

**Pennsylvania Managed Care Program Features, as of 2021 (1 of 2)**

<b>Features</b>	<b>Medical Assistance Transportation Program</b>	<b>Adult Community Autism Program</b>	<b>Behavioral Health Health Choices</b>
Program type	Non-Emergency Medical Transportation	Other Prepaid Health Plan (PHP) (limited benefits)	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)
Statewide or region-specific?	Philadelphia	Dauphin, Cumberland, Lancaster, and Chester counties	Statewide
Federal operating authority	1902(a)(70) NEMT	1915(a)	1115(a) (Medicaid demonstration waivers), 1915(b)
Program start date	11/01/2005	08/01/2009	01/01/1997
Waiver expiration date (if applicable)			09/30/2022
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)	Voluntary		Mandatory
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary		Mandatory
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary		Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary		Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary		Mandatory
Populations enrolled: Full Duals	Voluntary	Voluntary	Mandatory
Populations enrolled: Children with Special Health Care Needs	Voluntary		Mandatory

<b>Features</b>	<b>Medical Assistance Transportation Program</b>	<b>Adult Community Autism Program</b>	<b>Behavioral Health Health Choices</b>
Populations enrolled: American Indian/Alaska Native	Exempt	Exempt	Mandatory
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Exempt	Mandatory
Populations enrolled: Enrollment choice period			Pre-assigned
Populations enrolled: Enrollment broker name (if applicable)	Modivcare (formerly LogistiCare)		
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health			
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			X
Benefits covered: Outpatient hospital physical health			
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			X
Benefits covered: Partial hospitalization			X
Benefits covered: Physician		X	X
Benefits covered: Nurse practitioner		X	X
Benefits covered: Rural health clinics and FQHCs			X
Benefits covered: Clinic services			X
Benefits covered: Lab and x-ray			X
Benefits covered: Prescription drugs			X
Benefits covered: Prosthetic devices			
Benefits covered: EPSDT			X

<b>Features</b>	<b>Medical Assistance Transportation Program</b>	<b>Adult Community Autism Program</b>	<b>Behavioral Health Health Choices</b>
Benefits covered: Case management			X
Benefits covered: SSA Section 1945-authorized Health Home			
Benefits covered: Home health services (services in home)			
Benefits covered: Family planning			
Benefits covered: Dental services (medical/surgical)		X	
Benefits covered: Dental (preventative or corrective)		X	
Benefits covered: Personal care (state plan option)			
Benefits covered: HCBS waiver services		X	
Benefits covered: Private duty nursing			
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services		X	
Benefits covered: Hospice care			
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

<b>Features</b>	<b>Medical Assistance Transportation Program</b>	<b>Adult Community Autism Program</b>	<b>Behavioral Health Health Choices</b>
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)		Podiatry, speech therapy, occupational therapy, language therapy, counseling, respite, and supported employment	Psychiatric rehabilitation, peer support services, family based MH services, mobile MH treatment, MH crisis intervention services, SUD residential services, and SUD withdrawal management
Quality assurance and improvement: HEDIS data required?	No	No	Yes
Quality assurance and improvement: CAHPS data required?	No	No	No
Quality assurance and improvement: Accreditation required?	No	No	Yes
Quality assurance and improvement: Accrediting organization			NCQA, JCAHO, URAC
Quality assurance and improvement: EQRO contractor name (if applicable)		Island Peer Review Organization (IPRO)	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			X
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			X

<b>Features</b>	<b>Medical Assistance Transportation Program</b>	<b>Adult Community Autism Program</b>	<b>Behavioral Health Health Choices</b>
Participating plans: Plans in Program	Modivcare	Adult Community Autism Program	Allegheny County HealthChoices; Beaver County HealthChoices; Behavioral Health Services of Somerset and Bedford Counties; Berks County HealthChoices; Blair County HealthChoices; Bucks County HealthChoices; Cambria County HealthChoices; Carbon-Monroe-Pike Joinder Board; Chester County HealthChoices; Capital Area Behavioral Health Collaborative; Delaware County HealthChoices; Erie County HealthChoices; Fayette County HealthChoices; Greene County (Commonwealth); Lehigh County HealthChoices; Lycoming-Clinton Joinder Board; Montgomery County HealthChoices; Community Care Behavioral Health Organization; Northampton County HealthChoices; Northeast Behavioral Health Care Consortium; Northwest Behavioral Health Partnership; Philadelphia County HealthChoices; Southwest Behavioral Health Management; Tuscarora Managed Care Alliance; York/Adams HealthChoices Joinder Governing Board
Notes: Program notes		ACAP is a PIHP with MLTSS.	Only methadone is covered by BH-HC. All other drugs are covered under PH-HC. Behavioral Health Health Choices program is authorized by 1115(a) 9/30/2022 and 1915(b) 12/31/2026.

### Pennsylvania Managed Care Program Features, as of 2021 (2 of 2)

Features	Physical Health HealthChoices	PA Living Independent for the Elderly	Community HealthChoices
Program type	Comprehensive MCO	Program of All-inclusive Care for the Elderly (PACE)	Comprehensive MCO + MLTSS
Statewide or region-specific?	Statewide	Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bucks, Butler, Cambria, Chester, Clarion, Clinton, Columbia, Crawford, Cumberland, Dauphin, Delaware, Elk, Erie, Fayette, Forest, Franklin, Fulton, Greene, Indiana, Jefferson, Juniata, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Lycoming, Mercer, Mifflin, Montgomery, Montour, Northampton, Northumberland, Perry, Philadelphia, Schuylkill, Snyder, Somerset, Union, Venango, Warren, Washington, Westmoreland, and York counties.	Statewide
Federal operating authority	1915(b)	PACE	1915(b)/1915(c)
Program start date	02/01/1997	07/24/1998	01/01/2018
Waiver expiration date (if applicable)	12/31/2022		12/31/2024
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)	Mandatory		
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory		Mandatory

<b>Features</b>	<b>Physical Health HealthChoices</b>	<b>PA Living Independent for the Elderly</b>	<b>Community HealthChoices</b>
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory		
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Mandatory		
Populations enrolled: Full Duals	Mandatory	Voluntary	Mandatory
Populations enrolled: Children with Special Health Care Needs	Mandatory		
Populations enrolled: American Indian/Alaska Native	Mandatory	Voluntary	Mandatory
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Exempt	Exempt
Populations enrolled: Enrollment choice period	15 days	N/A	15 days
Populations enrolled: Enrollment broker name (if applicable)	Maximus	Maximus	Maximus
Populations enrolled: Notes on enrollment choice period		open enrollment all year	
Benefits covered: Inpatient hospital physical health	X	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)		X	
Benefits covered: Outpatient hospital physical health	X	X	X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)		X	
Benefits covered: Partial hospitalization		X	
Benefits covered: Physician	X	X	X

<b>Features</b>	<b>Physical Health HealthChoices</b>	<b>PA Living Independent for the Elderly</b>	<b>Community HealthChoices</b>
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X		X
Benefits covered: Clinic services	X	X	X
Benefits covered: Lab and x-ray	X	X	X
Benefits covered: Prescription drugs	X	X	X
Benefits covered: Prosthetic devices	X	X	X
Benefits covered: EPSDT	X		
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized Health Home			
Benefits covered: Home health services (services in home)	X		X
Benefits covered: Family planning	X		X
Benefits covered: Dental services (medical/surgical)	X	X	X
Benefits covered: Dental (preventative or corrective)	X	X	X
Benefits covered: Personal care (state plan option)	X	X	
Benefits covered: HCBS waiver services		X	X
Benefits covered: Private duty nursing	X	X	
Benefits covered: ICF-IDD			X
Benefits covered: Nursing facility services	X	X	X
Benefits covered: Hospice care	X	X	X



<b>Features</b>	<b>Physical Health HealthChoices</b>	<b>PA Living Independent for the Elderly</b>	<b>Community HealthChoices</b>
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			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Nurse midwife services, freestanding birth centers, podiatry, chiropractic services, optometrists, renal dialysis centers, ambulatory surgical centers, medical supplies & equipment, and home health (visiting nurses)	PACE programs cover specialists of all disciplines as needed.	Chiropractic services, maternity services, and podiatrist services.
Quality assurance and improvement: HEDIS data required?	Yes	No	Yes
Quality assurance and improvement: CAHPS data required?	Yes	No	Yes
Quality assurance and improvement: Accreditation required?	Yes	No	Yes
Quality assurance and improvement: Accrediting organization	NCQA	PACE Quality Assurance and Performance Improvement (QAPI)	NCQA
Quality assurance and improvement: EQRO contractor name (if applicable)	Island Peer Review Organization		Island Peer Review Organization (IPRO)
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	X		

Features	Physical Health HealthChoices	PA Living Independent for the Elderly	Community HealthChoices
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	X		
Participating plans: Plans in Program	Aetna Better Health; Gateway Health; Health Partners Plan; United Healthcare Community Plan, Inc; UPMC for You; Geisinger Health Plan; AmeriHealth Caritas/AmeriHealth Caritas Northeast; Keystone First	Senior LIFE Greensburg H-2937; Senior LIFE Johnstown H-3925; Senior LIFE Altoona H- 5902; Senior LIFE York H- 0819; Senior LIFE Lehigh H- 5978; Senior LIFE Washington H-2992; SpiriTrust LIFE H-2537; LIFE NWPA H- 4999; LIFE Geisinger H-2064; Mercy LIFE H-3919; Mercy LIFE West Philadelphia H-3908; LIFE St. Mary H- 6551; Innovage LIFE H-9830; Albright LIFE H-9068; Community LIFE H- 3917; LIFE Pittsburgh H-3918; VieCare Butler H-3060; VieCare Beaver H- 7660; VieCare Armstrong H- 6118	UPMC Community HealthChoices; Pennsylvania Health & Wellness; AmeriHealth Caritas; Keystone First
Notes: Program notes	<p>Enrollment - Full duals under 21 years of age are mandatory. Full Duals over age 21 were transitioned to Community HealthChoices (CHC) on January 1, 2018 and in the Southeast on January 1, 2019 and the rest of the state on January 1, 2020. Partial duals under 21 years of age are mandatory. Partial Duals 21 years of age and older are excluded from PH HealthChoices.</p> <p>Enrollment choice - Consumers have the right to change MCOs at any time.</p> <p>Program Incentives - PA HealthChoices Physical and Behavioral Health operate under a single statewide 1915(b) waiver but are administered separately.</p> <p>Private Duty Nursing is only covered for children under 21 years old. While the majority of Full Duals are in CHC, a small population remains in PH-HC until they acquire Medicare Part D.</p>	<p>Maximus is the statewide enrollment broker. It educates all eligible individuals on the LIFE program as a voluntary enrollment option. The number of Medicaid-only enrollees in several plans is less than 11. Those values were therefore suppressed to avoid the potential to reverse engineer the data and identify an enrollee by name. See individual plan data.</p>	<p>Pop enrolled - Participants go through choice counseling at initial enrollment and can change their plan at any time. Dating rules affect when the member will be enrolled.</p>