

North Dakota Managed Care Program Features, as of 2014

Features	North Dakota Medicaid Expansion	Health Management Program	PACE	PCCM
Program type	Comprehensive MCO	Other Prepaid Health Plan (PHP) (limited benefits)	Program of All-inclusive Care for the Elderly (PACE)	Primary Care Case Management (PCCM)
Statewide or region-specific?	Statewide	Statewide	Zip codes: 58501, 58502, 58503(Bismarck), 58504 (Lincoln), 58554 (Mandan), 58558(Menoken), 58601, 58602(Dickinson), 58652(Richardton), 58655(South Heart), 58656(Taylor), 58701, 58702, 58703, 58722, 58785(Minot)	Statewide
Federal operating authority	1115(a) (Medicaid demonstration waivers), 1915(b), 1937 Alt Benefit Plan	1932(a)	PACE	1932(a)
Program start date	1/1/2014	8/1/2007	8/1/2008	11/1/1994
Waiver expiration date (if applicable)	12/31/2015			
If the program ended in 2014, indicate the end date				
Populations enrolled				
Low-income Adults not eligible under ACA Section VIII		Voluntary		Mandatory
Aged, Blind or Disabled Children or Adults		Voluntary	Voluntary	
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)		Voluntary		Mandatory
Individuals receiving Limited Benefits		Voluntary		Mandatory
Low-income adults eligible under ACA Section VIII	Mandatory	Voluntary		Mandatory
Full Duals			Voluntary	
Partial Duals			Voluntary	
Children with Special Health Care Needs				
Native American/Alaskan Natives	Mandatory	Voluntary	Voluntary	Mandatory
Foster Care and Adoption Assistance Children	Mandatory	Voluntary	Exempt	Exempt
Enrollment choice period	Pre-assigned	Other	N/A	N/A
Enrollment broker name (if applicable)				
Notes on enrollment choice period		Open enrollment at all times with no timeframe indicated	Enrollment begins on the first day of the month following the determination that they are eligible	Once enrolled the recipient has 14 days to choose a PCP or one will be assigned. They can change PCP without good cause for the first 90 days and every 12 months during the annual open enrollment period.

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Benefits covered				
Inpatient hospital physical health	X		X	
Inpatient hospital behavioral health (MH and/or SUD)	X		X	
Outpatient hospital physical health	X		X	X
Outpatient hospital behavioral health (MH and/or SUD)	X		X	
Partial hospitalization	X			
Physician	X		X	X
Nurse practitioner	X		X	X
Rural health clinics and FQHCs	X		X	X
Clinic services	X		X	X
Lab and x-ray	X		X	
Prescription drugs and prosthetic devices	X		X	
EPSDT	X			
Case management	X	X	X	X
Health home (SSA 1945)				
Family planning	X			
Dental services (medical/surgical)	X		X	
Dental (preventative or corrective)	X		X	
Home health agency services	X		X	
Personal care (state plan option)			X	
HCBS waiver services				
Private duty nursing				
ICF-IDD				
Nursing facility services	X		X	
Hospice care	X		X	
Non-Emergency Medical Transportation	X		X	
Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)				
Quality assurance and improvement				

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HEDIS data required?	Yes	No	No	No
CAHPS data required?	Yes	No	No	No
Accreditation required?	Yes	No, but accreditation considered in plan selection criteria	No	No
Accrediting organization	NCQA	URAC		North Dakota
EQRO contractor name (if applicable)	Delmarva	North Dakota State	CMS and North Dakota State	
Performance incentives?				
Payment bonuses/differentials to reward plans				
Preferential auto-enrollment to reward plans				
Public reports comparing MCO performance on key metrics				
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	ND Medicaid Expansion - Sanford Health Plan	Health Management	PACE	Multiple Primary Care Providers
Notes				

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Program notes	<p>In order for the State to provide Medicaid Expansion through private carriers, an initial 1915(b) waiver allowing managed care enrollment of the new adult group for Medicaid expansion was submitted to CMS with authority granted. As Federal Medicaid Regulations require enrollees to have a choice of plans in the Metropolitan Statistical Areas (MSA's) and the State was only able to award one statewide Managed Care Organization (MCO) contract, a 1115 waiver was submitted to ensure compliance as related to having one health plan choice for those Medicaid Expansion recipients in urban areas of the State with CMS granting authority.</p>			