

Pennsylvania Managed Care Program Features, as of 2017 (1 of 2)

| Features | PA Living Independence for the Elderly (LIFE) | Adult Community Autism Program (ACAP) | HealthChoices - Physical Health |
|--|--|---|---------------------------------|
| Program type | Program of All-inclusive Care for the Elderly (PACE) | Other Prepaid Health Plan (PHP) (limited benefits) | Comprehensive MCO |
| Statewide or region-specific? | Statewide | Cumberland, Dauphin, Chester and Lancaster Counties | Statewide |
| Federal operating authority | PACE | 1915(a) | 1915(b) |
| Program start date | 07/24/1998 | 08/01/2009 | 02/01/1997 |
| Waiver expiration date (if applicable) | | | 12/31/2021 |
| 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 |
| Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities) | | | Mandatory |
| Populations enrolled: Aged, Blind or Disabled Children or Adults | | | Mandatory |
| Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance) | | | Mandatory |
| Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals) | | | Mandatory |
| Populations enrolled: Full Duals | Voluntary | Voluntary | Mandatory |
| Populations enrolled: Partial Duals | Voluntary | Voluntary | Mandatory |
| Populations enrolled: Children with Special Health Care Needs | | | Mandatory |
| Populations enrolled: Native American/Alaskan Natives | Voluntary | Exempt | Mandatory |

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| Populations enrolled: Foster Care and Adoption Assistance Children | Exempt | Exempt | Mandatory |
| Populations enrolled: Enrollment choice period | N/A | | Other |
| Populations enrolled: Enrollment broker name (if applicable) | | | Maximus |
| Populations enrolled: Notes on enrollment choice period | Open enrollment - all year | | Consumers have the right to change MCOs at any time. |
| Benefits covered: Inpatient hospital physical health | X | | X |
| Benefits covered: Inpatient hospital behavioral health (MH and/or SUD) | X | | |
| 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 | 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 |
| Benefits covered: Case management | X | | X |
| Benefits covered: SSA Section 1945-authorized health home | | | |
| Benefits covered: Health home care (services in home) | X | | X |

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| Benefits covered: Family planning | | | X |
| Benefits covered: Dental services (medical/surgical) | X | X | X |
| Benefits covered: Dental (preventative or corrective) | X | X | X |
| Benefits covered: Personal care (state plan option) | X | | X |
| Benefits covered: HCBS waiver services | X | X | |
| Benefits covered: Private duty nursing | X | | X |
| Benefits covered: ICF-IDD | | | X |
| Benefits covered: Nursing facility services | X | | 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.) | | Podiatry, Speech Therapy, Occupational Therapy, Language Therapy, Counseling, Respite, Supported Employment. | Nurse Midwife services, Free Standing Birth Centers, Podiatry, Chiropractic Services, Optometrist, Renal Dialysis Center, Ambulatory Surgical Center, Medical Supplies and Equipment, Home Health (Visiting Nurse). |
| Quality assurance and improvement: HEDIS data required? | No | No | Yes |
| Quality assurance and improvement: CAHPS data required? | No | No | Yes |
| Quality assurance and improvement: Accreditation required? | No | No | Yes |

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| Quality assurance and improvement: Accrediting organization | Quality Assurance and Performance Improvement (QAPI) program | | NCQA, Nationally recognized organization |
| Quality assurance and improvement: EQRO contractor name (if applicable) | | Internal Peer Review Organization | Island Peer Review Organization |
| Performance incentives: Payment bonuses/differentials to reward plans | | | X |
| 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 | | | X |
| Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes | | | X |
| Participating plans: Plans in Program | Senior LIFE Greensburg - H-2937; Senior LIFE Johnstown - H-3925; Senior LIFE Altoona H-5902; Senior LIFE York H-0819; Senior LIFE Lehigh H-5978; SpiriTrust LIFE H-2537; LIFE NWPA H-4999; LIFE Geisinger H-2064; Mercy LIFE H-3919; Mercy LIFE West Philadelphia H-3908; LIFE St. Mary H-6551; New Courtland LIFE H-9830; Albright LIFE H-9068; Community LIFE H-3917; LIFE - Pittsburgh H-3918; VieCare Butler H-3060; VieCare Beaver H-7660; VieCare Armstrong H-6188; Senior LIFE Washington H-2992 | Adult Community Autism Program | Aetna Better Health; Gateway Health; Health Partners Plans, Inc.; Geisinger Health Plan; United Healthcare Community Plan of Pennsylvania; UPMC for You, Inc.; Vista |

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| Notes: Program notes | | ACAP is a PAHP with MLTSS. | 1) Under "Benefits Covered", Private Duty Nursing is only covered for children under 21 years old. In addition, the first 30 days of nursing facility services are covered under capitation through the managed care plan, however, beyond the initial 30 days it is covered in FFS. The beneficiary is disenrolled from HealthChoices and enrolled in Fee-for-Service. 2) Under "Enrollment", only children under 21 years old, Full Dual and Partial Dual, are enrolled mandatorily in HealthChoices. PA Health Choices Physical and Behavioral Health operate under a single statewide 1915(b) waiver but are administered separately. |

Pennsylvania Managed Care Program Features, as of 2017 (2 of 2)

| Features | MATP (Medical Assistance Transportation Program) | HealthChoices - Behavioral Health |
|--|--|--|
| Program type | Non-Emergency Medical Transportation | Behavioral Health Organization (BHO) only (PIHP and/or PAHP) |
| Statewide or region-specific? | Philadelphia | Statewide |
| Federal operating authority | 1902(a)(70) NEMT | 1915(b) |
| Program start date | 11/01/2005 | 01/01/1999 |
| Waiver expiration date (if applicable) | | 12/31/2021 |
| 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 | Mandatory |
| Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities) | Voluntary | Mandatory |
| Populations enrolled: Aged, Blind or Disabled Children or Adults | Voluntary | Mandatory |
| Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance) | Voluntary | Mandatory |
| Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals) | Voluntary | Mandatory |
| Populations enrolled: Full Duals | Voluntary | Mandatory |
| Populations enrolled: Partial Duals | Voluntary | Mandatory |
| Populations enrolled: Children with Special Health Care Needs | Voluntary | Mandatory |
| Populations enrolled: Native American/Alaskan Natives | Exempt | Exempt |
| Populations enrolled: Foster Care and Adoption Assistance Children | | Mandatory |

| Features | MATP (Medical Assistance Transportation Program) | HealthChoices - Behavioral Health |
|---|---|--|
| 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 | | |
| Benefits covered: Inpatient hospital behavioral health (MH and/or SUD) | | X |
| Benefits covered: Outpatient hospital physical health | | |
| Benefits covered: Outpatient hospital behavioral health (MH and/or SUD) | | X |
| Benefits covered: Partial hospitalization | | X |
| Benefits covered: Physician | | X |
| Benefits covered: Nurse practitioner | | |
| Benefits covered: Rural health clinics and FQHCs | | |
| Benefits covered: Clinic services | | X |
| Benefits covered: Lab and x-ray | | |
| Benefits covered: Prescription drugs and prosthetic devices | | |
| Benefits covered: EPSDT | | X |
| Benefits covered: Case management | | X |
| Benefits covered: SSA Section 1945-authorized health home | | |
| Benefits covered: Health home care (services in home) | | |
| Benefits covered: Family planning | | |
| Benefits covered: Dental services (medical/surgical) | | |

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| 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 | | |
| Benefits covered: Hospice care | | |
| Benefits covered: Non-Emergency Medical Transportation | 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.) | | Psychiatric Rehabilitation, Peer Specialist Services. |
| Quality assurance and improvement: HEDIS data required? | No | Yes |
| Quality assurance and improvement: CAHPS data required? | No | No |
| Quality assurance and improvement: Accreditation required? | No | Yes |
| Quality assurance and improvement: Accrediting organization | | JCAHO, For inpatient, outpatient |
| Quality assurance and improvement: EQRO contractor name (if applicable) | | Island Peer Review Organization |
| Performance incentives: Payment bonuses/differentials to reward plans | | |
| Performance incentives: Preferential auto-enrollment to reward plans | | |

| Features | MATP (Medical Assistance Transportation Program) | HealthChoices - Behavioral Health |
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| 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 | Logisticare | Northeast Behavioral Healthcare Consortium; Northwest Behavioral Health Partnership; Perry County HealthChoices; Philadelphia County HealthChoices; Southwest Behavioral Health Management; Tuscarora Managed Care Alliance; York-Adams Joinder Board; Allegheny County HealthChoices; Beaver County HealthChoices; Behavioral Health Services of Bedford and Somerset; Berks County HealthChoices; Blair County HealthChoices; Bucks County HealthChoices; Cambria County HealthChoices; Carbon-Monroe-Pike Joinder Board; Chester County HealthChoices; Cumberland County HealthChoices; Dauphin County HealthChoices; Delaware County HealthChoices; Erie County HealthChoices; Fayette County HealthChoices; Greene County (Commonwealth); Lancaster County HealthChoices; Lebanon County HealthChoices; Lehigh County HealthChoices; Lycoming-Clinton Joinder Board; Montgomery County HealthChoices; North Central State Option; Northampton county HealthChoices |

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|----------------------|---|---|
| Notes: Program notes | | Pennsylvania HealthChoices Behavioral Health program operates statewide with some minor variations in benefits covered by county. |