	Managed Medical Assistance Program		Program of All-Inclusive Care for the Elderly	1915 (b) Medicaid Managed Care	Disease Management
		MLTSS only (PIHP and/or PAHP)	Program of All-inclusive Care for the Elderly (PACE)	Comprehensive MCO	Other Prepaid Health Plan (PHP) (limited benefits)
Statewide or region-specific?	Statewide	Statewide	Statewide	Statewide	Statewide
	1115(a) (Medicaid demonstration waivers)	1915(b)/1915(c)	PACE	1915(b)	1915(b)
		8/1/2013	1/1/2003	10/1/1992	10/1/1992
applicable)	6/30/2017	6/30/2016			
If the program ended in 2014, indicate the end date				1/31/2014	8/31/2014
Populations enrolled					
Low-income Adults not eligible under ACA Section VIII	Mandatory	Mandatory		Mandatory	Mandatory
Aged, Blind or Disabled Children or Adults	Mandatory	Mandatory	Voluntary	Mandatory	Mandatory
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)	Mandatory	Mandatory		Mandatory	
Individuals receiving Limited Benefits		Mandatory			
Low-income adults eligible under ACA Section VIII					
Full Duals	Mandatory	Mandatory	Voluntary	Voluntary	
Partial Duals					
Children with Special Health Care Needs	Mandatory	Mandatory			
Native American/Alaskan Natives	Mandatory	Mandatory	Voluntary	Exempt	Exempt
Foster Care and Adoption Assistance Children	Mandatory	Mandatory	Exempt	Voluntary	Voluntary
Enrollment choice period	30 days	30 days	N/A	30 days	30 days
Enrollment broker name (if applicable)	Automated Health Systems	Automated Health Systems		Automated Health Systems, Inc.	
Notes on enrollment choice period			Continuous while slots are available		
Benefits covered					
Inpatient hospital physical health	Х		Х	Х	

Features	Managed Medical Assistance	Long-term Care Program	Program of All-Inclusive Care	1915 (b) Medicaid Managed	Disease Management
	Program		for the Elderly	Care	_
Inpatient hospital behavioral health (MH and/or SUD)	Х		Х	Х	
Outpatient hospital physical health	Х		Х	Х	
Outpatient hospital behavioral health (MH and/or SUD)	X		Х	Х	
Partial hospitalization	Х		Х		
Physician	Х		Х	Х	
Nurse practitioner	Х		Х	Х	
Rural health clinics and FQHCs	Х		Х	Х	
Clinic services	Х		Х		
Lab and x-ray	Х		Х	Х	
Prescription drugs and prosthetic devices	Х		X	Х	
EPSDT	Х			Х	
Case management	Х	Х	Х		
Health home (SSA 1945)					
Family planning	Х		Х	Х	
Dental services (medical/surgical)	Х		X	Х	
Dental (preventative or corrective)	Х		Х	Х	
Home health agency services	Х		Х	Х	
Personal care (state plan option)	X	Х			
HCBS waiver services		Х	Х		
Private duty nursing	Х				
ICF-IDD					
Nursing facility services		Х	Х		
Hospice care	Х	Х	Х		
Non-Emergency Medical Transportation	Х	X	X	Х	

Features	Managed Medical Assistance	Long-term Care Program	Program of All-Inclusive Care	1915 (b) Medicaid Managed	Disease Management
	Program	-	for the Elderly	Care	_
services, freestanding birth centers, podiatry, etc.)	The Agency negotiated expanded benefits above the Medicaid state plan service package. These expanded benefits vary by plan and include expanded adult dental services, expanded outpatient hospital visits, physician home visits, and many other expanded benefits that can be viewed through the following link: http://ahca.myflorida.com/Medica id/statewide_mc/pdf/mma/Expan ded_Benefits.pdf.	Intermittent and Skilled Nursing Services. The Agency negotiated expanded benefits above the Medicaid state plan service package. These expanded benefits vary by plan and include expanded adult dental services, expanded outpatient hospital visits, physician home visits, and many other expanded benefits that can be viewed through the	All other FL Medicaid covered services and other services as determined by the multidisciplinary team	Chiropractic, Community Mental Health, Disease Management, Durable Medical Equipment, Hearing, Immunization, Mental Health Targeted Case Management, Occupational Therapy, Physical Therapy, Respiratory Therapy, Speech Therapy, Vision	Disease Management
Quality assurance and					
improvement					
HEDIS data required?	Yes	Yes	No	Yes	No
CAHPS data required?	Yes	No	No	Yes	No
Accreditation required?	Yes	Yes	No	Yes	Yes
Accrediting organization	NCQA, AAAHC, Nationally recognized accrediting organizations	NCQA, AAAHC, Nationally recognized accrediting organizations		NCQA, JCAHO, AAAHC, URAC	NCQA
EQRO contractor name (if applicable)	Health Services Advisory Group	Health Services Advisory Group		Health Services Advisory Group	
Performance incentives?					
Payment bonuses/differentials to reward plans	Х	Х			
Preferential auto-enrollment to reward plans	Х	Х			
Public reports comparing MCO performance on key metrics Withholds tied to performance	X	X			
metrics					
MCOs/PHPs required/encouraged to pay providers for value/quality outcomes using shared-risk or shared-savings methods	X				

Features	Managed Medical Assistance	Long-term Care Program	Program of All-Inclusive Care	1915 (b) Medicaid Managed	Disease Management
	Program		for the Elderly	Care	
Provider Value-Based					
Purchasing					
State pays provider-based					
entities (such as ACOs or					
PCMHs) directly for value/quality					
outcomes using shared-risk or					
shared-savings methods					
Participating plans and regions					
served					
	Health; Coventry Health Care; First Coast Advantage, LLC; Humana Medical Plan; Integral Quality Care; Molina Healthcare of Florida; Preferred Medical	-	Suncoast Neighborly Care, Inc.; Palm Beach PACE; Florida PACE Center; Hope Select Care	Amerigroup; Buena Vista; CareFlorida; Clear Health Alliance; Florida Healthcare Plus; Florida True Health; Freedom; Healthease; Healthy Palm Beaches; Humana; Medica; Molina Healthcare; Positive; Preferred Medical Plan; Simply Healthcare Plan; Staywell; Sunshine; United Healthcare Plan; Vista Healthplan of South Florida; Prestige; First Coast Advantage, LLC.; South Florida Community Care Network	AIDS Healthcare Foundation
Notes	. ,				

Features	Managed Medical Assistance	Long-term Care Program	Program of All-Inclusive Care	1915 (b) Medicaid Managed	Disease Management
	Program		for the Elderly	Care	
Program notes	Pregnant women are mandatorily enrolled. Low-income adults who are non-disabled are not covered. Presumptively eligible pregnant women are excluded. Full dual recipients are mandatorily	Care program, a beneficiary must		program.	0
	enrolled if they receive fee-for- service Medicare or are enrolled in a Medicare Advantage plan that is not fully liable. Full duals enrolled in a fully liable Medicare Advantage plan or in a Medicare Advantage Special Needs plan are excluded.				

Features	Medicaid Reform Waiver	Medipass	Program	Prepaid Dental Health Plans	Prepaid Mental Health Plans
C N	Comprehensive MCO	Primary Care Case Management (PCCM)	MLTSS only (PIHP and/or PAHP)		Behavioral Health Organization (BHO) only (PIHP and/or PAHP)
	Duval, Baker, Clay, Nassau and Broward County	Statewide	Statewide	Statewide	Statewide
	waivers)	1915(b)	1915(a)/1915(c)	1915(b)	1915(b)
Program start date	7/1/2006	10/1/1992	1/1/1998	7/1/2004	6/30/2000
Waiver expiration date (if applicable)					
If the program ended in 2014, indicate the end date	6/30/2014	1/31/2014	3/1/2014	1/31/2014	9/30/2014
Populations enrolled					
under ACA Section VIII	Mandatory	Mandatory			Mandatory
Aged, Blind or Disabled Children or Adults	-	Varies		Mandatory	Mandatory
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)	Mandatory	Mandatory		Mandatory	Mandatory
Individuals receiving Limited Benefits					
Low-income adults eligible under ACA Section VIII					
Full Duals	Voluntary		Voluntary	Mandatory	
Partial Duals				Mandatory	
Children with Special Health Care Needs	Mandatory	Voluntary		Mandatory	Mandatory
Native American/Alaskan Natives	Voluntary	Exempt	Voluntary	Voluntary	Mandatory
Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Exempt	Voluntary	Mandatory
	30 days	N/A	Other	30 days	Pre-assigned
Enrollment broker name (if applicable)	Automated Health Systems, Inc.	Automated Health Systems, Inc.		Automated Health Systems, Inc.	
Notes on enrollment choice period			Continuous		
Benefits covered					
Inpatient hospital physical health	Х				

Features	Medicaid Reform Waiver	Medipass	Nursing Home Diversion Program	Prepaid Dental Health Plans	Prepaid Mental Health Plans
Inpatient hospital behavioral	Х		riogram		Х
health (MH and/or SUD)					
Outpatient hospital physical	Х				
health	X				
Outpatient hospital behavioral health (MH and/or SUD)	X				X
Partial hospitalization					
Physician	Х				
Nurse practitioner	Х				
Rural health clinics and FQHCs	Х				
Clinic services					
Lab and x-ray	Х				
Prescription drugs and prosthetic devices	X				
EPSDT	Х				
Case management		Х	Х		Х
Health home (SSA 1945)					
Family planning	Х				
Dental services (medical/surgical)	X			Х	
Dental (preventative or corrective)	X			X	
Home health agency services	Х				
Personal care (state plan option)					
HCBS waiver services			Х		
Private duty nursing					
ICF-IDD					
Nursing facility services			Х		
Hospice care			Х		
Non-Emergency Medical Transportation	X				

Features	Medicaid Reform Waiver	Medipass	Nursing Home Diversion	Prepaid Dental Health Plans	Prepaid Mental Health Plans
			Program		
Other (e.g., nurse midwife	Chiropractic, Community Mental		Copayments and coinsurance for		Community Mental Health
services, freestanding birth	Health, Durable Medical		all Medicare services up to the		Services
centers, podiatry, etc.)	Equipment, Hearing,		amount Medicaid would have		
	Immunization, Mental Health		paid under fee for service		
	Targeted Case Management,				
	Occupational Therapy, Physical				
	Therapy, Respiratory Therapy,				
	Speech Therapy, Vision				
	Speech merapy, vision				
Quality assurance and					
improvement		N		X	X
HEDIS data required?	Yes	No	No	Yes	Yes
CAHPS data required?	Yes	No	No	No	Yes
Accreditation required?	Yes	No	No	No	No
Accrediting organization	NCQA, AAAHC, URAC				
EQRO contractor name (if	Health Services Advisory Group		Health Services Advisory Group		Health Services Advisory Group
applicable)					
Performance incentives?					
Payment bonuses/differentials to					
reward plans					
Preferential auto-enrollment to					
reward plans					
Public reports comparing MCO					
performance on key metrics					
Withholds tied to performance					
metrics					
MCOs/PHPs					
required/encouraged to pay					
providers for value/quality					
outcomes using shared-risk or					
shared-savings methods					
Provider Value-Based					
Purchasing					
State pays provider-based					
entities (such as ACOs or					
PCMHs) directly for value/quality					
outcomes using shared-risk or					
shared-savings methods					
Sharea savings methods					
Participating plans and regions					
served					

Features	Medicaid Reform Waiver	Medipass	Program	Prepaid Dental Health Plans	Prepaid Mental Health Plans
Plans in Program	Positive; Florida MHS, Inc. DBA MAGELLAN; Freedom; Humana; Medica; Molina Healthcare; CareFlorida; Clear Health Alliance; Staywell; Sunshine; Better Health, LLC; South Florida Community Care Network; Children's Medical Services	Multiple primary care providers		North America	Lakeview Center, Inc.; Magellan Behavioral Health of Florida; Public Health Trust of Dade County; N FL Behavioral Health Par; Community Based Care Partnership; Florida Health Partners, Inc.
Notes					
Program notes	Because this program ended in 2014, all Medicaid beneficaries were transitioned to the SMMC program.	Aged, blind, or disabled adults were mandatorily enrolled. Aged, blind, or disabled children were voluntarily enrolled. Because this program ended in 2014, all Medicaid beneficaries were transitioned to the SMMC program.	individuals age 65 and older who are full duals and meet nursing	Because this program ended in 2014, all Medicaid beneficaries were transitioned to the SMMC program.	As of August 1, 2014, there were zero enrollees in this program as Medicaid beneficaries were transitioned to the SMMC program.