

## North Carolina Managed Care Program Features, as of 2016

Features	Community Care of North Carolina	1915(b)/(c) Medicaid Waiver for MH/DD/SA Services	Program of All Inclusive Care for the Elderly
<b>Program type</b>	Primary Care Case Management Entity (PCCM Entity)	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)	Program of All-inclusive Care for the Elderly (PACE)
<b>Statewide or region-specific?</b>	Statewide	Statewide	Alamance, Alexander, Brunswick, Burke, Cabarrus, Caldwell, Caswell, Catawba, Chatham, Cleveland, Cumberland, Davidson, Davie, Durham, Gaston, Granville, Guilford, Harnett, Hoke, Iredell, Lee, Lincoln, Mecklenburg, Moore, New Hanover, Orange, Robeson, Rockingham, Rowan, Stanley, Union, and Wake counties
<b>Federal operating authority</b>	1932(a)	1915(b)/1915(c)	PACE
<b>Program start date</b>	04/01/1991	01/01/2012	02/01/2008
Waiver expiration date (if applicable)		07/01/2018	
If the program ended in 2016, 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)			
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary	Mandatory	Voluntary
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	Mandatory	Voluntary
Populations enrolled: Partial Duals			Voluntary
Populations enrolled: Children with Special Health Care Needs	Voluntary	Mandatory	
Populations enrolled: Native American/Alaskan Natives	Voluntary	Mandatory	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Mandatory	Exempt
<b>Populations enrolled: Enrollment choice period</b>	Other	Pre-assigned	N/A
<b>Populations enrolled: Enrollment broker name (if applicable)</b>			

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<b>Populations enrolled: Notes on enrollment choice period</b>	Beneficiaries have 90 days to enroll into the PCCM program		
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
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			X
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)			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

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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
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)		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	Restorative Therapies; Nutrition counseling; Recreational therapies; Meals
Quality assurance and improvement: HEDIS data required?	Yes	Yes	No
Quality assurance and improvement: CAHPS data required?	Yes	Yes	No
Quality assurance and improvement: Accreditation required?	No	Yes	No
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 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			
Participating plans and regions served: Plans in Program	North Carolina Community Care Carolina Access	Alliance Behavioral Healthcare; Cardinal Innovations Healthcare Solutions; Eastpointe Human Services; Partners Behavioral Health Management; Sandhills Center for MH/DD/SA; Trillium Health Resources; Vaya Health	Carolina Senior Care; Community Care Partners, Inc.; Elderhauc, Inc; Life St. Josteph of the Pines, Inc; PACE at Home, Inc; PACE of the Southern Piedmonth; PACE of the TRIAD; Piedmont Health Services, Inc; Senior Total Life Care, Inc.; Stay Well Senior Care; Voans Senior Community Care of North Carolina

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Notes: Program notes	Plan consists of independently contracted medical home/primary care providers who receive a per member per month (PMPM) management fee for coordination of care at the medical home provider office.		IMD: PACE serves individuals 55 and over in pre-approved service areas / zip codes. In regards to inpatient psych placements, a PACE organization can be contracted with a particular hospital or psych clinic in their approved service area and network. Most psychiatric inpatient placements with PACE have participants placed in a local contracted hospital that may have a psychiatric unit /wing within the facility.