## Arkansas Managed Care Program Features, as of 2021 (1 of 5)

Features	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions
Program type	Comprehensive MCO + MLTSS	Comprehensive MCO + MLTSS	Comprehensive MCO + MLTSS
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1915(b)/1915(c),1915(b)/1915(i)	1915(b)/1915(c),1915(b)/1915(i)	1915(b)/1915(c)
Program start date	10/01/2017	10/01/2017	10/01/2017
Waiver expiration date (if applicable)	03/31/2027	03/31/2027	03/31/2027
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary	Voluntary	Voluntary
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)			
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary	Voluntary	Voluntary
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary	Voluntary	Voluntary
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary	Voluntary	Voluntary
Populations enrolled: Full Duals	Voluntary	Voluntary	Voluntary
Populations enrolled: Children with Special Health Care Needs	Voluntary	Voluntary	Voluntary
Populations enrolled: American Indian/Alaska Native	Voluntary	Voluntary	Voluntary

Features	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Voluntary
Populations enrolled: Enrollment choice period	Other	Other	Other
Populations enrolled: Enrollment broker name (if applicable)		Qsource	Qsource
Populations enrolled: Notes on enrollment choice period	90 days	90 days	90 days
Benefits covered: Inpatient hospital physical health	x	×	x
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	x	×	x
Benefits covered: Outpatient hospital physical health	x	x	x
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	x	x	x
Benefits covered: Partial hospitalization	х	x	x
Benefits covered: Physician	Х	x	х
Benefits covered: Nurse practitioner	Х	x	х
Benefits covered: Rural health clinics and FQHCs	x	×	x
Benefits covered: Clinic services	Х	x	х
Benefits covered: Lab and x-ray	Х	x	х
Benefits covered: Prescription drugs	Х	х	x
Benefits covered: Prosthetic devices	x	×	x
Benefits covered: EPSDT	Х	x	x
Benefits covered: Case management	x	x	x

Features	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions
Benefits covered: SSA Section 1945-authorized Health Home			
Benefits covered: Home health services (services in home)	x	X	X
Benefits covered: Family planning	X	x	x
Benefits covered: Dental services (medical/surgical)			
Benefits covered: Dental (preventative or corrective)			
Benefits covered: Personal care (state plan option)	x	x	x
Benefits covered: HCBS waiver services	x	x	x
Benefits covered: Private duty nursing	x	x	x
Benefits covered: ICF-IDD	Х	x	x
Benefits covered: Nursing facility services	x	x	x
Benefits covered: Hospice care	Х	x	x
Benefits covered: Non-Emergency Medical Transportation	x	x	x
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit	x	X	x
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	Yes	Yes	Yes

Features	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions
Quality assurance and improvement: CAHPS data required?	No	No	No
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)	Qsource	Qsource	Qsource
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics			
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	x	X	X
Participating plans: Plans in Program	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions

Features	Arkansas Total Care	Summit Community Care	Empower Healthcare Solutions
Notes: Program notes	own expiration date as follows: C-Waiver 02/28/2027; B-Waiver 03/31/2027 and I- State Plan Amendment 03/01/2024. Members are enrolled into a managed care organization when an independent assessment shows that they meet tier 2	State Plan Amendment 03/01/2024. Members are enrolled into a managed	

Arkansas	Managed	<b>Care Program</b>	Features,	as of 2021 (2 of 5)
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Features	Delta Dental Plan Arkansas	MCNA Insurance Company	Central Arkansas Development
Program type	Dental only (PAHP)	Dental only (PAHP)	Non-Emergency Medical Transportation
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1915(b)	1915(b)	1915(b),1902(a)(70) NEMT
Program start date	01/01/2018	01/01/2018	01/01/2019
Waiver expiration date (if applicable)	12/31/2022	12/31/2022	12/31/2022
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)			
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory	Mandatory	Mandatory
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Mandatory	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory	Mandatory	Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Mandatory	Mandatory	Mandatory
Populations enrolled: Full Duals	Mandatory	Mandatory	Mandatory
Populations enrolled: Children with Special Health Care Needs	Mandatory	Mandatory	Mandatory
Populations enrolled: American Indian/Alaska Native	Voluntary	Voluntary	Voluntary

Features	Delta Dental Plan Arkansas	MCNA Insurance Company	Central Arkansas Development
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Mandatory	Mandatory
Populations enrolled: Enrollment choice period	Pre-assigned	Pre-assigned	Pre-assigned
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health			
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health			
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Partial hospitalization			
Benefits covered: Physician			
Benefits covered: Nurse practitioner			
Benefits covered: Rural health clinics and FQHCs			
Benefits covered: Clinic services			
Benefits covered: Lab and x-ray			
Benefits covered: Prescription drugs			
Benefits covered: Prosthetic devices			
Benefits covered: EPSDT			
Benefits covered: Case management			
Benefits covered: SSA Section 1945- authorized Health Home			

Features	Delta Dental Plan Arkansas	MCNA Insurance Company	Central Arkansas Development
Benefits covered: Home health services (services in home)			
Benefits covered: Family planning			
Benefits covered: Dental services (medical/surgical)	x	x	
Benefits covered: Dental (preventative or corrective)	x	x	
Benefits covered: Personal care (state plan option)			
Benefits covered: HCBS waiver services			
Benefits covered: Private duty nursing			
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services			
Benefits covered: Hospice care			
Benefits covered: Non-Emergency Medical Transportation			x
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	No	No	No
Quality assurance and improvement: CAHPS data required?	No	No	No

Features	Delta Dental Plan Arkansas	MCNA Insurance Company	Central Arkansas Development
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)			
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics			
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			
Participating plans: Plans in Program	Delta Dental Smiles	MCNA Dental	Central Arkansas Development
Notes: Program notes			

Features	Area Agency on Aging of Southeast	Southeastrans, Inc	РССМ
Program type	Non-Emergency Medical Transportation	Non-Emergency Medical Transportation	Primary Care Case Management (PCCM)
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1915(b),1902(a)(70) NEMT	1915(b),1902(a)(70) NEMT	1932(a)
Program start date	01/01/2019	01/01/2019	01/01/2014
Waiver expiration date (if applicable)	12/31/2022	12/31/2022	
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)			
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory	Mandatory	
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Mandatory	
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory	Mandatory	Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Mandatory	Mandatory	
Populations enrolled: Full Duals	Mandatory	Mandatory	
Populations enrolled: Children with Special Health Care Needs	Mandatory	Mandatory	Voluntary
Populations enrolled: American Indian/Alaska Native	Voluntary	Voluntary	Exempt

## Arkansas Managed Care Program Features, as of 2021 (3 of 5)

Features	Area Agency on Aging of Southeast	Southeastrans, Inc	РССМ
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory		Voluntary
Populations enrolled: Enrollment choice period	Pre-assigned	Pre-assigned	N/A
Populations enrolled: Enrollment broker name (if applicable)			AFMC
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health			x
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			x
Benefits covered: Outpatient hospital physical health			x
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			x
Benefits covered: Partial hospitalization			x
Benefits covered: Physician			
Benefits covered: Nurse practitioner			х
Benefits covered: Rural health clinics and FQHCs			x
Benefits covered: Clinic services			х
Benefits covered: Lab and x-ray			х
Benefits covered: Prescription drugs			х
Benefits covered: Prosthetic devices			х
Benefits covered: EPSDT			Х
Benefits covered: Case management			х
Benefits covered: SSA Section 1945- authorized Health Home			

Features	Area Agency on Aging of Southeast	Southeastrans, Inc	РССМ
Benefits covered: Home health services (services in home)			x
Benefits covered: Family planning			x
Benefits covered: Dental services (medical/surgical)			х
Benefits covered: Dental (preventative or corrective)			х
Benefits covered: Personal care (state plan option)			Х
Benefits covered: HCBS waiver services			
Benefits covered: Private duty nursing			x
Benefits covered: ICF-IDD			х
Benefits covered: Nursing facility services			
Benefits covered: Hospice care			
Benefits covered: Non-Emergency Medical Transportation	x	Х	
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of' benefit			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	No	No	Yes
Quality assurance and improvement: CAHPS data required?	No	No	Yes

Features	Area Agency on Aging of Southeast	Southeastrans, Inc	РССМ
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)			
Performance incentives: Payment bonuses/differentials to reward plans			x
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics			X
Performance incentives: Withholds tied to performance metrics			х
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			X
Participating plans: Plans in Program	Area Agency on Aging of Southeast	Southeastrans, Inc	Primary Care Case Management
Notes: Program notes			

## Arkansas Managed Care Program Features, as of 2021 (4 of 5)

Features	PACE	Arkansas Health & Wellness Solutions	Arkansas Blue Cross Blue Shield
Program type	Program of All-inclusive Care for the Elderly (PACE)	Other Prepaid Health Plan (PHP) (limited benefits)	Other Prepaid Health Plan (PHP) (limited benefits)
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	PACE	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	05/27/2008	01/01/2014	01/01/2014
Waiver expiration date (if applicable)		12/31/2026	12/31/2026
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)		Varies	Varies
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)			
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary		
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)			
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals			
Populations enrolled: Children with Special Health Care Needs			

		Arkansas Health & Wellness	
Features	PACE	Solutions	Arkansas Blue Cross Blue Shield
Populations enrolled: American Indian/Alaska Native	Exempt	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children		Mandatory	Mandatory
Populations enrolled: Enrollment choice period	N/A	Other	Other
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period		42 days	42 days
Benefits covered: Inpatient hospital physical health	х	x	x
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)		x	x
Benefits covered: Outpatient hospital physical health	x	x	x
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)		x	x
Benefits covered: Partial hospitalization		x	x
Benefits covered: Physician		x	x
Benefits covered: Nurse practitioner		x	x
Benefits covered: Rural health clinics and FQHCs		x	x
Benefits covered: Clinic services	х	x	х
Benefits covered: Lab and x-ray	Х	x	x
Benefits covered: Prescription drugs	Х	x	х
Benefits covered: Prosthetic devices	Х	x	Х
Benefits covered: EPSDT		x	x

		Arkansas Health & Wellness	
Features	PACE	Solutions	Arkansas Blue Cross Blue Shield
Benefits covered: Case management	х		
Benefits covered: SSA Section 1945- authorized Health Home			
Benefits covered: Home health services (services in home)	x	х	x
Benefits covered: Family planning		X	x
Benefits covered: Dental services (medical/surgical)			
Benefits covered: Dental (preventative or corrective)	x		
Benefits covered: Personal care (state plan option)	x		
Benefits covered: HCBS waiver services	x		
Benefits covered: Private duty nursing		Х	x
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	x	X	x
Benefits covered: Hospice care	х	x	x
Benefits covered: Non-Emergency Medical Transportation	x	х	x
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit		X	×
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			

Features	PACE	Arkansas Health & Wellness Solutions	Arkansas Blue Cross Blue Shield
Quality assurance and improvement: HEDIS data required?	No	No	No
Quality assurance and improvement: CAHPS data required?	No	No	No
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)			
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics			
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes		x	x
Participating plans: Plans in Program	PACE	Arkansas Health & Wellness Solutions	Arkansas Blue Cross Blue Shield
Notes: Program notes	PACE is incorporated into the AR Medicaid State Plan and is not under waiver authority.	ARWorks Waiver ended 12/31/21 and ARHOME begin 1/1/22. Low-income adults not covered under ACA Section VIII are mandatorily enrolled, but can choose to disenroll from the program.	ARWorks Waiver ended 12/31/21 and ARHOME begin 1/1/22. Low-income adults not covered under ACA Section VIII are mandatorily enrolled, but can choose to disenroll from the program.

## Arkansas Managed Care Program Features, as of 2021 (5 of 5)

Features	QCA Health Plan, Inc	Qualchoice Life & Health Insurance	HMO Partners, Inc
Program type	Other Prepaid Health Plan (PHP) (limited benefits)	Other Prepaid Health Plan (PHP) (limited benefits)	Other Prepaid Health Plan (PHP) (limited benefits)
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	01/01/2014	01/01/2015	01/01/2021
Waiver expiration date (if applicable)	12/31/2026	12/31/2026	12/31/2026
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Varies	Varies	Varies
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)			
Populations enrolled: Aged, Blind or Disabled Children or Adults			
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)			
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals			
Populations enrolled: Children with Special Health Care Needs			

Features	QCA Health Plan, Inc	Qualchoice Life & Health Insurance	HMO Partners, Inc
Populations enrolled: American Indian/Alaska Native	Voluntary	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Mandatory	Mandatory
Populations enrolled: Enrollment choice period	Other	Other	Other
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period	42 days	42 days	42 days
Benefits covered: Inpatient hospital physical health	x	x	Х
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	x	X	х
Benefits covered: Outpatient hospital physical health	x	X	x
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	x	X	X
Benefits covered: Partial hospitalization	x	X	х
Benefits covered: Physician	х	x	х
Benefits covered: Nurse practitioner	х	x	х
Benefits covered: Rural health clinics and FQHCs	x	x	х
Benefits covered: Clinic services	Х	x	х
Benefits covered: Lab and x-ray	Х	x	х
Benefits covered: Prescription drugs	х	x	х
Benefits covered: Prosthetic devices	Х	x	х
Benefits covered: EPSDT	X	X	Х
Benefits covered: Case management			

Features	QCA Health Plan, Inc	Qualchoice Life & Health Insurance	HMO Partners, Inc
Benefits covered: SSA Section 1945- authorized Health Home			
Benefits covered: Home health services (services in home)	x	x	x
Benefits covered: Family planning	x	x	х
Benefits covered: Dental services (medical/surgical)			
Benefits covered: Dental (preventative or corrective)			
Benefits covered: Personal care (state plan option)			
Benefits covered: HCBS waiver services			
Benefits covered: Private duty nursing	x	x	x
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	x	x	x
Benefits covered: Hospice care	x	x	х
Benefits covered: Non-Emergency Medical Transportation	x	x	x
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit	x	x	x
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	No	No	No

Features	QCA Health Plan, Inc	Qualchoice Life & Health Insurance	HMO Partners, Inc
Quality assurance and improvement: CAHPS data required?	No	No	No
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)			
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics			
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	x	x	x
Participating plans: Plans in Program	QCA Health Plan, Inc	Qualchoice Life & Health Insurance	HMO Partners, Inc
Notes: Program notes	ARWorks Waiver ended 12/31/21 and ARHOME begin 1/1/22. Low-income adults not covered under ACA Section VIII are mandatorily enrolled, but can choose to disenroll from the program.	ARWorks Waiver ended 12/31/21 and ARHOME begin 1/1/22. Low-income adults not covered under ACA Section VIII are mandatorily enrolled, but can choose to disenroll from the program.	ARWorks Waiver ended 12/31/21 and ARHOME begin 1/1/22. Low-income adults not covered under ACA Section VIII are mandatorily enrolled, but can choose to disenroll from the program.