

New York Managed Care Program Features, as of 2018 (1 of 2)

Features	Health and Recovery Plans	Managed Long Term Care	Medicaid Advantage Plus
Program type	Comprehensive MCO	MLTSS only (PIHP and/or PAHP)	Comprehensive MCO + MLTSS
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	10/01/2015	01/01/1998	01/01/2007
Waiver expiration date (if applicable)	03/31/2021	03/31/2021	03/31/2021
If the program ended in 2018, indicate the end date			
Populations enrolled: Low-income adults <u>not</u> covered under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary		
Populations enrolled: Low-income adults <u>covered</u> 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)			
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals		Mandatory	Voluntary
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs			
Populations enrolled: Native American/Alaskan Natives	Exempt	Exempt	Exempt

Features	Health and Recovery Plans	Managed Long Term Care	Medicaid Advantage Plus
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt	Exempt	Exempt
Populations enrolled: Enrollment choice period	30 days	60 days	60 days
Populations enrolled: Enrollment broker name (if applicable)	NY Medicaid Choice/Maximus	NY Medicaid Choice/Maximus	NY Medicaid Choice/Maximus
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health	X		X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X		X
Benefits covered: Outpatient hospital physical health	X		X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X		X
Benefits covered: Partial hospitalization	X		
Benefits covered: Physician	X	X	X
Benefits covered: Nurse practitioner	X	X	X
Benefits covered: Rural health clinics and FQHCs	X		
Benefits covered: Clinic services	X	X	X
Benefits covered: Lab and x-ray	X		X
Benefits covered: Prescription drugs	X		X
Benefits covered: Prosthetic devices	X		X
Benefits covered: EPSDT			
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			

Features	Health and Recovery Plans	Managed Long Term Care	Medicaid Advantage Plus
Benefits covered: Health home care (services in home)	X	X	X
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	X
Benefits covered: HCBS waiver services	X	X	X
Benefits covered: Private duty nursing	X	X	X
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services		X	X
Benefits covered: Hospice care	X	X	
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.)	Midwife Services, audiology, vision, occupational therapy		Podiatry
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			

Features	Health and Recovery Plans	Managed Long Term Care	Medicaid Advantage Plus
Quality assurance and improvement: EQRO contractor name (if applicable)	Island Peer Review Organization	Island Peer Review Organization	Island Peer Review Organization
Performance incentives: Payment bonuses/differentials to reward plans	X	X	
Performance incentives: Preferential auto-enrollment to reward plans	X	X	
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	X		
Participating plans: Plans in Program	Affinity Health Plan; Capital District Physician's Health Plan; Excellus Health Plan; Fidelis Care; HealthFirst; HealthPlus; HIP GNY; Independent Health Association; MetroPlus; Molina HealthCare of New York; MVP Health Plan; United HealthCare; YourCare Health Plan	Aetna Better Health; AgeWell New York; AlphaCare; ArchCare Community Life; Centers Plan for Healthy Living; ElderPlan; ElderServe; ElderWood; Extended MLTC; Fallon Health Weinberg; Fidelis Care; GuildNet; Hamaspik Choice; Health Advantage/Elant Choice; HealthPlus; iCircle Care; Independent Care Systems; Integra; Kalos Health Plan; MetroPlus; Montefiore; North Shore - LIJ Health Plan; Prime Health Choice; Senior Health Partners; Senior Network Health; Senior Whole Health; United HealthCare; Village Care; VNA HomeCare Options; VNS Choice; WellCare Advocate	ElderPlan; Fidelis Legacy Plan; GuildNet; HealthFirst; HealthPlus Advantage Plus; Senior Whole Health; Village Care; VNS Choice Plus
Notes: Program notes	The covered benefit of partial hospitalization only applies to enrollees 21 years of age and older. CMS has approved HCBS within the HARP program under 1115(a) authority.	MLTC enrollees may elect hospice care, but a hospice enrollee cannot enroll in MLTC. Some, but not all, HCBS waiver services are covered by MLTC plans.	

New York Managed Care Program Features, as of 2018 (2 of 2)

Features	PACE	Medicaid Advantage	Medicaid Managed Care
Program type	Program of All-inclusive Care for the Elderly (PACE)	Comprehensive MCO	Comprehensive MCO + MLTSS
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	PACE	1115(a) (Medicaid demonstration waivers)	1115(a) (Medicaid demonstration waivers)
Program start date	01/01/2001	10/01/2006	10/01/1997
Waiver expiration date (if applicable)		03/31/2021	03/31/2021
If the program ended in 2018, 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)			
Populations enrolled: Full Duals	Voluntary	Voluntary	
Populations enrolled: Partial Duals	Voluntary		
Populations enrolled: Children with Special Health Care Needs			
Populations enrolled: Native American/Alaskan Natives	Exempt	Exempt	Exempt

Features	PACE	Medicaid Advantage	Medicaid Managed Care
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt	Exempt	Mandatory
Populations enrolled: Enrollment choice period	N/A	60 days	30 days
Populations enrolled: Enrollment broker name (if applicable)	NY Medicaid Choice/Maximus	NY Medicaid Choice/Maximus	NY Medicaid Choice/Maximus
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health	X	X	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X	X	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
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
Benefits covered: Case management	X	X	X
Benefits covered: SSA Section 1945-authorized health home			

Features	PACE	Medicaid Advantage	Medicaid Managed Care
Benefits covered: Health home care (services in home)	X	X	X
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	X
Benefits covered: HCBS waiver services	X		
Benefits covered: Private duty nursing	X	X	X
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	X		X
Benefits covered: Hospice care			X
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.)	Podiatry, physical therapy, occupational therapy	Podiatry, outpatient rehabilitation, hearing services, vision care services	Nurse midwife services, vision care, foot care services
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	No
Quality assurance and improvement: Accrediting organization			

Features	PACE	Medicaid Advantage	Medicaid Managed Care
Quality assurance and improvement: EQRO contractor name (if applicable)	Island Peer Review Organization	Island Peer Review Organization	Island Peer Review Organization
Performance incentives: Payment bonuses/differentials to reward plans			X
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			X
Participating plans: Plans in Program	ArchCare Senior Life; Catholic Health - Life; CenterLight (CCM); Complete Senior Care; Eddy Senior Care; Fallon Health Weinberg; Independent Living for Seniors; PACE CNY; Total Senior Care	Affinity; Fidelis Legacy Plan; Liberty Health Advantage; United HealthCare; VNS Choice; WellCare	HealthNow; HealthPlus; HIP Combined; Independent Health/Hudson Valley; WNY; MetroPlus Health Plan; MetroPlus Health Plan Special Needs; Molina Healthcare of New York; MVP Health Plan; United HealthCare; VNS Choice Special Needs; WellCare; YourCare Health Plan; Fidelis Care; HealthFirst; Affinity Health Plan; Amida Care Special Needs; Capital District Physician's Health Plan; Crystal Run Health Plan; Excellus Health Plan
Notes: Program notes	Covered Benefits include non-hospice palliative care. OB/GYN is mandated with a minimum age of 55 years. Quality Assurance measures would include PACE home health agency, a federally mandated internal program.		The covered benefit of partial hospitalization only applies to enrollees 21 years of age and older. Fidelis Care covers emergency and non-emergency transportation in Rockland County only.