

North Carolina Managed Care Program Features, as of 2015

Features	Carolina ACCESS/Community Care of North Carolina	Program of All Inclusive Care for the Elderly	1915(b)/(c) Medicaid Waiver for MH/DD/SA Services
Program type	Primary Care Case Management (PCCM)	Program of All-inclusive Care for the Elderly (PACE)	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)
Statewide or region-specific?	Statewide	See information in Notes Section	Statewide
Federal operating authority	1932(a)	PACE	1915(b)/1915(c)
Program start date	04/01/1991	02/01/2008	07/01/2012
Waiver expiration date (if applicable)			07/01/2018
If the program ended in 2015, 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)			
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary	Voluntary	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)			
Populations enrolled: Full Duals	Voluntary	Voluntary	Mandatory
Populations enrolled: Partial Duals	Voluntary	Voluntary	
Populations enrolled: Children with Special Health Care Needs	Voluntary		Mandatory
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Mandatory
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary		Mandatory
Populations enrolled: Enrollment choice period	N/A	N/A	Pre-assigned
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)		X	X
Benefits covered: Outpatient hospital physical health		X	
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)		X	X
Benefits covered: Partial hospitalization		X	
Benefits covered: Physician		X	
Benefits covered: Nurse practitioner		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 and prosthetic devices		X	
Benefits covered: EPSDT			
Benefits covered: Case management	X	X	

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Benefits covered: Health home (SSA 1945)			
Benefits covered: Family planning			
Benefits covered: Dental services (medical/surgical)		X	
Benefits covered: Dental (preventative or corrective)		X	
Benefits covered: Home health agency services		X	
Benefits covered: Personal care (state plan option)		X	
Benefits covered: HCBS waiver services		X	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	
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)		Restorative Therapies; Nutrition counseling; Recreational therapies; Meals	Outpatient Behavioral Health Services including services provided by psychiatrists for recipients with a diagnosis in the 290-319 range; Psychiatric Residential Treatment Facilities; Therapeutic Foster Care; Residential Child Care; Hospital Emergency Dept
Quality assurance and improvement: HEDIS data required?	Yes	No	Yes
Quality assurance and improvement: CAHPS data required?	Yes	No	No
Quality assurance and improvement: Accreditation required?	No	No	Yes
Quality assurance and improvement: Accrediting organization			NCQA, URAC
Quality assurance and improvement: EQRO contractor name (if applicable)			Carolinas Center for Medical Excellence (CCME)
Performance incentives? Payment bonuses/differentials to reward plans			
Performance incentives? Preferential auto-enrollment to reward plans			
Performance incentives? Public reports comparing MCO performance on key metrics			
Performance incentives? Withholds tied to performance metrics			
Performance incentives? MCOs/PHPs required/encouraged to pay providers for value/quality outcomes using shared-risk or shared-savings methods			
Provider Value-Based Purchasing: State pays provider-based entities (such as ACOs or PCMHs) directly for value/quality outcomes using shared-risk or shared-savings methods			

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Participating plans and regions served: Plans in Program	CCNC/CA Carolina ACCESS	Elderhaus, Inc.; Piedmont Health Senior Care; LIFE Saint Joseph of the Pines; PACE of Guilford and Rockingham Counties DBA/ PACE of the Triad; PACE @ Home; Carolina Senior Care; PACE of the Southern Piedmont; VOANS Senior CommUnity Care of North Carolina, Inc.; Senior Total Life Care; StayWell Senior Care; CarePartners PACE	Alliance Behavioral Healthcare; Center Point Human Services; Cardinal Innovations Healthcare Solutions; Eastpointe; Partners Behavioral Health Management; Sandhills Center; Smoky Mountain Center; Trillium Health Resources
Notes: Program notes			All Medicaid recipients are covered by a Behavioral Healthcare (BHO). There are eight (8) plans and enrollment is based on the enrollee's county of residence. Counties served are listed with each plan.