	Х	Х	Х	Х	Х
EPSDT			X	Х	Х	
Case management	X	Х				Х
Health home					Х	
Family planning	X	Х	Х	X	Х	X
Dental services (medical/surgical)	X	Х	Х	X	Х	Х
Dental (preventative or corrective)	Х	Х	Х	X	Х	Х
Home health agency services	Х	Х	Х	X	Х	Х
Personal care (state plan option)	Х	Х	Х	X	Х	
HCBS waiver services	X	Х				
Private duty nursing	Х	Х	Х	X	Х	Х
ICF-IDD						
Nursing facility services	X	Х				Х
Hospice care					X	
Non-Emergency Medical Transportation	X	Х	X	Х	Х	Х
Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)				Mental Health services, including targeted case management	Rehabilitation, therapeutic services, chemical dependency, mental health	Mental Health

Features	Minnesota Senior Care Plus (MSC+)		MinnesotaCare PMAP	Preferred Integrated	Prepaid Medical Assistance Plan	Special Needs Basic Care		
Quality assurance and improvement								
HEDIS data required?	Yes	Yes	Yes	Yes	Yes	Yes		
CAHPS data required?	Yes	Yes	Yes	Yes	Yes	Yes		
Accreditation required?	No	No	No	No	No	No		
Accrediting organization								
EQRO contractor name (if applicable)	Michigan Peer Review Organization	Michigan Peer Review Organization	Michigan Peer Review Organization	Michigan Peer Review Organization	Michigan Peer Review Organization	Michigan Peer Review Organization		
Performance incentives?	Yes	Yes	Yes	Yes	Yes	Yes		
Payment bonuses/differentials to reward MCOs								
Preferential auto-enrollment to reward MCOs								
Public reports comparing MCO performance on key metrics								
Withholds tied to performance metrics	X	Х	X	Х	X	X		
Participating plans and regions served				-	•			
Plans in Program	Blue Plus; Health Partners; Itasca Medical Care; Medica; Metropolitan Health; Prime West Health; South Country Health Alliance; UCare	Blue Plus; Health Partners; Itasca Medical Care; Medica; Metropolitan Health Plan; Prime West Health Alliance; South Country Health Alliance; UCare	Blue Plus; Health Partners; Itasca Medical Care; Medica; Prime West Health; South County Health Alliance; UCare	Medica	Blue Plus; Health Partners; Medica; UCare; Hennepin Health; Itasca Medical Care; Prime West Health; South Country Health Alliance	Medica; Metropolitan Health Plan; Prime West Health; South Country Health Alliance; UCare		

Features	Minnesota Senior	Minnesota Senior	MinnesotaCare PMAP	Preferred	Prepaid Medical	Special Needs
	Care Plus (MSC+)	Health Option		Integrated	Assistance Plan	Basic Care
Notes						
Program notes			MinnesotaCare Parents and Adults without Children had to pay monthly premiums and had more limited			
			benefits. The benefit set offered to MinnesotaCare Caretaker Adults and Adults without Children is identical to the benefit set offered to categorically eligible individuals under Minnesota's Medicaid State Plan, except that the services listed in (1) through (8) below are excluded, and inpatient hospital services are limited for certain participants as described in (9) below.			
			Services included in an individual's education plan; 2. Private duty nursing; 3. Orthodontic services; 4. Nonemergency medical transportation services; 5. Personal Care Services; 6. Targeted case management services (except Mental Health targeted case)			
			management which is a covered service for MinnesotaCare caretaker adults to the degree that it is covered in the Medicaid State plan); 7. Nursing facility services; and 8. ICF/MR services. 9. Inpatient Hospital Limit: MinnesotaCare Caretaker Adults			
			(except pregnant women) with income above 215 percent of the FPL are subject to a \$10,000 annual limit on inpatient hospitalization. MinnesotaCare Adults without Children are subject to a \$10,000 annual limit and a 10% copay on inpatient hospital stays. The copay is capped at \$1,000 per year.			