



UNDERSTANDING COMMUNITY HEALTHCHOICES vs. HEALTHCHOICES

HEALTHCHOICES is Pennsylvania's mandatory managed care program for 2.2 million Medical Assistance participants. Participants receive quality medical care and timely access to all appropriate physical and behavioral health services and/or drug and alcohol services.

COMMUNITY HEALTHCHOICES (CHC) is Pennsylvania's mandatory managed care for dual-eligible individuals and individuals with physical disabilities — serving more people in communities rather than in facilities, giving them the opportunity to work, spend more time with their families, and experience an overall better quality of life. When implemented, CHC will improve services for hundreds of thousands of Pennsylvanians, including older Pennsylvanians and individuals with disabilities.

WHAT IS SIMILAR?

- **Both are Medicaid Managed Care Programs:** Both programs utilize managed care organizations (MCOs) to provide coverage for their members. The commonwealth pays the MCOs a capitated monthly rate (like a premium for each member), and the MCOs coordinate the health care needs for their members.
- **Zones:** HealthChoices and CHC use the same five geographic zones.
- **Choice:** Members of both plans choose their MCOs.
- **Physical health benefits:** HealthChoices and CHC both offer the Adult Benefit Package for physical health services.
- **Behavioral health benefits:** Both HealthChoices and CHC are required to coordinate participants' behavioral health services from the Behavioral HealthChoices MCOs.

WHAT IS DIFFERENT?

- **Dual-eligible coverage:** CHC provides coverage for participants who are eligible for both Medicare and Medicaid. This means that the CHC-MCOs will have to coordinate closely with Medicare to ensure that participants have access to comprehensive services. Also, CHC-MCOs will have the ability to provide Medicare coverage (called D-SNPs) to participants who would like their Medicaid and Medicare services coordinated by the same entity.
- **Long-Term Services and Supports (LTSS):** CHC provides LTSS to participants who need the level of care provided in a nursing home. Participants who meet this criteria will receive LTSS services and physical health services from their CHC-MCO, including nursing facility care. HealthChoices MCOs will cover the first 30 days of nursing facility care. If a participant continues to need that level of care, the participant will apply for CHC.

ELIGIBILITY

Eligibility requirements for each program varies. The chart below shows, in general, which program individuals might qualify for.


HealthChoices

- Children up to, and including, 20 years old
- Adults
- Pregnant women
- Some women with breast and/or cervical cancer
- Lawfully present immigrants might be eligible


Community HealthChoices

- Individuals ages 21 and older who are dually eligible for Medicare and Medicaid
- Individuals ages 21 and older who need the level of care provided by a nursing facility
- *Individuals with intellectual or developmental disabilities who are eligible for services through the Office of Developmental Programs and residents of a state-operated nursing facility (including state veterans' homes) are not part of CHC*

SELECTING A PLAN

 CHC is a new program slated for a phased implementation in January 2018, while HealthChoices has been available for over 20 years. Everyone going into CHC will need to select a plan. For HealthChoices, some participants will have to select a new plan because their plan may no longer be available in their area. Everyone in HealthChoices, will be given the option of switching plans, if desired.

MCOs IN EACH ZONE

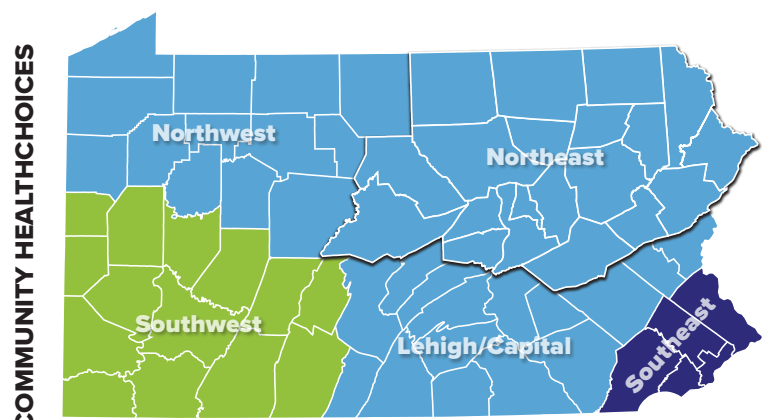
 A competitive procurement was completed for both HealthChoices and CHC. For CHC, three MCOs will be available for participants in each zone:

- **AmeriHealth Caritas**
- **Pennsylvania Health and Wellness (Centene)**
- **UPMC for You**

For HealthChoices, an announcement was made about newly selected MCOs. The current MCOs remain in place, and an announcement will be made at a later date concerning the newly selected MCOs.

TIMELINES FOR IMPLEMENTATION

To ensure a successful transition, the same implementation timeline will be used for both HealthChoices and CHC, with a few exceptions:



- JANUARY 2018
- JULY 2018
- MARCH 2018
- JANUARY 2019

- PHASE 1 JANUARY 2018
- PHASE 2 JULY 2018
- PHASE 3 JANUARY 2019