

California Managed Care Program Features, as of 2017 (1 of 4)

Features	Regional Model	Geographic Managed Care (GMC) Model	County Organized Health Systems (COHS) Model
Program type	Comprehensive MCO	Comprehensive MCO + MLTSS	Comprehensive MCO + MLTSS
Statewide or region-specific?	Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Imperial, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, San Benito, Sierra, Sutter, Tehama, Tuolumne, Yuba	Sacramento, San Diego	Del Norte, Humboldt, Lake, Lassen, Marin, Mendocino, Merced, Modoc, Monterey, Napa, Orange, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Shasta, Siskiyou, Solano, Sonoma, Trinity, Ventura, Yolo
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	10/02/2013	06/01/1991	10/01/1995
Waiver expiration date (if applicable)	12/31/2020	12/31/2020	12/31/2020
If the program ended in 2017, 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	Mandatory
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
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			Mandatory
Populations enrolled: Full Duals	Voluntary	Varies	Varies
Populations enrolled: Partial Duals			Mandatory

Features	Regional Model	Geographic Managed Care (GMC) Model	County Organized Health Systems (COHS) Model
Populations enrolled: Children with Special Health Care Needs	Voluntary	Voluntary	Mandatory
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Mandatory
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Voluntary
Populations enrolled: Enrollment choice period	Other	Other	Pre-assigned
Populations enrolled: Enrollment broker name (if applicable)		Health Care Options (Maximus)	
Populations enrolled: Notes on enrollment choice period	Approximately 45 days	Approximately 45 days	
Benefits covered: Inpatient hospital physical health	X	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health	X	X	X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X		
Benefits covered: Partial hospitalization			
Benefits covered: Physician	X	X	X
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X	X	X
Benefits covered: Clinic services	X	X	
Benefits covered: Lab and x-ray	X	X	X
Benefits covered: Prescription drugs and prosthetic devices	X	X	X
Benefits covered: EPSDT	X	X	X

Features	Regional Model	Geographic Managed Care (GMC) Model	County Organized Health Systems (COHS) Model
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			
Benefits covered: Family planning	X	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		X	
Benefits covered: ICF-IDD		X	X
Benefits covered: Nursing facility services		X	X
Benefits covered: Hospice care	X	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			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	Yes	Yes	Yes

Features	Regional Model	Geographic Managed Care (GMC) Model	County Organized Health Systems (COHS) Model
Quality assurance and improvement: CAHPS data required?	Yes	Yes	Yes
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: 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			
Performance incentives: Preferential auto-enrollment to reward plans	X	X	
Performance incentives: Public reports comparing plan performance on key metrics	X	X	X
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			

Features	Regional Model	Geographic Managed Care (GMC) Model	County Organized Health Systems (COHS) Model
Participating plans: Plans in Program	Anthem Blue Cross Partnership Plan (Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, San Benito, Sierra, Sutter, Tehama, Tuolumne, and Yuba); California Health & Wellness (Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Imperial, Inyo, Mariposa, Mono, Nevada, Placer, Sierra, Sutter, Tehama, Tuolumne, and Yuba); Kaiser (Amador, El Dorado, Placer, Imperial, and Plumas)	Community Health Group (San Diego); Health Net (San Diego, Sacramento); Molina Healthcare (San Diego, Sacramento); Care 1st Healthplan (San Diego); Kaiser (San Diego, Sacramento); ; Anthem Blue Cross Partnership Plan (Sacramento)	CenCal Health (San Luis Obispo, Santa Barbara, San Mateo, Solano, Napa , Yolo); Partnership HealthPlan of CA (Marin, Lake, Mendocino , Sonoma, Humboldt, Lassen, Modoc, Shasta, Siskiyou, Trinity, and Del Norte); Central California Alliance for Health (Monterey, Merced, Santa Cruz); CalOptima (Orange); Gold Coast Health Plan (Ventura)
Notes: Program notes		Full duals are mandatory for managed care enrollment in CCI counties (San Diego) and voluntary for all other counties (Sacramento).	Full duals are mandatory for managed care enrollment in CCI Counties (Orange and San Mateo) and voluntary for all other counties.

California Managed Care Program Features, as of 2017 (2 of 4)

Features	Two-Plan Model	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Program type	Comprehensive MCO + MLTSS	Dental only (PAHP)	Dental only (PAHP)
Statewide or region-specific?	Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, San Francisco, San Joaquin, Santa Clara, Stanislaus, Tulare	Los Angeles	Sacramento
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	01/01/1996	04/01/1998	12/01/1998
Waiver expiration date (if applicable)	12/31/2020	12/31/2020	12/31/2020
If the program ended in 2017, 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	Voluntary	Mandatory
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory	Voluntary	Mandatory
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Voluntary	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory	Voluntary	Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)		Voluntary	Mandatory
Populations enrolled: Full Duals	Varies	Voluntary	Mandatory
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs	Voluntary	Voluntary	Mandatory
Populations enrolled: Native American/Alaskan Natives	Voluntary	Mandatory	Voluntary

Features	Two-Plan Model	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Voluntary
Populations enrolled: Enrollment choice period	Other	60 days	60 days
Populations enrolled: Enrollment broker name (if applicable)		Health Care Operations (Maximus)	Health Care Operations (Maximus)
Populations enrolled: Notes on enrollment choice period	Approximately 45 days		
Benefits covered: Inpatient hospital physical health	X		
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health	X		
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Partial hospitalization			
Benefits covered: Physician	X		
Benefits covered: Nurse practitioner	X		
Benefits covered: Rural health clinics and FQHCs	X	X	X
Benefits covered: Clinic services	X		
Benefits covered: Lab and x-ray	X		
Benefits covered: Prescription drugs and prosthetic devices	X		
Benefits covered: EPSDT	X	X	X
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			
Benefits covered: Family planning	X		

Features	Two-Plan Model	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Benefits covered: Dental services (medical/surgical)			
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	X		
Benefits covered: ICF-IDD	X		
Benefits covered: Nursing facility services	X		
Benefits covered: Hospice care	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			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	Yes	Yes	Yes
Quality assurance and improvement: CAHPS data required?	Yes	Yes	Yes
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group		

Features	Two-Plan Model	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans	X		
Performance incentives: Public reports comparing plan performance on key metrics	X	X	X
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	CalViva Health (Fresno, Kings, Madera); Anthem Blue Cross Partnership Plan (Fresno, Kings, Madera, Alameda, Contra Costa, San Francisco, Santa Clara, Tulare); Health Net (Los Angeles, San Joaquin, Stanislaus, Kern, Tulare); Kern Family Health Care; L.A. Care Health Plan; Contra Costa Health Plan; Alameda Alliance for Health; Molina Healthcare (Riverside, San Bernardino); Inland Empire Health Plan (Riverside, San Bernardino); San Francisco Health Plan; Health Plan of San Joaquin (San Joaquin, Stanislaus); Santa Clara Family Health Plan	Health Net Dental Plan; Access Dental Plan; LIBERTY Dental Plan	Access Dental Plan/Sacramento; LIBERTY Dental Plan/Sacramento; Health Net Dental Plan/Sacramento
Notes: Program notes	Full duals are mandatory for managed care enrollment in CCI Counties (Los Angeles, Riverside, San Bernardino and Santa Clara) and voluntary for all other counties (Alameda, Contra Costa, Fresno, Kern, Kings, Madera, San Francisco, San Joaquin, Stanislaus and Tulare).		

California Managed Care Program Features, as of 2017 (3 of 4)

Features	Senior Action Care Network (SCAN)	Health Plan of San Mateo CCS Demo/San Mateo	Family Mosaic Program/San Francisco
Program type	Comprehensive MCO + MLTSS	Comprehensive MCO	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)
Statewide or region-specific?	Los Angeles, Riverside, San Bernardino	San Mateo	San Francisco
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	1915(a)
Program start date	01/01/1996	06/01/2012	12/01/1992
Waiver expiration date (if applicable)	12/31/2020	04/01/2018	
If the program ended in 2017, 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)			
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	Voluntary		
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs		Mandatory	Voluntary
Populations enrolled: Native American/Alaskan Natives	Voluntary	Exempt	Voluntary

Features	Senior Action Care Network (SCAN)	Health Plan of San Mateo CCS Demo/San Mateo	Family Mosaic Program/San Francisco
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt	Voluntary	Voluntary
Populations enrolled: Enrollment choice period		Pre-assigned	
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health	X	X	
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health	X	X	
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X		X
Benefits covered: Partial hospitalization	X		
Benefits covered: Physician	X	X	
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 and prosthetic devices	X	X	X
Benefits covered: EPSDT		X	X
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			

Features	Senior Action Care Network (SCAN)	Health Plan of San Mateo CCS Demo/San Mateo	Family Mosaic Program/San Francisco
Benefits covered: Family planning		X	
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			
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	X		
Benefits covered: Hospice care	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			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	No	Yes	Yes
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			

Features	Senior Action Care Network (SCAN)	Health Plan of San Mateo CCS Demo/San Mateo	Family Mosaic Program/San Francisco
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	SCAN Health Plan (Los Angeles, Riverside, San Bernardino); SCAN Health Plan (Nurs hm cert) (Los Angeles, Riverside, San Bernardino)	Health Plan of San Mateo CCS Demo	Family Mosaic Project/San Francisco
Notes: Program notes			

California Managed Care Program Features, as of 2017 (4 of 4)

Features	Positive Healthcare/Los Angeles	Program of All-Inclusive Care for the Elderly (PACE)
Program type	Other Prepaid Health Plan (PHP) (limited benefits)	Program of All-inclusive Care for the Elderly (PACE)
Statewide or region-specific?	Los Angeles	Alameda, Contra Costa, Fresno, Humboldt, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara
Federal operating authority	1937 Alt Benefit Plan	PACE
Program start date	04/01/2002	06/01/1991
Waiver expiration date (if applicable)		
If the program ended in 2017, 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	
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary	
Populations enrolled: Aged, Blind or Disabled Children or Adults		Voluntary
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary	
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)		
Populations enrolled: Full Duals		Voluntary
Populations enrolled: Partial Duals		Voluntary
Populations enrolled: Children with Special Health Care Needs		
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary

Features	Positive Healthcare/Los Angeles	Program of All-Inclusive Care for the Elderly (PACE)
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Exempt
Populations enrolled: Enrollment choice period		N/A
Populations enrolled: Enrollment broker name (if applicable)		
Populations enrolled: Notes on enrollment choice period		
Benefits covered: Inpatient hospital physical health		X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)		
Benefits covered: Outpatient hospital physical health	X	X
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	X
Benefits covered: Lab and x-ray	X	X
Benefits covered: Prescription drugs and prosthetic devices	X	X
Benefits covered: EPSDT	X	X
Benefits covered: Case management	X	X
Benefits covered: SSA Section 1945-authorized health home		
Benefits covered: Health home care (services in home)		
Benefits covered: Family planning	X	X

Features	Positive Healthcare/Los Angeles	Program of All-Inclusive Care for the Elderly (PACE)
Benefits covered: Dental services (medical/surgical)		
Benefits covered: Dental (preventative or corrective)		
Benefits covered: Personal care (state plan option)		X
Benefits covered: HCBS waiver services		
Benefits covered: Private duty nursing		
Benefits covered: ICF-IDD		
Benefits covered: Nursing facility services		X
Benefits covered: Hospice care	X	X
Benefits covered: Non-Emergency Medical Transportation	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.)		
Quality assurance and improvement: HEDIS data required?	Yes	No
Quality assurance and improvement: CAHPS data required?	Yes	No
Quality assurance and improvement: Accreditation required?	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		

Features	Positive Healthcare/Los Angeles	Program of All-Inclusive Care for the Elderly (PACE)
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	Positive Healthcare/Los Angeles	Fresno PACE; Redwood Coast PACE/Humboldt; Sutter SeniorCare PACE/Sacramento; Center for Elders Independence/Alameda; AltaMed Senior Buenacare/Los Angeles; Center for Elders Independence/Contra Costa; InnovAge PACE/Riverside; InnovAge PACE/San Bernardino; On Lok Lifeways (San Francisco, Alameda, Santa Clara); St. Paul's PACE/San Diego; CalOptima PACE/Orange; Brandman Centers for Senior Care/Los Angeles; San Diego PACE
Notes: Program notes		