Kentucky Managed Care Program Features, as of 2018

| Features | Kentucky Managed Care | Kentucky Non-Emergency Medical Transportation |
|--|-----------------------|--|
| Program type | Comprehensive MCO | Non-Emergency Medical Transportation |
| Statewide or region-specific? | Statewide | Statewide |
| Federal operating authority | 1915(b) | 1915(b) |
| Program start date | 11/01/2011 | 12/01/1998 |
| Waiver expiration date (if applicable) | 09/30/2019 | 09/30/2019 |
| If the program ended in 2018, indicate the end date | | |
| Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities) | Mandatory | Mandatory |
| 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 |
| Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals) | Mandatory | Mandatory |
| Populations enrolled: Full Duals | Mandatory | |
| Populations enrolled: Partial Duals | | |
| Populations enrolled: Children with Special Health Care Needs | Mandatory | Mandatory |
| Populations enrolled: Native American/Alaskan Natives | Voluntary | Voluntary |

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| Populations enrolled: Foster Care and Adoption Assistance Children | Mandatory | Mandatory |
| Populations enrolled: Enrollment choice period | | |
| Populations enrolled: Enrollment broker name (if applicable) | | |
| Populations enrolled: Notes on enrollment choice period | | |
| Benefits covered: Inpatient hospital physical health | х | |
| Benefits covered: Inpatient hospital behavioral health (MH and/or SUD) | х | |
| Benefits covered: Outpatient hospital physical health | х | |
| Benefits covered: Outpatient hospital behavioral health (MH and/or SUD) | x | |
| Benefits covered: Partial hospitalization | Х | |
| Benefits covered: Physician | х | |
| Benefits covered: Nurse practitioner | х | |
| Benefits covered: Rural health clinics and FQHCs | х | |
| 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 | | |
| Benefits covered: SSA Section 1945- authorized health home | | |

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| Benefits covered: Health home care (services in home) | х | |
| Benefits covered: Family planning | Х | |
| Benefits covered: Dental services (medical/surgical) | Х | |
| Benefits covered: Dental (preventative or corrective) | X | |
| Benefits covered: Personal care (state plan option) | | |
| Benefits covered: HCBS waiver services | | |
| Benefits covered: Private duty nursing | Х | |
| Benefits covered: ICF-IDD | | |
| Benefits covered: Nursing facility services | | |
| Benefits covered: Hospice care | Х | |
| 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? | Yes | No |
| Quality assurance and improvement: CAHPS data required? | Yes | No |
| Quality assurance and improvement: Accreditation required? | Yes | No |

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| Quality assurance and improvement: Accrediting organization | NCQA | |
| Quality assurance and improvement: EQRO contractor name (if applicable) | Island Peer Review Organization | |
| 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 | | |
| Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes | Х | |
| Participating plans: Plans in Program | Aetna Better Health of Kentucky; Anthem Blue Cross Blue Shield Medicaid; Humana-Caresource; Passport Health Plan; WellCare of Kentucky | NEMT - Human Services Transportation Delivery |
| Notes: Program notes | | |