

Idaho Managed Care Program Features, as of 2015

Features	Health Homes	Healthy Connections	Idaho Smiles
Program type	Primary Care Case Management (PCCM)	Primary Care Case Management (PCCM)	Dental only (PAHP)
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1945 Health Homes	1932(a)	1915(b)
Program start date	01/01/2013	10/01/2006	08/01/2010
Waiver expiration date (if applicable)			01/01/2016
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	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)	Voluntary	Voluntary	Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary	Voluntary	
Populations enrolled: Full Duals	Voluntary	Voluntary	
Populations enrolled: Partial Duals	Voluntary	Voluntary	
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	Mandatory
Populations enrolled: Enrollment choice period	N/A	N/A	
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period		20 days	
Benefits covered: Inpatient hospital physical health			
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health			
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Partial hospitalization			
Benefits covered: Physician			
Benefits covered: Nurse practitioner			
Benefits covered: Rural health clinics and FQHCs			
Benefits covered: Clinic services			
Benefits covered: Lab and x-ray			

Idaho Managed Care Program Features, as of 2015

Features	Health Homes	Healthy Connections	Idaho Smiles
Benefits covered: Prescription drugs and prosthetic devices			
Benefits covered: EPSDT			
Benefits covered: Case management	X	X	
Benefits covered: Health home (SSA 1945)	X		
Benefits covered: Family planning			
Benefits covered: Dental services (medical/surgical)			
Benefits covered: Dental (preventative or corrective)			X
Benefits covered: Home health agency services			
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			
Benefits covered: Hospice care			
Benefits covered: Non-Emergency Medical Transportation			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	Yes	No	No
Quality assurance and improvement: CAHPS data required?	No	No	Yes
Quality assurance and improvement: Accreditation required?	Yes	No	No
Quality assurance and improvement: Accrediting organization	NCQA		
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 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			

Idaho Managed Care Program Features, as of 2015

Features	Health Homes	Healthy Connections	Idaho Smiles
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			
Participating plans and regions served: Plans in Program	Multiple primary care providers	Multiple primary care providers	Idaho Smiles
Notes: Program notes			

Idaho Managed Care Program Features, as of 2015

Features	Idaho Behavioral Health Plan	Medicare-Medicaid Coordinated Plan	Idaho NEMT
Program type	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)	Comprehensive MCO	Non-Emergency Medical Transportation
Statewide or region-specific?	Statewide	Ada, Adams, Bannock, Benewah, Bingham, Blaine, Boise, Bonner, Bonneville, Boundary, Canyon, Caribou, Cassia, Clark, Elmore, Fremont, Gem, Gooding, Jefferson, Jerome, Kootenai, Latah, Madison, NezPerce, Oneida, Owyhee, Payette, Power, Shoshone, Twin Falls, Valley and Washington counties	Statewide
Federal operating authority	1915(b)	1915(a)/1915(c)	1902(a)(70) NEMT
Program start date	09/02/2013	07/01/2014	09/01/2010
Waiver expiration date (if applicable)	08/31/2015	10/01/2017	
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)	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	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	Mandatory
Populations enrolled: Partial Duals		Voluntary	Mandatory
Populations enrolled: Children with Special Health Care Needs	Mandatory		Mandatory
Populations enrolled: Native American/Alaskan Natives	Mandatory	Voluntary	Mandatory
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Voluntary	Mandatory
Populations enrolled: rollment choice period			
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	
Benefits covered: Outpatient hospital physical health		X	
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X	X	
Benefits covered: Partial hospitalization		X	

Idaho Managed Care Program Features, as of 2015

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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	
Benefits covered: Health home (SSA 1945)			
Benefits covered: Family planning		X	
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	
Benefits covered: Private duty nursing			
Benefits covered: ICF-IDD		X	
Benefits covered: Nursing facility services		X	
Benefits covered: Hospice care		X	
Benefits covered: Non-Emergency Medical Transportation		X	X
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			
Quality assurance and improvement: HEDIS data required?	Yes	No	No
Quality assurance and improvement: CAHPS data required?	Yes	No	No
Quality assurance and improvement: Accreditation required?	No	Yes	Yes
Quality assurance and improvement: Accrediting organization		NCQA	URAC
Quality assurance and improvement: EQRO contractor name (if applicable)		Qualis health	
Performance incentives? Payment bonuses/differentials to reward plans	X		
Performance incentives? Preferential auto-enrollment to reward plans			
Performance incentives? Public reports comparing MCO performance on key metrics	X		
Performance incentives? Withholds tied to performance metrics	X		

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Features	Idaho Behavioral Health Plan	Medicare-Medicaid Coordinated Plan	Idaho NEMT
Performance incentives? MCOs/PHPs required/encouraged to pay providers for value/quality outcomes using shared-risk or shared-savings methods		X	X
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			
Participating plans and regions served: Plans in Program	Idaho Behavioral Health Plan	Medicare Medicaid Coordinated Plan	Non-Emergency Medical Transportation
Notes: Program notes			