

Michigan Managed Care Program Features, as of 2013

| Features | Healthy Kids Dental | Medicaid Health Plans | Program of All-Inclusive Care for the Elderly | Specialty Prepaid Inpatient Health Plans |
|--|---|---|---|--|
| Program type | Dental | Comprehensive MCO | PACE | BHO (PIHP and/or PAHP) |
| Statewide or region-specific? | Statewide | Statewide | Statewide | Statewide |
| Federal operating authority | 1915(b) waiver | 1915(b) waiver | PACE | 1915(b)/1915(c) |
| Program start date | 4/1/2009 | 7/1/1997 | 10/1/1994 | 10/1/1998 |
| Waiver expiration date (if applicable) | 10/31/2015 | 10/31/2015 | | |
| If the program ended in 2013, indicate the end date | | | | 9/30/2013 |
| Populations enrolled | | | | |
| Low-income Adults | | Mandatory | | Mandatory |
| Aged, Blind or Disabled Children or Adults | Mandatory | Mandatory | Voluntary | Mandatory |
| Non-Disabled Children (excluding children in foster care or receiving adoption assistance) | Mandatory | Mandatory | | Mandatory |
| Individuals receiving Limited Benefits | | Mandatory | | Mandatory |
| Low-income adults not otherwise eligible and covered prior to 2014 under a waiver or other authority | | Mandatory | | Mandatory |
| Full Duals | | Voluntary | Voluntary | Voluntary |
| Partial Duals | | Voluntary | Voluntary | Voluntary |
| Children with Special Health Care Needs | | Voluntary | | |
| Native American/Alaskan Natives | Voluntary | Voluntary | | Voluntary |
| Foster Care and Adoption Assistance Children | Mandatory | Mandatory | | Mandatory |
| Enrollment choice period | Does not apply because State only contracts with one managed care entity. | New enrollees have up to 90 days to switch Medicaid Health Plans, otherwise there is a rolling open enrollment based on beneficiaries ID number | N/A | No lock in period |
| Enrollment broker name (if applicable) | | Michigan Enrolls | | |
| Notes on enrollment choice period | | | | |

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| Benefits covered | | | | |
| Inpatient hospital physical health | | X | X | |
| Inpatient hospital behavioral health (MH and/or SUD) | | | X | X |
| Outpatient hospital physical health | | X | X | |
| Outpatient hospital behavioral health (MH and/or SUD) | | X | X | X |
| Partial hospitalization | | | | |
| Physician | | X | X | |
| Nurse practitioner | | X | . | . |
| Rural health clinics and FQHCs | | X | . | . |
| Clinic services | | X | . | . |
| Lab and x-ray | | X | . | . |
| Prescription drugs and prosthetic devices | | X | X | |
| EPSDT | | X | | |
| Case management | | X | | |
| Health home | | X | | |
| Family planning | | X | | |
| Dental services (medical/surgical) | | | X | |
| Dental (preventative or corrective) | X | | X | |
| Home health agency services | | X | | |
| Personal care (state plan option) | | | | |
| HCBS waiver services | | | X | |
| Private duty nursing | | | | |
| ICF-IDD | | | | |
| Nursing facility services | | X | X | |
| Hospice care | | X | | |
| Non-Emergency Medical Transportation | | X | | |

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| Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.) | | Ambulance, Blood Lead Testing, Certified midwife Services, Chiropractic, Disease Management, DME and Supplies, Emergency, End Stage Renal Disease Services, Health Education, Hearing, Hearing Aid for enrollees under 21 years of age, Physical Therapy, Occupational Therapy, Medically Necessary Weight Reduction Services, Outreach, Parenting and Birthing Classes, Speech/Language Therapy, Tobacco Cessation Treatment, Transplant, Treatment for STDs, and Vision Services. | Transportation | Assertive Community Treatment, Assessments, Assistive Technology, Behavior Management Review, Child Therapy, Clubhouse, Community Living Supports, Crisis Interventions, Crisis Residential, Enhanced Pharmacy, and Environmental Modifications |
| Quality assurance and improvement | | | | |
| HEDIS data required? | No | Yes | No | No |
| CAHPS data required? | No | Yes | No | No |
| Accreditation required? | No | Yes | No | No |
| Accrediting organization | | NCQA, URAC | | |
| EQRO contractor name (if applicable) | | Health Services Advisory Group (HSAG) | | |
| Performance incentives? | No | Yes | No | No |
| Payment bonuses/differentials to reward MCOs | | X | | |
| Preferential auto-enrollment to reward MCOs | | X | | |
| Public reports comparing MCO performance on key metrics | | X | | |
| Withholds tied to performance metrics | | X | | |

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| Participating plans and regions served | | | | |
| Plans in Program | Healthy Kids Dental | Blue Cross Complete; CoventryCares of Michigan; HealthPlus Partners Inc.; McLaren Health Plan; Meridian Health Plan of Michigan, Inc.; Midwest Health Plan; Molina Healthcare of Michigan; PHP of Mid-Michigan-FamilyCare; Priority Health Government Programs, Inc.; ProCare Health Plan; Total Health Care; UnitedHealthcare Community Plan, Inc.; Upper Peninsula Health Plan | Care Resources; Comprehensive Senior Care Corporation; Life Circles; PACE of Southwest Michigan; Center for Senior Independence | Access Alliance; CMH Affiliation of Mid-Michigan; CMH for Central Michigan; CMH Partnership of SE MI; Detroit Wayne County CMH Agency; Genesee County CMH Services; Lakeshore Behavioral Health Alliance; Lifeways; Macomb County CMH Services; Network 180; North Care; Northern Affiliation; Northwest CMH Affiliation; Oakland County CMH Authority; Saginaw County CMH Authority; Southwest Affiliation; Thumb Alliance; Venture Behavioral Health |

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| Notes | | | | |
| Program notes | <p>MDCH contracts for the administration of the Medicaid dental benefit called Healthy Kids Dental in 65 counties and 10 expansion counties. The contractor administers the Medicaid dental benefit to all Medicaid beneficiaries under age 21 in the participating counties. The dental services provided through the contractor mimic the dental services provided through the FFS Medicaid program. Medicaid beneficiaries have access to dentists through the contractor's participating dental networks. Beneficiaries must see a dentist who participates with the Healthy Kids Dental contract.</p> | <p>Outpatient Mental Health Services are limited to twenty (20) visits per contract year. The Comprehensive Health Plans are administered by the Managed Care Plan Division. The mission of the Division is to ensure that Michigan's most vulnerable citizens enrolled in the managed care programs receive high quality, comprehensive health care coverage in an efficient and cost effective manner.</p> | | <p>Michigan has incorporated services to persons with Developmental Disabilities into a 1915(b) Freedom of Choice "managed care" waiver. Also, all persons adjudicated Medicaid eligible are deemed enrolled in this Specialty Community Mental Health Services and Supports managed care program. Included services are offered under the authority of 1915(b)(3).</p> |