MASSHEALTH 1115 WAIVER POPULATION GRID

Insurance Plans

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	Α	В	С	D
1	N	eedy Individual Populations = Medicaid/1115/Waiver/CHIP/Fre		
2	Medicaid Fee For Service Plans	EPs who do not Practice Predominately at FQHC/RHC	Acute, CAH and Cancer Hospitals (Children's Hospitals have no threshold)	EPs who do Practice Predominately at FQHC/RHC
3	MassHealth Standard	Yes	Yes	Yes
4	MassHealth Breast and Cervical Cancer Treatment Program	Yes	Yes	Yes
5	MassHealth CommonHealth	Yes	Yes	Yes
		Yes (EPs will need to reduce their Medicaid Threshold by an	Yes (Hospitals will need to reduce their Medicaid Threshold	Yes
		estimated % attributed to CHIP determined by EHS by Region)	by an estimated % attributed to CHIP determined by EHS by	
6	MassHealth Family Assistance		Region)	
7	MassHealth Limited	Yes	Yes	Yes
8	Health Safety Net	N/A	Yes	Yes
9	New Program - MassHealth CarePlus	Yes	Yes	Yes
10	New Program - MassHealth Small Business Employee Premium Assistance	Yes	Yes	Yes
11		Medicaid Managed Care Organizations and CarePlus P	rograms	·
12	Serve Medicaid Managed Care Patient Only			
		EPs who do not Practice Predominately at FQHC/RHC	Acute, CAH and Cancer Hospitals (Children's Hospitals have	EPs who do Practice Predominately at FQHC/RHC
13	Medicaid Contracted Payors		no threshold)	
14	Boston Medical Center HealthNet Plan (BMCHP)	Yes	Yes	Yes
15	CeltiCare Health	Yes	Yes	Yes
16	Fallon Community Health Plan (FCHP) (Fallon Health)	Yes	Yes	Yes
17	Health New England (HNE)	Yes	Yes	Yes
18	Neighborhood Health Plan (NHP)	Yes	Yes	Yes
19	Tufts Health Plan	Yes	Yes	Yes
20			Tes	ies
20	Senior Care Options EPs who do not Practice Predominately at FOHC/RHC Acute, CAH and Cancer Hospitals (Children's Hospitals have EPs who do Practice Predominately at FQHC/RHC			
21	Medicaid Contracted Payors	EPs who do not Practice Predominately at FQHC/RHC	Acute, CAH and Cancer Hospitals (Children's Hospitals have no threshold)	Li s who do i radioc i redominately at i scrontrio
22	Boston Medical Center Senior Care Options	Yes	Yes	Yes
23	Commonwealth Care Alliance	Yes	Yes	Yes
24	Navicare (Fallon Community Health Plan)	Yes	Yes	Yes
25	Senior Whole Health	Yes	Yes	Yes
26	Tufts Medicaid Managed Care Product	Yes	Yes	Yes
27	United Health Care Medicaid Managed Care Product	Yes	Yes	Yes
28	Program of All Inclusive Care for the Elderly (PACE)			
29	Payor	EPs who do not Practice Predominately at FQHC/RHC	Acute, CAH and Cancer Hospitals (Children's Hospitals have no threshold)	EPs who do Practice Predominately at FQHC/RHC
30	Program of All Inclusive Care for the Elderly	Yes	Yes	Yes
31	Behavioral Health Options			
_		EPs who do not Practice Predominately at FQHC/RHC	Acute, CAH and Cancer Hospitals (Children's Hospitals have	EPs who do Practice Predominately at FQHC/RHC
32	Payor		no threshold)	
33	Beacon Health Options – Boston Medical Center HealthNet Plan	Yes	Yes	Yes
34	Beacon Health Options – Fallon Health	Yes	Yes	Yes
35	Beacon Health Options – Neighborhood Health Plan	Yes	Yes	Yes
36	Cenpatico – CeltiCare Health	Yes	Yes	Yes
37	Massachusetts Behavioral Health Partnership – Health New England	Yes	Yes	Yes
38	Massachusetts Behavioral Health Partnership – PCC Plan	Yes	Yes	Yes
39	Tufts Health Plan	Yes	Yes	Yes
40		Dental Options	100	105
40	DentaQuest		Vec	Vor
41		Yes	Yes	Yes
	Commonwealth Care Alliance	One Care Program (ICOs)		
43	Commonwealth Care Alliance			No.
44	Tufts Health Plan	Yes	Yes	Yes
45				Revised 3/11/2016