

Georgia Managed Care Program Features, as of 2019 (1 of 2)

Features	Non-Emergency Medical Transportation (NEMT)	Georgia Families	Georgia Families 360
Program type	Non-Emergency Medical Transportation	Comprehensive MCO	Comprehensive MCO
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1902(a)(70) NEMT	1932(a)	1932(a)
Program start date	10/07/1997	06/01/2006	03/03/2014
Waiver expiration date (if applicable)			
If the program ended in 2019, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Voluntary	Mandatory	
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	Voluntary		
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Voluntary	Mandatory	
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary		
Populations enrolled: Full Duals	Voluntary		
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs	Voluntary		
Populations enrolled: Native American/Alaskan Natives	Exempt	Exempt	Exempt

Features	Non-Emergency Medical Transportation (NEMT)	Georgia Families	Georgia Families 360
Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Exempt	Mandatory
Populations enrolled: Enrollment choice period		30 days	30 days
Populations enrolled: Enrollment broker name (if applicable)		Maximus	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			
Benefits covered: Physician		X	X
Benefits covered: Nurse practitioner		X	X
Benefits covered: Rural health clinics and FQHCs		X	X
Benefits covered: Clinic services		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		X	X
Benefits covered: Case management		X	X

Features	Non-Emergency Medical Transportation (NEMT)	Georgia Families	Georgia Families 360
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)			
Benefits covered: Family planning		X	X
Benefits covered: Dental services (medical/surgical)		X	X
Benefits covered: Dental (preventative or corrective)		X	X
Benefits covered: Personal care (state plan option)			X
Benefits covered: HCBS waiver services			
Benefits covered: Private duty nursing			
Benefits covered: ICF-IDD		X	X
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			
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)			Podiatry, Nurse Midwife
Quality assurance and improvement: HEDIS data required?	No	Yes	Yes

Features	Non-Emergency Medical Transportation (NEMT)	Georgia Families	Georgia Families 360
Quality assurance and improvement: CAHPS data required?	No	Yes	Yes
Quality assurance and improvement: Accreditation required?	No	Yes	Yes
Quality assurance and improvement: Accrediting organization		NCQA, JCAHO, URAC	NCQA, JCAHO, URAC
Quality assurance and improvement: EQRO contractor name (if applicable)		Health Services Advisory Group (HSAG)	Health Services Advisory Group (HSAG)
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			
Performance incentives: Withholds tied to performance metrics			
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes			
Participating plans: Plans in Program	Southeast Trans; ModivCare	Amerigroup Community Care; CareSource of Georgia; PeachState Health Plan; WellCare of Georgia	Amerigroup Community Care
Notes: Program notes			

Georgia Managed Care Program Features, as of 2019 (2 of 2)

Features	Planning for Healthy Babies (P4HB)
Program type	Other Prepaid Health Plan (PHP) (limited benefits)
Statewide or region-specific?	Statewide
Federal operating authority	1115(a) (Medicaid demonstration waivers)
Program start date	01/01/2011
Waiver expiration date (if applicable)	12/31/2029
If the program ended in 2019, 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)	
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	Voluntary
Populations enrolled: Full Duals	
Populations enrolled: Partial Duals	
Populations enrolled: Children with Special Health Care Needs	
Populations enrolled: Native American/Alaskan Natives	Exempt

Features	Planning for Healthy Babies (P4HB)
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt
Populations enrolled: Enrollment choice period	Other
Populations enrolled: Enrollment broker name (if applicable)	
Populations enrolled: Notes on enrollment choice period	Women who are enrolled in the P4HB program are granted a 30 days period to select a CMO of their choice. Furthermore, eff 01/01/2015, once a woman selects a CMO, she transitions to her selected CMO the day following her CMO selection. If the woman does not select a CMO within the 30 day choice period, she is auto-assigned to a CMO; in order to receive P4HB services, based on DCH's auto-assignment algorithm.
Benefits covered: Inpatient hospital physical health	
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X
Benefits covered: Outpatient hospital physical health	
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	
Benefits covered: Partial hospitalization	
Benefits covered: Physician	
Benefits covered: Nurse practitioner	
Benefits covered: Rural health clinics and FQHCs	
Benefits covered: Clinic services	
Benefits covered: Lab and x-ray	
Benefits covered: Prescription drugs	

Features	Planning for Healthy Babies (P4HB)
Benefits covered: Prosthetic devices	
Benefits covered: EPSDT	
Benefits covered: Case management	
Benefits covered: SSA Section 1945-authorized health home	
Benefits covered: Health home care (services in home)	
Benefits covered: Family planning	X
Benefits covered: Dental services (medical/surgical)	
Benefits covered: Dental (preventative or corrective)	
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	
Benefits covered: Hospice care	
Benefits covered: Non-Emergency Medical Transportation	
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.)	

Features	Planning for Healthy Babies (P4HB)
Quality assurance and improvement: HEDIS data required?	No
Quality assurance and improvement: CAHPS data required?	No
Quality assurance and improvement: Accreditation required?	No
Quality assurance and improvement: Accrediting organization	
Quality assurance and improvement: EQRO contractor name (if applicable)	
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	
Performance incentives: Withholds tied to performance metrics	
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	
Participating plans: Plans in Program	Amerigroup; CareSource of Georgia; Peach State Health Plan; WellCare of Georgia

Features	Planning for Healthy Babies (P4HB)
Notes: Program notes	<p>P4HB consists of family planning, inter-pregnancy care and care management services. Inter-pregnancy & care management services are limited to women who have given birth to a very low birthweight (VLBW) baby. Women who do not receive Medicaid benefits and have given birth to a VLBW baby are only eligible for care management services. Women ages 18-44 who qualify under the Low Income Medicaid Class of Assistance under the Georgia Medicaid State Plan are enrolled into one of the CMOs per the Medicaid State Plan. Women ages 18-44 who qualify under the Aged, Blind and Disabled classes of assistance under the Georgia Medicaid State Plan and who deliver a VLBW baby on or after January 1, 2011, will receive care management through a CMO of their choice.</p>