California Managed Care Program Features, as of 2018 (1 of 4)

Features	Positive Healthcare/Los Angeles	Family Mosaic Program/San Francisco	Health Plan of San Mateo CCS Demo/San Mateo
Program type	Other Prepaid Health Plan (PHP) (limited benefits)	Behavioral Health Organization (BHO) only (PIHP and/or PAHP)	Comprehensive MCO
Statewide or region-specific?	Los Angeles	San Francisco	San Mateo
Federal operating authority	1937 Alt Benefit Plan	1915(a)	1115(a) (Medicaid demonstration waivers)
Program start date	04/01/2002	12/01/1992	06/01/2012
Waiver expiration date (if applicable)			04/01/2018
If the program ended in 2018, indicate the end date			04/01/2018
Populations enrolled: Low-income adults not covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary		
Populations enrolled: Low-income adults covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary		
Populations enrolled: Aged, Blind or Disabled Children or Adults			
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary		
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals			
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs		Voluntary	Mandatory

Features	Positive Healthcare/Los Angeles	Family Mosaic Program/San Francisco	Health Plan of San Mateo CCS Demo/San Mateo
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Exempt
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Voluntary
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			X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			
Benefits covered: Outpatient hospital physical health	X		X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)		X	
Benefits covered: Partial hospitalization			
Benefits covered: Physician	X		X
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X		X
Benefits covered: Clinic services	X	X	X
Benefits covered: Lab and x-ray	X	X	X
Benefits covered: Prescription drugs	X	X	X
Benefits covered: Prosthetic devices	X	X	X
Benefits covered: EPSDT	X	X	X
Benefits covered: Case management	X	X	X

Features	Positive Healthcare/Los Angeles	Family Mosaic Program/San Francisco	Health Plan of San Mateo CCS Demo/San Mateo
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			
Benefits covered: Family planning	X		X
Benefits covered: Dental services (medical/surgical)			
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	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.)			
Quality assurance and improvement: HEDIS data required?	Yes	Yes	Yes
Quality assurance and improvement: CAHPS data required?	Yes	No	No

Features	Positive Healthcare/Los Angeles	Family Mosaic Program/San Francisco	Health Plan of San Mateo CCS Demo/San Mateo
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
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 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	Positive Healthcare/Los Angeles	Family Mosaic Project/San Francisco	Health Plan of San Mateo CCS Demo
Notes: Program notes			

California Managed Care Program Features, as of 2018 (2 of 4)

Features	County Organized Health Systems (COHS) Model	Two-Plan Model	Regional Model
Program type	Comprehensive MCO + MLTSS	Comprehensive MCO + MLTSS	Comprehensive MCO
Statewide or region-specific?	Del Norte, Humboldt, Lake, Lassen, Marin, Medocino, Merced, Modoc, Monterey, Napa, Orange, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Shasta, Siskiyou, Solano, Sonoma, Trinity, Ventura, Yolo	Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Riverside, San Bernardino, San Francisco, San Joaquin, Santa Clara, Stanislaus, Tulare	Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Imperial, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, San Benito, Sierra, Sutter, Tehama, Tuolumne, Yuba
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers),1915(b)/1915(c)	1115(a) (Medicaid demonstration waivers)
Program start date	10/01/1995	01/01/1996	10/02/2013
Waiver expiration date (if applicable)	12/31/2020	12/31/2020	12/31/2020
If the program ended in 2018, indicate the end date			
Populations enrolled: Low-income adults not covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		Mandatory
Populations enrolled: Low-income adults covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory	Mandatory	Mandatory
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Mandatory	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory	Mandatory	Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Mandatory		
Populations enrolled: Full Duals	Varies	Varies	Voluntary
Populations enrolled: Partial Duals	Mandatory		

Features	County Organized Health Systems (COHS) Model	Two-Plan Model	Regional Model
Populations enrolled: Children with Special Health Care Needs	Mandatory	Voluntary	Voluntary
Populations enrolled: Native American/Alaskan Natives	Mandatory	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary	Voluntary
Populations enrolled: Enrollment choice period	Pre-assigned	Other	Other
Populations enrolled: Enrollment broker name (if applicable)			
Populations enrolled: Notes on enrollment choice period		Approximately 45 days	Approximately 45 days
Benefits covered: Inpatient hospital physical health	X	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X		
Benefits covered: Outpatient hospital physical health	X	X	X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)			X
Benefits covered: Partial hospitalization			
Benefits covered: Physician	X	X	X
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X	X	X
Benefits covered: Clinic services		X	X
Benefits covered: Lab and x-ray	X	X	X
Benefits covered: Prescription drugs	X	X	X
Benefits covered: Prosthetic devices	X	X	X

Features	County Organized Health Systems (COHS) Model	Two-Plan Model	Regional Model
Benefits covered: EPSDT	X	X	X
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			
Benefits covered: Family planning	X	X	X
Benefits covered: Dental services (medical/surgical)			
Benefits covered: Dental (preventative or corrective)	X		
Benefits covered: Personal care (state plan option)		X	
Benefits covered: HCBS waiver services		X	
Benefits covered: Private duty nursing		X	
Benefits covered: ICF-IDD	X	X	
Benefits covered: Nursing facility services	X	X	
Benefits covered: Hospice care	X	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.)			

Features	County Organized Health Systems (COHS) Model	Two-Plan Model	Regional Model
Quality assurance and improvement: HEDIS data required?	Yes	Yes	Yes
Quality assurance and improvement: CAHPS data required?	Yes	Yes	Yes
Quality assurance and improvement: Accreditation required?	No	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group	Health Services Advisory Group	Health Services Advisory Group
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans		X	X
Performance incentives: Public reports comparing plan performance on key metrics	X	X	X
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			

Features	County Organized Health Systems (COHS) Model	Two-Plan Model	Regional Model
Participating plans: Plans in Program	CenCal Health/San Luis Obispo; CenCal Health/Santa Barbara; Health Plan of San Mateo; Partnership HealthPlan of CA/Northeast; Partnership HealthPlan of CA/Northwest; Partnership Health Plan/Southeast; Partnership Health Plan/Southwest; Central California Alliance for Health/Merced; Central California Alliance for Health/Monterey Santa Cruz; CalOptima/Orange; Gold Coast Health Plan/Ventura	Health Net/Kern; Health Net/Los Angeles; Health Net/San Joaquin; Health Net/Stanislaus; Health Net/Tulare; CalViva Health/Fresno; CalViva Health/Kings; CalViva Health/Madera; Anthem Blue Cross Partnership Plan/Fresno; Anthem Blue Cross Partnership Plan/Kings; Anthem Blue Cross Partnership Plan/Madera; Anthem Blue Cross Partnership Plan/Alameda; Anthem Blue Cross Partnership Plan/Contra Costa; Anthem Blue Cross Partnership Plan/San Francisco; Anthem Blue Cross Partnership Plan/Santa Clara; Anthem Blue Cross Partnership Plan/Tulare; Kern Family Health Care; L.A. Care Health Plan/Los Angeles; Contra Costa Health Plan; Alameda Alliance for Health; Inland Empire Health Plan/Riverside; Inland Empire Health Plan/San Bernardino; Molina Healthcare of CA Partner Plan/Riverside; Molina Healthcare of CA Partner Plan/San Bernardino; San Francisco Health Plan; Health Plan of San Joaquin/San Joaquin; Health Plan of San Joaquin/Stanislaus; Santa Clara Family Health Plan	California Health & Wellness Plan/Imperial; California Health & Wellness Plan/Region 1; California Health & Wellness Plan/Region 2; Molina Healthcare of CA Partner Plan/Imperial; Anthem Blue Cross Partnership Plan/Region 1; Anthem Blue Cross Partnership Plan/Region 2; KP Cal LLC/Amador; KP Cal LLC/El Dorado; KP Cal LLC/Placer
Notes: Program notes	Full duals are mandatory for managed care enrollment in CCI Counties (Orange and San Mateo) and voluntary for all other Counties.	Full duals are mandatory for managed care enrollment in CCI Counties (Los Angeles, Riverside, San Bernardino, and Santa Clara) and voluntary for all other counties (Alameda, Contra Costa, Fresno, Kern, Kings, Madera, San Francisco, San Joaquin, Stanislaus and Tulare).	

California Managed Care Program Features, as of 2018 (3 of 4)

Features	Geographic Managed Care (GMC) Model	Senior Care Action Network (SCAN)	Program of All-Inclusive Care for the Elderly (PACE)
Program type	Comprehensive MCO + MLTSS	Comprehensive MCO + MLTSS	Program of All-inclusive Care for the Elderly (PACE)
Statewide or region-specific?	Sacramento, San Diego	Los Angeles, Riverside, San Bernardino	Alameda, Contra Costa, Fresno, Humboldt, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	PACE
Program start date	06/01/1991	01/01/1996	06/01/1991
Waiver expiration date (if applicable)	12/31/2020	12/31/2020	
If the program ended in 2018, indicate the end date			
Populations enrolled: Low-income adults not covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		
Populations enrolled: Low-income adults covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Voluntary	Voluntary
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory		
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals	Varies	Voluntary	Voluntary
Populations enrolled: Partial Duals			Voluntary

Features	Geographic Managed Care (GMC) Model	Senior Care Action Network (SCAN)	Program of All-Inclusive Care for the Elderly (PACE)
Populations enrolled: Children with Special Health Care Needs	Voluntary		
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Exempt	Exempt
Populations enrolled: Enrollment choice period	Other		N/A
Populations enrolled: Enrollment broker name (if applicable)	Health Care Options (Maximus)		
Populations enrolled: Notes on enrollment choice period	Approximately 45 days		
Benefits covered: Inpatient hospital physical health	X	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)			X
Benefits covered: Outpatient hospital physical health	X	X	X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X	X	X
Benefits covered: Partial hospitalization		X	X
Benefits covered: Physician	X	X	X
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X	X	
Benefits covered: Clinic services	X	X	X
Benefits covered: Lab and x-ray	X	X	X
Benefits covered: Prescription drugs	X	X	X
Benefits covered: Prosthetic devices	X	X	X

Features	Geographic Managed Care (GMC) Model	Senior Care Action Network (SCAN)	Program of All-Inclusive Care for the Elderly (PACE)
Benefits covered: EPSDT	X		X
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)		X	X
Benefits covered: Family planning	X		X
Benefits covered: Dental services (medical/surgical)		X	X
Benefits covered: Dental (preventative or corrective)		X	X
Benefits covered: Personal care (state plan option)	X	X	X
Benefits covered: HCBS waiver services	X		
Benefits covered: Private duty nursing	X		
Benefits covered: ICF-IDD	X		
Benefits covered: Nursing facility services	X	X	X
Benefits covered: Hospice care	X	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.)			

Features	Geographic Managed Care (GMC) Model	Senior Care Action Network (SCAN)	Program of All-Inclusive Care for the Elderly (PACE)
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	No	No
Quality assurance and improvement: Accrediting organization			
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group		
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans	X		
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			

Features	Geographic Managed Care (GMC) Model	Senior Care Action Network (SCAN)	Program of All-Inclusive Care for the Elderly (PACE)
Participating plans: Plans in Program	Care 1st Partner Plan/San Diego; Community Health Group Partnership Plan/San Diego; Health Net/San Diego; KP Cal LLC/San Diego; Molina Healthcare of CA Partner Plan/San Diego; Aetna Better Health of CA/San Diego; UnitedHealthcare Community Plan/San Diego; Anthem Blue Cross Partnership Plan/Sacramento; Health Net/Sacramento; KP Cal LLC/Sacramento; Molina Healthcare of CA Partner Plan/Sacramento; Aetna Better Health of CA/Sacramento; UnitedHealthcare Community Plan/Sacramento	SCAN Health Plan/Los Angeles; SCAN Health Plan/Riverside; SCAN Health Plan/San Bernardino; SCAN Health Plan (Nurs hm cert)/Los Angeles; SCAN Health Plan (Nurs hm cert)/Riverside; SCAN Health Plan (Nurs hm cert)/San Bernardino	Redwood Coast Pace/Humboldt; San Diego PACE; St. Paul's PACE/San Diego; Sutter SeniorCare PACE/Sacramento; AltaMed Senior Buenacare/Los Angeles; Brandman Centers for Senior Care/Los Angeles; CalOptima PACE/Orange; Center for Elders Independence/Alameda; Center for Elders Independence/Contra Costa; Fresno PACE; InnovAge PACE/Riverside; InnovAge PACE/San Bernardino County; On Lok Lifeways/Alameda; On Lok Lifeways/Santa Clara; On Lok Lifeways/San Francisco
Notes: Program notes	Full duals are mandatory for managed care enrollment in CCI Counties (San Diego) and voluntary for all other counties (Sacramento).		

California Managed Care Program Features, as of 2018 (4 of 4)

Features	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Program type	Dental only (PAHP)	Dental only (PAHP)
Statewide or region-specific?	Los Angeles	Sacramento
Federal operating authority	1915(a)/1915(i)	1115(a) (Medicaid demonstration waivers)
Program start date	04/01/1998	12/01/1998
Waiver expiration date (if applicable)	12/31/2020	12/31/2020
If the program ended in 2018, indicate the end date		
Populations enrolled: Low-income adults not covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary	Voluntary
Populations enrolled: Low-income adults covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary	Voluntary
Populations enrolled: Aged, Blind or Disabled Children or Adults	Voluntary	Voluntary
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary	Voluntary
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary	Voluntary
Populations enrolled: Full Duals	Voluntary	Voluntary
Populations enrolled: Partial Duals		
Populations enrolled: Children with Special Health Care Needs	Voluntary	Voluntary
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary

Features	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Voluntary
Populations enrolled: Enrollment choice period	60 days	60 days
Populations enrolled: Enrollment broker name (if applicable)	Health Care Operations (Maximus)	Health Care Operations (Maximus)
Populations enrolled: Notes on enrollment choice period		
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	X	X
Benefits covered: Clinic services		
Benefits covered: Lab and x-ray		
Benefits covered: Prescription drugs		
Benefits covered: Prosthetic devices		
Benefits covered: EPSDT	X	X
Benefits covered: Case management	X	X
Benefits covered: SSA Section 1945-authorized health home		

Features	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
Benefits covered: Health home care (services in home)		
Benefits covered: Family planning		
Benefits covered: Dental services (medical/surgical)	X	X
Benefits covered: Dental (preventative or corrective)	X	X
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	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.)		
Quality assurance and improvement: HEDIS data required?	Yes	Yes
Quality assurance and improvement: CAHPS data required?	Yes	Yes
Quality assurance and improvement: Accreditation required?	No	No
Quality assurance and improvement: Accrediting organization		

Features	Dental Managed Care/Los Angeles	Dental Managed Care/Sacramento
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 plan performance on key metrics	X	X
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	Health Net Dental Plan/Los Angeles; Access Dental Plan/Los Angeles; LIBERTY Dental Plan/Los Angeles	Health Net Dental Plan/Sacramento; Access Dental Plan/Sacramento; LIBERTY Dental Plan/Sacramento
Notes: Program notes		