

Maryland Managed Care Program Features, as of 2014

Features	HealthChoice	Program of All-Inclusive Care for the Elderly (PACE)
Program type	Comprehensive MCO	Program of All-inclusive Care for the Elderly (PACE)
Statewide or region-specific?	Statewide	21052, 21202, 21205, 21206, 21213, 21214, 21217, 21218, 21219, 21220, 21221, 21222, 21224, 21227, 21231, 21237
Federal operating authority	1115(a) (Medicaid demonstration waivers), PACE	PACE
Program start date	6/2/1997	11/1/2002
Waiver expiration date (if applicable)	12/31/2016	
If the program ended in 2014, indicate the end date		
Populations enrolled		
Low-income Adults not eligible under ACA Section VIII	Mandatory	
Aged, Blind or Disabled Children or Adults	Mandatory	
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)	Mandatory	
Individuals receiving Limited Benefits		
Low-income adults eligible under ACA Section VIII	Mandatory	
Full Duals		Voluntary
Partial Duals		Voluntary
Children with Special Health Care Needs	Mandatory	
Native American/Alaskan Natives	Mandatory	Exempt
Foster Care and Adoption Assistance Children	Mandatory	Exempt
Enrollment choice period	Other	N/A
Enrollment broker name (if applicable)	Maximus	
Notes on enrollment choice period	21 days, 60 days for foster children	
Benefits covered		
Inpatient hospital physical health	X	
Inpatient hospital behavioral health (MH and/or SUD)	X	
Outpatient hospital physical health	X	
Outpatient hospital behavioral health (MH and/or SUD)	X	
Partial hospitalization	X	
Physician	X	
Nurse practitioner	X	
Rural health clinics and FQHCs	X	
Clinic services	X	
Lab and x-ray	X	
Prescription drugs and prosthetic devices	X	
EPSDT	X	
Case management	X	
Health home (SSA 1945)		
Family planning	X	
Dental services (medical/surgical)		

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Dental (preventative or corrective)		
Home health agency services	X	
Personal care (state plan option)		
HCBS waiver services		
Private duty nursing	X	
ICF-IDD		
Nursing facility services		
Hospice care	X	
Non-Emergency Medical Transportation	X	
Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	nurse midwife, freestanding birthing centers, podiatry (under 21 and diabetics).	All benefits listed under 42 CFR 460.90 - 460.106
Quality assurance and improvement		
HEDIS data required?	Yes	No
CAHPS data required?	Yes	No
Accreditation required?	Yes	No
Accrediting organization	NCQA	
EQRO contractor name (if applicable)	Delmarva Foundation for Medical Care, Inc.	
Performance incentives?		
Payment bonuses/differentials to reward plans	X	
Preferential auto-enrollment to reward plans		
Public reports comparing MCO performance on key metrics	X	
Withholds tied to performance metrics		
MCOs/PHPs required/encouraged to pay providers for value/quality outcomes using shared-risk or shared-savings methods		
Provider Value-Based Purchasing		
State pays provider-based entities (such as ACOs or PCMHs) directly for value/quality outcomes using shared-risk or shared-savings methods		
Participating plans and regions served		
Plans in Program	Amerigroup Community Plan; Jai Medical Systems; Kaiser Permanente; Maryland Physicians Care; MedStar Family Choice; Priority Partners; Riverside Health of Maryland; UnitedHealthCare	Hopkins Elder Plus
Notes		
Program notes	Kaiser Permanente joined the program in June 2014	