## North Carolina Managed Care Program Features, as of 2020

<table>
<thead>
<tr>
<th>Features</th>
<th>Community Care of North Carolina</th>
<th>Program of All Inclusive Care for the Elderly</th>
<th>1915(b)/(c) Medicaid Waiver for MH/DD/SA Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program type</td>
<td>Primary Care Case Management Entity (PCCM Entity)</td>
<td>Program of All-inclusive Care for the Elderly (PACE)</td>
<td>Behavioral Health Organization (BHO) only (PIHP and/or PAHP)</td>
</tr>
<tr>
<td>Statewide or region-specific?</td>
<td>Statewide</td>
<td>Alamance, Alexander, Brunswick, Buncombe, Burke, Cabarrus, Caldwell, Caswell, Catawba, Chatham, Cleveland, Cumberland, Davidson, Davie, Durham, Durham Wake, Gaston, Granville, Guilford, Harnett, Henderson, Hoke, Iredell, Lee, Lincoln, Lincoln, Mecklenburg, Montgomery, Moore, Moore, New Hanover, Orange, Randolph, Robeson, Rockingham, Rowan, Stanley, Union</td>
<td>Statewide</td>
</tr>
<tr>
<td>Federal operating authority</td>
<td>1932(a)</td>
<td>PACE</td>
<td>1915(b)/1915(c)</td>
</tr>
<tr>
<td>Program start date</td>
<td>04/01/1991</td>
<td>02/01/2008</td>
<td>01/01/2012</td>
</tr>
<tr>
<td>Waiver expiration date (if applicable)</td>
<td></td>
<td></td>
<td>06/30/2024</td>
</tr>
<tr>
<td>If the program ended in 2020, indicate the end date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Populations enrolled: Low-income adults not covered under ACA Section VIII (excludes pregnant women and people with disabilities)</td>
<td>Mandatory</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Populations enrolled: Low-income adults covered under ACA Section VIII (excludes pregnant women and people with disabilities)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Populations enrolled: Aged, Blind or Disabled Children or Adults</td>
<td>Voluntary</td>
<td>Voluntary</td>
<td>Mandatory</td>
</tr>
<tr>
<td>Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)</td>
<td>Mandatory</td>
<td></td>
<td>Mandatory</td>
</tr>
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<tr>
<td>-------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Populations enrolled: Full Duals</td>
<td>Voluntary</td>
<td>Voluntary</td>
<td>Mandatory</td>
</tr>
<tr>
<td>Populations enrolled: Children with Special Health Care Needs</td>
<td>Voluntary</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Populations enrolled: Native American/Alaskan Natives</td>
<td>Voluntary</td>
<td>Voluntary</td>
<td>Voluntary</td>
</tr>
<tr>
<td>Populations enrolled: Foster Care and Adoption Assistance Children</td>
<td>Voluntary</td>
<td>Exempt</td>
<td>Mandatory</td>
</tr>
<tr>
<td>Populations enrolled: Enrollment choice period</td>
<td>Other</td>
<td>N/A</td>
<td>Pre-assigned</td>
</tr>
<tr>
<td>Populations enrolled: Enrollment broker name (if applicable)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Populations enrolled: Notes on enrollment choice period</td>
<td>90 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Inpatient hospital physical health</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: Outpatient hospital physical health</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: Partial hospitalization</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: Physician</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Nurse practitioner</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Rural health clinics and FQHCs</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Clinic services</td>
<td></td>
<td>X</td>
<td></td>
</tr>
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<tr>
<td>Benefits covered: Lab and x-ray</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Prescription drugs</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Prosthetic devices</td>
<td></td>
<td>X</td>
<td></td>
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<tr>
<td>Benefits covered: EPSDT</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: Case management</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: SSA Section 1945-authorized Health Home</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Home health services (services in home)</td>
<td></td>
<td>X</td>
<td></td>
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<tr>
<td>Benefits covered: Family planning</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Dental services (medical/surgical)</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Dental (preventative or corrective)</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Personal care (state plan option)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Benefits covered: HCBS waiver services</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Private duty nursing</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: ICF-IDD</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Benefits covered: Nursing facility services</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Hospice care</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Benefits covered: Non-Emergency Medical Transportation</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
<td>X</td>
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<tr>
<td>Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)</td>
<td></td>
<td></td>
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<tr>
<td>Quality assurance and improvement: HEDIS data required?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Quality assurance and improvement: CAHPS data required?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Quality assurance and improvement: Accreditation required?</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Quality assurance and improvement: Accrediting organization</td>
<td></td>
<td></td>
<td>NCQA, JCAHO, CARF</td>
</tr>
<tr>
<td>Quality assurance and improvement: EQRO contractor name (if applicable)</td>
<td></td>
<td></td>
<td>Carolina Center for Medical Excellence</td>
</tr>
<tr>
<td>Performance incentives: Payment bonuses/differentials to reward plans</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Performance incentives: Preferential auto-enrollment to reward plans</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performance incentives: Public reports comparing plan performance on key metrics</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Performance incentives: Withholds tied to performance metrics</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes</td>
<td></td>
<td></td>
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<tr>
<td>Participating plans: Plans in Program</td>
<td>North Carolina Community Care</td>
<td>Carolina Seniorcare; CareartnePrs PACE; Elderhaus Inc; Life St Joseph Of The Pines Inc; PACE At Home Inc; Pace Of The Southern Piedmont; PACE Of The Triad; Piedmont Health Services Inc; Senior Total Life Care Inc; Staywell; Voans Senior Community Care Of North Carolina</td>
<td>Alliance Behavioral Healthcare; Cardinal Innovations Healthcare Solutions; Eastpointe Human Services; Partners Behavioral Health Management; Sandhills Center for MM DD SA; Trillium Health Resources; Vaya Health</td>
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<tr>
<td>Notes: Program notes</td>
<td>Plan consists of independently contracted medical home/primary care providers who receive a PMPM management fee for coordinating care at the medical home provider office.</td>
<td></td>
<td>All Medicaid recipients are covered by a Behavioral Healthcare (BHO). Enrollment in one of seven plans is based on the enrollee's administrative county. Waiver expiration date (if applicable): 1915(b) waiver was renewed – 7/1/19 through 6/30/24; 1915(c) Innovations was renewed through 4/30/25; 1915(c) TBI (not statewide) was renewed through 3/31/27</td>
</tr>
</tbody>
</table>