Indiana Managed Care Program Features, as of 2020 (1 of 2)

Features	Healthy Indiana Plan	PACE	Hoosier Care Connect
Program type	Comprehensive MCO	Program of All-inclusive Care for the Elderly (PACE)	Comprehensive MCO
Statewide or region-specific?	Statewide	Lake County, Johnson County, and the following zip codes: 46107, 46201, 46202, 46203, 46204, 46217, 46218, 46219, 46221, 46222, 46225, 46227, 46229, 46237, 46239, 46241, 46259, 46506, 46514, 46516, 46517, 46526, 46554, 46556, 46561, 46574, 46601, 46613, 46614, 46615, 46616, 46617, 46619, 46628, 46635, 46637, 46563, 46573	Statewide
Federal operating authority	1115(a) (Medicaid demonstration waivers)	PACE	1915(b)
Program start date	02/01/2015	10/01/2012	04/01/2015
Waiver expiration date (if applicable)	12/31/2030		03/31/2023
If the program ended in 2020, 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		Voluntary	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)			

Features	Healthy Indiana Plan	PACE	Hoosier Care Connect
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals		Voluntary	
Populations enrolled: Children with Special Health Care Needs			
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt	Exempt	Voluntary
Populations enrolled: Enrollment choice period	Other	N/A	Other
Populations enrolled: Enrollment broker name (if applicable)	Maximus		Maximus
Populations enrolled: Notes on enrollment choice period	Members are auto-assigned if no health plan selection is made at application. Individuals who are auto-assigned have a 60 day window to make a health plan change. Members cannot change plans after having made a POWER account contribution.		Members are auto-assigned if no health plan selection is made at application. Individuals who are auto-assigned have a 90 day window to make a health plan change.
Benefits covered: Inpatient hospital physical health	Х	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	х	X	X
Benefits covered: Outpatient hospital physical health	х	Х	Х
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	х	Х	Х
Benefits covered: Partial hospitalization	х	x	х
Benefits covered: Physician	х	Х	х
Benefits covered: Nurse practitioner	х	х	х

Features	Healthy Indiana Plan	PACE	Hoosier Care Connect
Benefits covered: Rural health clinics and FQHCs	х	х	х
Benefits covered: Clinic services	Х	Х	Х
Benefits covered: Lab and x-ray	Х	X	x
Benefits covered: Prescription drugs	Х	X	X
Benefits covered: Prosthetic devices	Х	X	X
Benefits covered: EPSDT	Х		X
Benefits covered: Case management	Х	X	x
Benefits covered: SSA Section 1945- authorized Health Home			
Benefits covered: Home health services (services in home)	х	Х	Х
Benefits covered: Family planning	Х	Х	Х
Benefits covered: Dental services (medical/surgical)	х	Х	X
Benefits covered: Dental (preventative or corrective)	х	х	X
Benefits covered: Personal care (state plan option)		Х	
Benefits covered: HCBS waiver services			
Benefits covered: Private duty nursing		Х	
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	х	Х	X
Benefits covered: Hospice care		Х	х
Benefits covered: Non-Emergency Medical Transportation	х	Х	X

Features	Healthy Indiana Plan	PACE	Hoosier Care Connect
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	х		х
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Podiatry		Podiatry
Quality assurance and improvement: HEDIS data required?	Yes	No	Yes
Quality assurance and improvement: CAHPS data required?	Yes	No	Yes
Quality assurance and improvement: Accreditation required?	Yes	No	Yes
Quality assurance and improvement: Accrediting organization	NCQA		NCQA
Quality assurance and improvement: EQRO contractor name (if applicable)	Currently under procurement		Currently under procurement
Performance incentives: Payment bonuses/differentials to reward plans	Х		
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	Х		X
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	х		x
Participating plans: Plans in Program	Anthem; Managed Health Services of Indiana; CareSource Indiana, Inc.; MDwise	Franciscan Senior Health and Wellness; Saint Joseph PACE	Anthem; Managed Health Services of Indiana

Features	Healthy Indiana Plan	PACE	Hoosier Care Connect
	more than 100 days. IMD stays are primarily covered under Indiana's SMI	approved with an effective date of 10/1/2012. But, Indiana's first PACE program agreement was not effective	Home health and nursing facility care is covered for a short period of time, no more than 100 days. IMD stays are primarily covered under Indiana's SMI (serious mental illness) waiver in 2020.

Indiana Managed Care Program Features, as of 2020 (2 of 2)

Features	Hoosier Healthwise
Program type	Comprehensive MCO
Statewide or region-specific?	Statewide
Federal operating authority	1932(a)
Program start date	01/01/2000
Waiver expiration date (if applicable)	
If the program ended in 2020, indicate the end date	
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	
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	
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	
Populations enrolled: Children with Special Health Care Needs	
Populations enrolled: Native American/Alaskan Natives	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt

Features	Hoosier Healthwise
Populations enrolled: Enrollment choice period	Other
Populations enrolled: Enrollment broker name (if applicable)	Maximus
Populations enrolled: Notes on enrollment choice period	Members are auto-assigned if no health plan selection is made at application. Individuals who are auto-assigned have a 90 day window to make a health plan change.
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
Benefits covered: Partial hospitalization	х
Benefits covered: Physician	x
Benefits covered: Nurse practitioner	х
Benefits covered: Rural health clinics and FQHCs	х
Benefits covered: Clinic services	х
Benefits covered: Lab and x-ray	х
Benefits covered: Prescription drugs	х
Benefits covered: Prosthetic devices	x
Benefits covered: EPSDT	х
Benefits covered: Case management	х
Benefits covered: SSA Section 1945- authorized Health Home	

Features	Hoosier Healthwise
Benefits covered: Home health services (services in home)	х
Benefits covered: Family planning	x
Benefits covered: Dental services (medical/surgical)	X
Benefits covered: Dental (preventative or corrective)	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	X
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	X
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Podiatry
Quality assurance and improvement: HEDIS data required?	Yes
Quality assurance and improvement: CAHPS data required?	Yes
Quality assurance and improvement: Accreditation required?	Yes
Quality assurance and improvement: Accrediting organization	NCQA

Features	Hoosier Healthwise
Quality assurance and improvement: EQRO contractor name (if applicable)	Currently under procurement
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	Х
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	X
Participating plans: Plans in Program	Anthem; Managed Health Services of Indiana; CareSource Indiana, Inc.; MDwise
Notes: Program notes	IMD stays are primarily covered under Indiana's SMI (serious mental illness) waiver in 2020, Nursing facility and home health care is limited to short term needs.