



# The PsychU Guide To The West Virginia Mental Health System

This resource is provided for informational purposes only and is not intended as reimbursement or legal advice.

You should seek independent, qualified professional advice to ensure that your organization is in compliance with the complex legal and regulatory requirements governing health care services, and that treatment decisions are made consistent with the applicable standards of care.

Except as otherwise indicated, the information provided is accurate to the best of Otsuka's knowledge as of December 2017.

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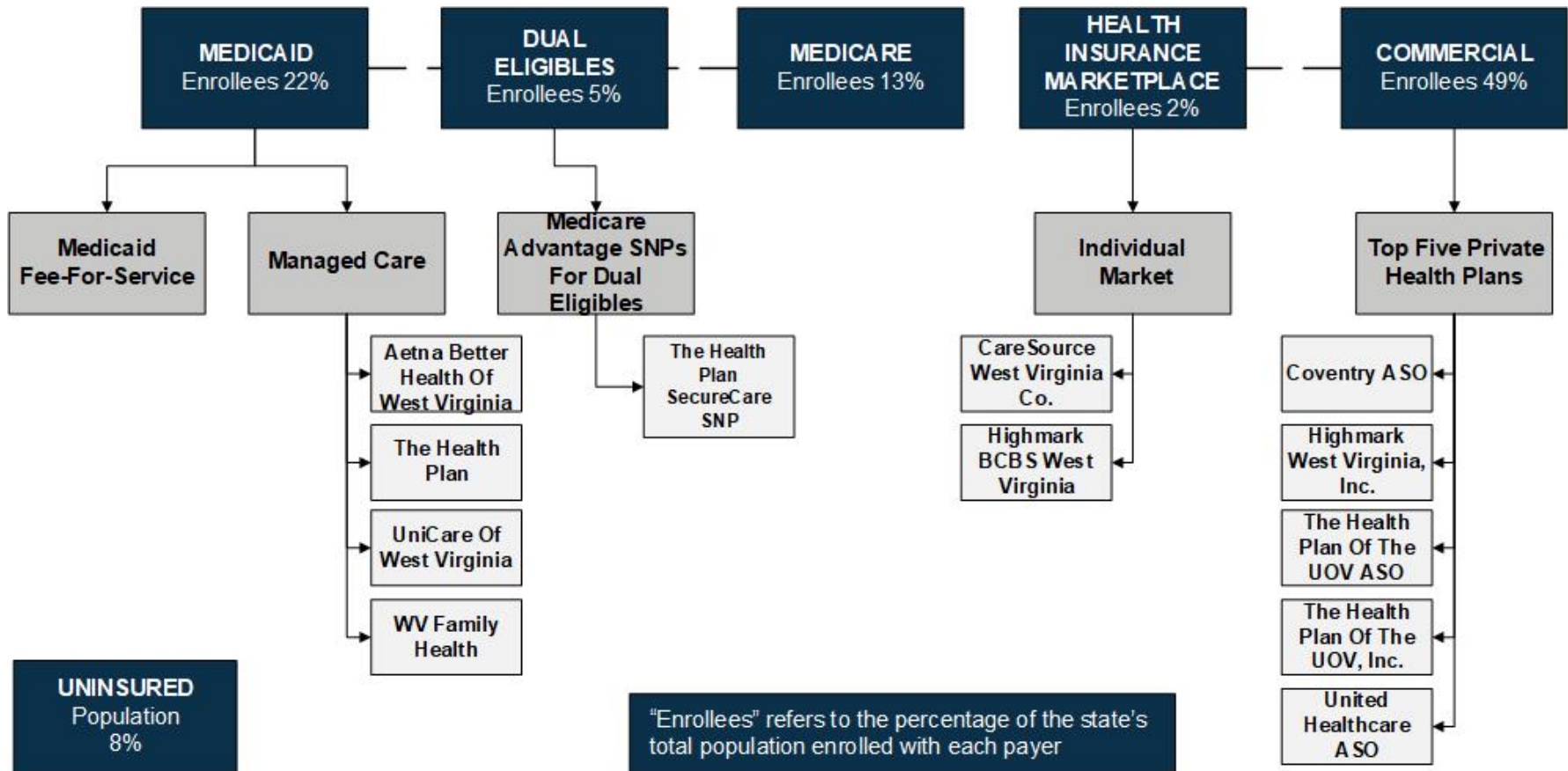
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**BH** = Behavioral Health  
**FFS** = Fee-For-Service  
**MCP** = Managed Care Program  
**SMI** = Serious Mental Illness

# A. WEST VIRGINIA HEALTH CARE MARKETPLACE OVERVIEW

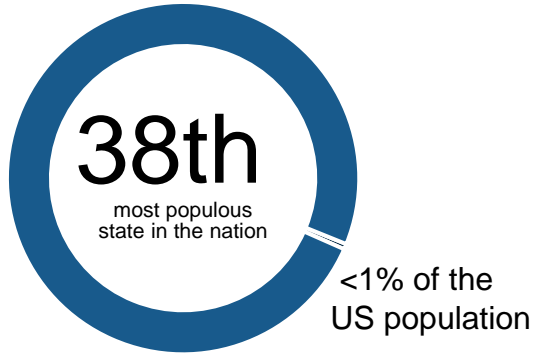
# 1. Physical Health Care Coverage Map



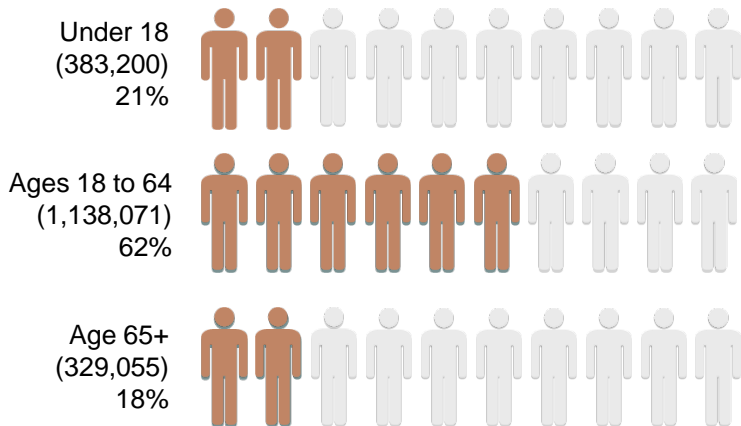
**ASO** = Administrative Services Only      **UOV** = Upper Ohio Valley  
**BCBS** = Blue Cross Blue Shield      **WV** = West Virginia  
**SNP** = Special Needs Plan

# 2. Population Demographics

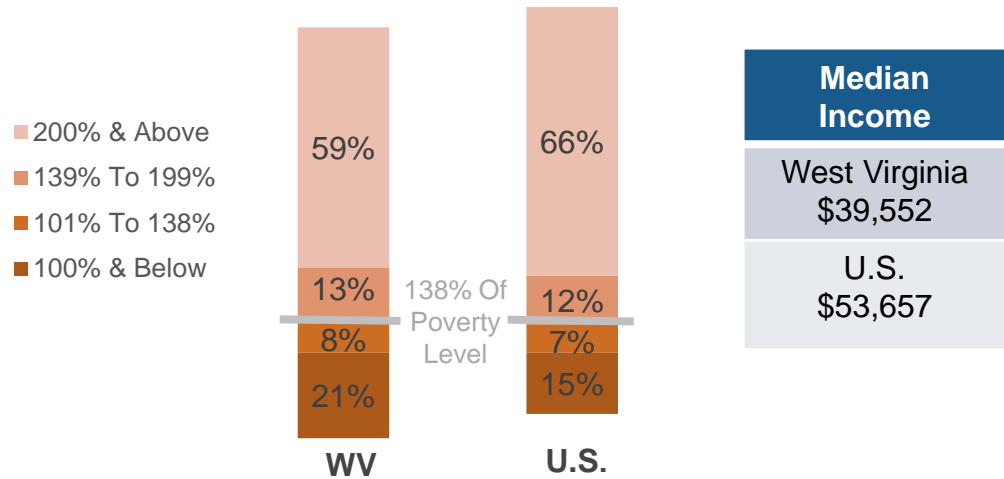
Total West Virginia Population – 1,850,326  
 SMI Population – 94,104



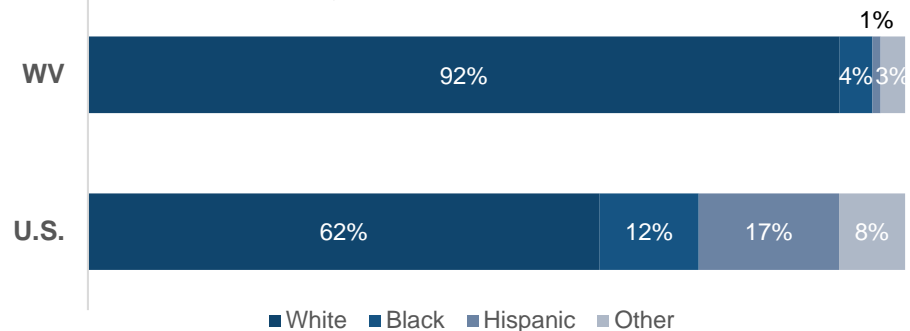
## Population Distribution By Age



## Population Distribution By Income To Poverty Threshold Ratio

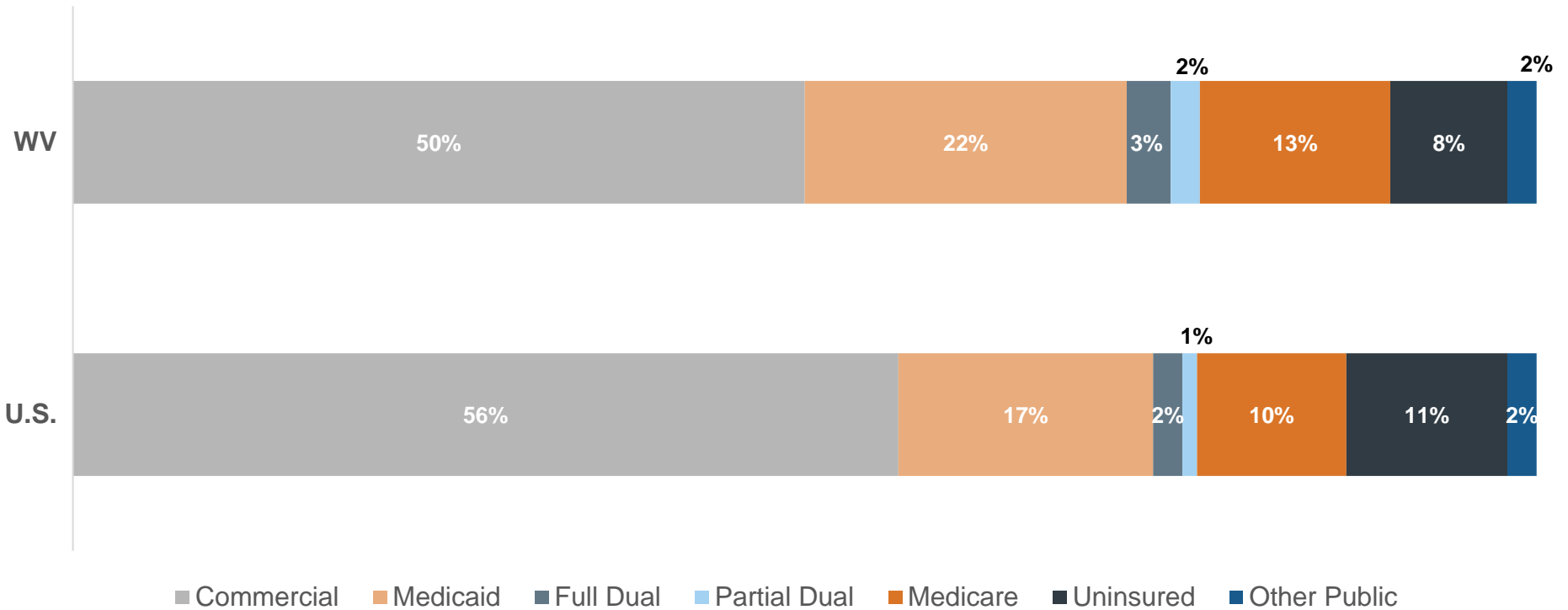


## West Virginia & U.S. Racial Composition



**SMI = Serious Mental Illness**

### 3. Population Distribution By Payer: United States v. West Virginia



## 4. Largest Health Plans By Enrollment

Plan Name	Plan Type	Enrollment*
Medicare FFS	Medicare	446,841
Highmark West Virginia	Commercial	275,789
UniCare Of West Virginia	Medicaid Managed Care	142,919
Medicaid FFS	Medicaid	133,663
Aetna Better Health Of West Virginia	Medicaid Managed Care	127,807
The Health Plan	Medicaid Managed Care	84,096
WV Family Health	Medicaid Managed Care	69,095
The Health Plan Of The Upper Ohio Valley	Commercial ASO	67,400
UnitedHealthcare	Commercial ASO	52,853
Care Improvement Plus South Central Insurance Company	Medicare	36,094

\*Medicaid as of July 2017; Medicare as of April 2017; Commercial as of 4<sup>th</sup> quarter 2016

**ASO** = Administrative Services Only  
**FFS** = Fee-For-Service  
**WV** = West Virginia



## 5. Largest Health Plans By Estimated Serious Mental Illness (SMI) Enrollment

Plan Name	Plan Type	Enrollment*	Estimated SMI Enrollment
Medicare FFS	Medicare	446,841	63,898
Medicaid FFS	Medicaid	133,663	14,448
UniCare Of West Virginia	Medicaid Managed Care	142,919	8,001
Aetna Better Health Of West Virginia	Medicaid Managed Care	127,807	7,155
Highmark West Virginia	Commercial	275,789	6,536
Care Improvement Plus South Central Insurance Company	Medicare	36,094	5,161
The Health Plan	Medicaid Managed Care	84,096	4,708
Humana Health Plan, Inc.	Medicare	29,786	4,259
WV Family Health	Medicaid Managed Care	69,095	3,868
Usable Mutual Insurance Company	Medicare	14,895	2,130

\*Medicaid as of July 2017; Medicare as of April 2017; Commercial as of 4<sup>th</sup> quarter 2016

**FFS** = Fee For Service  
**WV** = West Virginia

## 6. Health Insurance Marketplace

Health Insurance Marketplace	
Type Of Marketplace	Federal
Individual Enrollment Contact	<a href="http://www.healthcare.gov">www.healthcare.gov</a>
	1-800-318-2596
Small Business Enrollment Contact	No small group plans are available through the marketplace; employers must purchase coverage directly from an insurance carrier or through an insurance broker

### 2018 Individual Market Health Plans

- CareSource West Virginia Co
- Highmark Blue Cross Blue Shield West Virginia

### 2018 Small Group Market Plans

- None

## **B. WEST VIRGINIA MEDICAID SYSTEM OVERVIEW**

# 7. Delivery System, Risk, & Federal Participation

## Medicaid Financial Delivery System

Is Managed Care Mandatory For Populations With SMI?	Yes
Is Managed Care Mandatory For Dual Eligibles?	No
Total Medicaid Population Distribution	<ul style="list-style-type: none"> <li>• 24% in FFS</li> <li>• 76% in Managed Care</li> </ul>
Medicaid Beneficiaries With SMI: <i>Primary Service System</i>	<ul style="list-style-type: none"> <li>• Because the dual eligible population is mandatorily enrolled in FFS, while the disabled and Medicaid expansion populations are mandatorily enrolled in managed care, the SMI population is split between the two delivery systems</li> <li>• OPEN MINDS estimates that 67% of the SMI population is enrolled in managed care</li> </ul>

## Medicaid Financing & Risk Arrangements: Behavioral Health

Traditional Behavioral Health Services	<ul style="list-style-type: none"> <li>• <u>FFS Population</u>: Covered FFS by the state</li> <li>• <u>Managed Care Population</u>: Included in the MCO's capitation rate</li> </ul>
Specialty Behavioral Health Services	
Pharmaceuticals	<ul style="list-style-type: none"> <li>• <u>FFS Population</u>: Covered FFS by the state</li> <li>• <u>Managed Care Population</u>: Prescription drugs are covered FFS by the state; pharmaceuticals administered in a professional setting are included in the MCO's capitation rate</li> </ul>

**FFS** = Fee-For-Service

**SMI** = Serious Mental Illness

**MCO** = Managed Care Organization

## 8. Expansion Decision

State Medicaid Expansion Decision	
Participating In Expansion?	Yes
Date Of Expansion	January 2014
Medicaid Eligibility Income Limit For Able-Bodied Adults	133% of FPL Note: The PPACA requires that 5% of income be disregarded with determining eligibility
Legislation Used To Expand Medicaid	None

**FPL** = Federal Poverty Level  
**PPACA** = Patient Protection & Affordable Care Act

## 9. Care Coordination Entities

### Medicaid Care Coordination Entities For Chronic Care Populations (Including SMI)

<b>Managed Care Plan</b>	✓	The managed care plans are required to provide care coordination
<b>ACO Program</b>		None
<b>Health Home</b>		West Virginia has implemented two health home initiatives: one for individuals who have bipolar disorder and are at-risk of contracting hepatitis B or C; and another for individuals with obesity, pre-diabetes, or diabetes who are at-risk of developing anxiety or depression
<b>Medical Home</b>	✓	None
<b>PCCM Model</b>	✓	The state ended its PCCM program in July 2016

**ACO** = Accountable Care Organization  
**PCCM** = Primary Care Case Management  
**SMI** = Serious Mental Illness

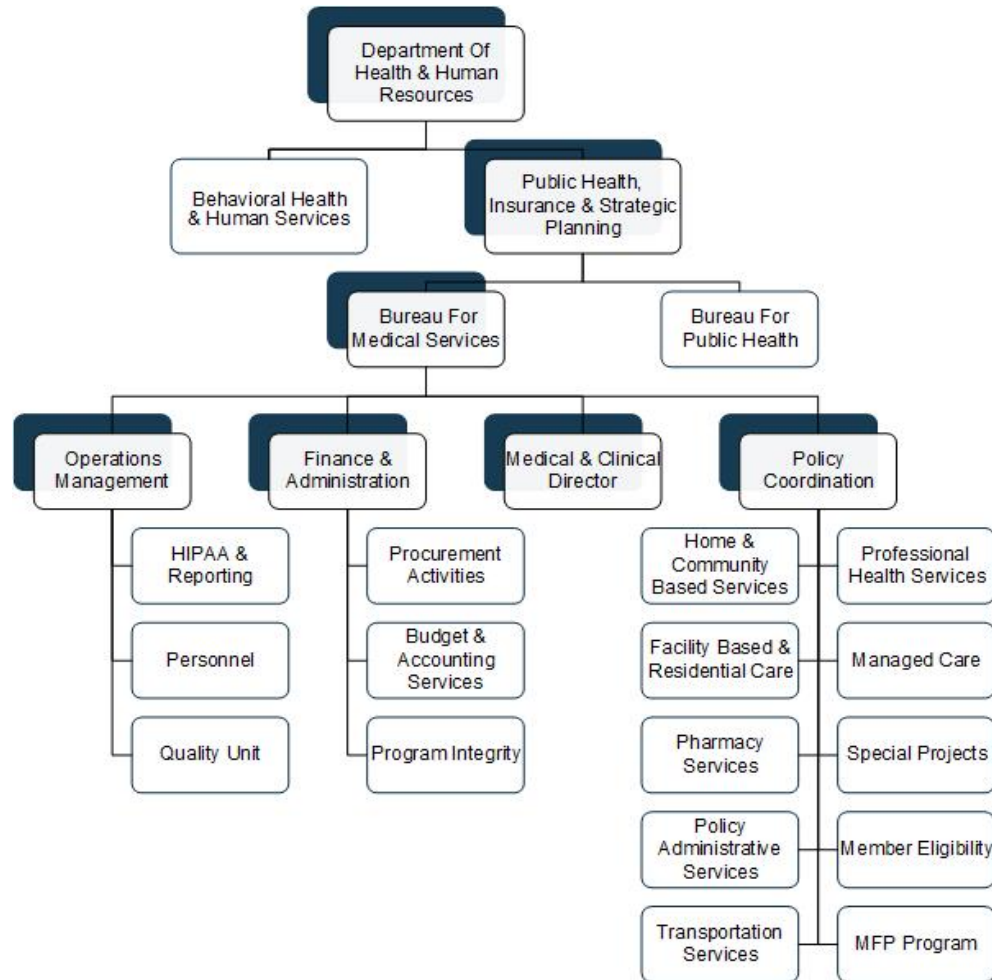
# 10. The Uninsured

## State Agency Responsible For Uninsured Citizens & Delivery System Model

<b>Physical Health Services</b>	The Department Of Health & Human Resources Division Of Primary Care delivers physical health services to the uninsured population by providing funding to 31 FQHCs and FQHC look-alikes, and nine free clinics
<b>Mental Health Services</b>	The Department Of Health & Human Resources Bureau For Behavioral Health & Health Facilities delivers mental health and substance abuse treatment services to the uninsured population by contracting with 13 privately operated Comprehensive Behavioral Health Centers (CBHCs)
<b>Addiction Treatment Services</b>	

**FQHC** = Federally Qualified Health Center

# 11. Organizational Chart



**HIPAA** = Health Insurance Portability & Accountability Act Of 1996  
**MFP** = Money Follows The Person



## 12. Key Leadership

Name	Position	Department
<b>Bill Crouch</b>	Secretary	Department Of Health & Human Resources (DHHR)
<b>Jeremiah Samples</b>	Deputy Secretary	DHHR Public Health, Insurance, & Strategic Planning
<b>Cindy Beane</b>	Commissioner	DHHR Bureau For Medical Services
<b>Sarah Young</b>	Deputy Commissioner, Operations Management	DHHR Bureau For Medical Services
<b>Tony Atkins</b>	Deputy Commissioner, Finance & Administration	DHHR Bureau For Medical Services
<b>James Becker</b>	Medical Director	DHHR Bureau For Medical Services
<b>Vicki Cunningham</b>	Director Of Pharmacy Services	DHHR Bureau For Medical Services

# 13. Program Benefits

## Federally Mandated Services

- Inpatient hospital services other than services in an Institution For Mental Disease (IMD)
- Outpatient hospital services
- Rural Health Clinic services
- Federally Qualified Health Center (FQHC) services
- Laboratory and X-ray services
- Nursing facilities for individuals 21 and over
- Early & Periodic Screening, Diagnosis & Treatment (EPSDT)
- Family planning services and supplies for individuals of child-bearing age
- Physician services
- Medical and surgical services of a dentist
- Home health services
- Nurse midwife services
- Nurse practitioner services
- Pregnancy services, including tobacco cessation programs
- Free standing birth centers
- Non-emergency transportation to medical care

## West Virginia's Optional Services

- Podiatrists' services
- Optometrists' services and eyeglasses
- Chiropractors' services
- Other practitioners' services
- Private duty nursing
- Clinic services
- Dental services
- Physical and occupational therapy
- Services for individuals with speech, hearing, and language disorders
- Prescribed drugs
- Dentures and prosthetic devices
- Preventive services
- Rehabilitative services
- Intermediate care facility services
- Public institution services for I/DD
- Inpatient psychiatric facility for individuals under 22
- Hospice care
- Case management
- Respiratory care
- Nursing facility services for patients under 21
- Personal care services

I/DD = Intellectual/Developmental Disability

# C. WEST VIRGINIA MEDICAID FINANCING & SERVICE DELIVERY SYSTEM

# 14. Overview

Medicaid System Characteristics		
Characteristics	Medicaid FFS	Medicaid Managed Care
Enrollment (July 2017)	133,663	423,917
SMI Enrollment	<ul style="list-style-type: none"> <li>Because the dual eligible population is mandatorily enrolled in FFS, while the disabled and Medicaid expansion populations are mandatorily enrolled in managed care, the SMI population is split between the two delivery systems</li> <li>OPEN MINDS estimates that 67% of the SMI population is enrolled in managed care</li> </ul>	
Management	<ul style="list-style-type: none"> <li>Bureau For Medical Services</li> <li>KEPRO serves as the administrative services organization</li> </ul>	Four MCOs
Payment Model	FFS	Full-risk capitation
Geographic Service Area	Statewide	Statewide

**Total Medicaid Beneficiaries: 557,580**

**Total Medicaid With SMI Beneficiaries: 35,685**

**FFS** = Fee-For-Service  
**KEPRO** = Keystone Peer Review Org Inc  
**MCO** = Managed Care Organization  
**SMI** = Serious Mental Illness

# 15. Enrollment By Eligibility Group

## Mandatory FFS Enrollment

- Dual eligible individuals
- Residents of nursing facilities or intermediate care facilities
- Home- and community-based waiver participants
- Beneficiaries in the retroactive eligibility period
- Medically needy individuals qualifying through spenddown
- Children in foster care
- Members receiving organ and tissue transplant services

## Option To Enroll In FFS Or Managed Care

- None

## Mandatory Managed Care Enrollment

- Children
- Parents and caretaker relatives
- Blind and disabled population
- Medicaid expansion population
- Pregnant women

FFS = Fee-For-Service

# 16. Fee-For-Service (FFS) Program: Program Overview

- FFS enrollment as of July 2017 was 133,663\*
- West Virginia contracts with KEPRO to serve as the administrative services organization for the Medicaid FFS program; KEPRO provides utilization management, quality reviews, provider education, and technical assistance
- Molina Medicaid Solutions also provides administrative services to include provider relations, provider enrollment, consumer services, electronic claims helpdesk, and pharmacy helpdesk



\* FFS enrollment was derived by subtracting managed care enrollment from total enrollment

KEPRO = Keystone Peer Review Org Inc

# 17. Fee-For-Service (FFS) Program: Behavioral Health Benefits

## FFS Mental Health Benefits

- Inpatient services
- Outpatient services
- Targeted case management
- Emergency services
- Assessment, evaluation, and testing
- Service plan development
- Case consultation
- Counseling
- Medication management
- Crisis intervention
- Community supportive treatment
- Assertive community treatment
- Telehealth services

## FFS Substance Abuse Treatment Benefits

- Inpatient and ambulatory withdrawal management services
- Outpatient services
- Pharmacologic management
- Targeted case management
- Emergency services
- Medication assisted treatment other than methadone
- Intensive outpatient
- Partial-hospitalization
- Screening, brief intervention, and referral to treatment
- Methadone treatment\*
- Residential treatment, including short-term IMD\*
- Peer recovery support services\*

\* Denotes a new Medicaid program benefit authorized via a section 1115 demonstration waiver. Methadone treatment becomes available in January 2018, and residential and peer recovery support services will be covered as of July 2018

IMD = Institution For Mental Disease

# 18. Fee-For-Service (FFS) Program: Serious Mental Illness (SMI) Population

- Because the dual eligible population is mandatorily enrolled in FFS, while the disabled and Medicaid expansion populations are mandatorily enrolled in managed care, the SMI population is split between the two delivery systems
- *OPEN MINDS* estimates that 33% of the SMI population is enrolled in FFS





# 19. Managed Care Program: Program Overview

- Managed care enrollment as of July 2017 was 423,917
- West Virginia's managed care program for the traditional Medicaid population is called Mountain Health Trust; the managed care program for the Medicaid expansion population is called WV Health Bridge
- The WV Health Bridge Alternative Benefits Plan (ABP) for the expansion population closely mirrors that of the traditional Medicaid population; the most significant difference is that state plan nursing facility services, intermediate care facility services, and personal care services are not covered under the ABP
- There are four managed care plans available statewide that provide services for both the Mountain Health Trust and the WV Health Bridge enrollees; enrollees can choose from any of the four plans
- Prescription medications are not included in the managed care program and are instead financed FFS by the state; pharmaceuticals administered in a professional setting are included in the MCO's capitation rate
- In SFY 2018, the MCOs are required to implement Alternative Payment Models (APMs) that include ten percent of enrolled members; the state intends to increase this target in future years
- APMs may include, but are not limited to, the following:
  - Primary care incentives
  - Payment for performance
  - Shared savings arrangements
  - Shared risk arrangements
  - Episodes of care or bundled payments

**MCO** = Managed Care Organization  
**SFY** = State Fiscal Year  
**WV** = West Virginia

## 20. Managed Care Program: Behavioral Health Overview

- Most managed care behavioral health benefits are included in capitation and provided by the MCOs
- Prescription medications are not included in the managed care program and are instead financed FFS by the state; pharmaceuticals administered in a professional setting are included in the MCO's capitation rate
- West Virginia received approval of a section 1115 demonstration waiver for expanded substance abuse treatment services in October 2017, including residential treatment in institutions for mental disease, methadone treatment, and peer recovery support services
  - Methadone treatment will begin on January 1, 2018
  - Residential treatment services and peer recovery support services will begin on July 1, 2018
- Children's residential treatment facility services for individuals under age 21 are provided FFS by the state; other psychiatric residential treatment facility services for individuals under age 21 are included in the MCO's capitation rate

**FFS** = Fee-For-Service  
**MCO** = Managed Care Organization

# 21. Managed Care Program: Behavioral Health Benefits

- Inpatient and outpatient mental health and substance abuse treatment services are covered by the MCOs
- Prescription pharmacy benefits are not included in the MCO's capitation rate, and are financed FFS by the state; medications administered in a professional setting are covered by the MCOs

## Managed Care Mental Health Benefits

- Inpatient services
- Outpatient services
- Targeted case management
- Emergency services
- Assessment, evaluation, and testing
- Service plan development
- Case consultation
- Counseling
- Medication management
- Crisis intervention
- Community supportive treatment
- Assertive community treatment
- Telehealth services

## Managed Care Substance Abuse Treatment Benefits

- Inpatient and ambulatory withdrawal management services
- Outpatient services
- Pharmacologic management
- Targeted case management
- Emergency services
- Medication assisted treatment other than methadone
- Intensive outpatient
- Partial-hospitalization
- Screening, brief intervention, and referral to treatment
- Methadone treatment\*
- Residential treatment, including short-term IMD\*
- Peer recovery support services\*

\* Denotes a new Medicaid program benefit authorized via a section 1115 demonstration waiver; methadone treatment becomes available in January 2018, and residential and peer recovery support services will be covered as of July 2018

**FFS** = Fee-For-Service

**MCO** = Managed Care Organization

**IMD** = Institution For Mental Disease

## 22. Managed Care Program: Serious Mental Illness (SMI) Population

- Because the dual eligible population is mandatorily enrolled in FFS, while the disabled and Medicaid expansion populations are mandatorily enrolled in managed care, the SMI population is split between the two delivery systems
- *OPEN MINDS* estimates that 67% of the SMI population is enrolled in managed care
- Members of the expansion population, if medically frail, must be offered the full array of state plan benefits; medically frail individuals include adults with SMI and chronic substance abuse disorders



FFS = Fee-For-Service

## 23. Care Coordination Initiatives

- West Virginia implemented a health home program for individuals with bipolar disorder at-risk of contracting hepatitis B or hepatitis C in 2014
- The state began operating a health home program for individuals with chronic conditions in 2017
- The state Medicaid program does not have a Patient-Centered Medical Homes (PCMH) initiative



# 24. State Medicaid Health Home Characteristics: Individuals With Bipolar Disorder Health Home Program

## Statewide Bipolar & At-Risk Of Hepatitis B & C Health Home Overview

<b>Target Population</b>	<ul style="list-style-type: none"> <li>Individuals with bipolar disorder who have or are at-risk of contracting hepatitis B or hepatitis C</li> <li>As of December 2016, there were approximately 714 enrollees in the program</li> </ul>
<b>Enrollment Model</b>	Passive enrollment based on provider relationship or location, and Medicaid claims data indicating diagnosis of bipolar disorder, with the ability to opt-out
<b>Geographic Service Area</b>	The program expanded from six counties to statewide in April 2017
<b>Care Delivery Model</b>	<ul style="list-style-type: none"> <li>Primary care model; physicians, practices, rural health clinics, FQHCs, community health centers, and community mental health centers may act as health homes</li> <li>Team-based coordination to develop and execute a care plan</li> <li>Six core health home services</li> <li>KEPRO administers the program, to include eligibility verification, provider recertification, and utilization management</li> </ul>
<b>Payment Model</b>	<ul style="list-style-type: none"> <li>FFS Per Member Per Month (PMPM) payment</li> <li>Level 1 Health Home Standard Service: \$51 standard PMPM payment for at least one health home service delivered in the month</li> <li>Level 2 Health Home Intensive Service: \$299.50 PMPM payment for intensive services delivered in addition to standard monthly payment based on documentation of a deterioration of condition, or a crisis situation requiring stabilization</li> </ul>
<b>Practice Performance &amp; Improvement</b>	<ul style="list-style-type: none"> <li>Hospital, ER, and SNF admission rate</li> <li>30 day readmission rate</li> <li>Care cost of enrolled cohort compared to non-enrolled cohort</li> </ul>

**ER** = Emergency Room

**FFS** = Fee-For-Service

**FQHC** = Federally Qualified Health Center

**KEPRO** = Keystone Peer Review Org Inc.

**SNF** = Skilled Nursing Facility

## 25. State Medicaid Health Home Characteristics: Individuals With Chronic Conditions Health Home Program

### Pre-Diabetes, Diabetes, Obesity, At-Risk For Anxiety &/Or Depression Health Home Overview

<b>Target Population</b>	Individuals with chronic conditions, namely pre-diabetes, diabetes, or obesity, who are at-risk of anxiety or depression
<b>Enrollment Model</b>	Passive enrollment based on prior provider relationship or location, and Medicaid claims data; individuals have the ability to opt-out
<b>Geographic Service Area</b>	14 counties: Boone, Cabell, Fayette, Kanawha, Lincoln, Logan, McDowell, Mason, Mercer, Mingo, Putnam, Raleigh, Wayne, Wyoming
<b>Care Delivery Model</b>	<ul style="list-style-type: none"> <li>• Primary care model; physicians, practices, rural health clinics, FQHCs, community health centers, and community mental health centers may act as health homes</li> <li>• Team-based coordination to develop and execute a care plan</li> <li>• Six core health home services</li> <li>• KEPRO administers the program, to include eligibility verification, provider recertification, and utilization management</li> </ul>
<b>Payment Model</b>	\$51 Per Member Per Month (PMPM) payment made FFS by the state for at least one health home service delivered in the month
<b>Practice Performance &amp; Improvement</b>	<ul style="list-style-type: none"> <li>• Care cost of enrolled cohort compared to care cost of non-enrolled cohort</li> <li>• Avoidable readmissions</li> </ul>

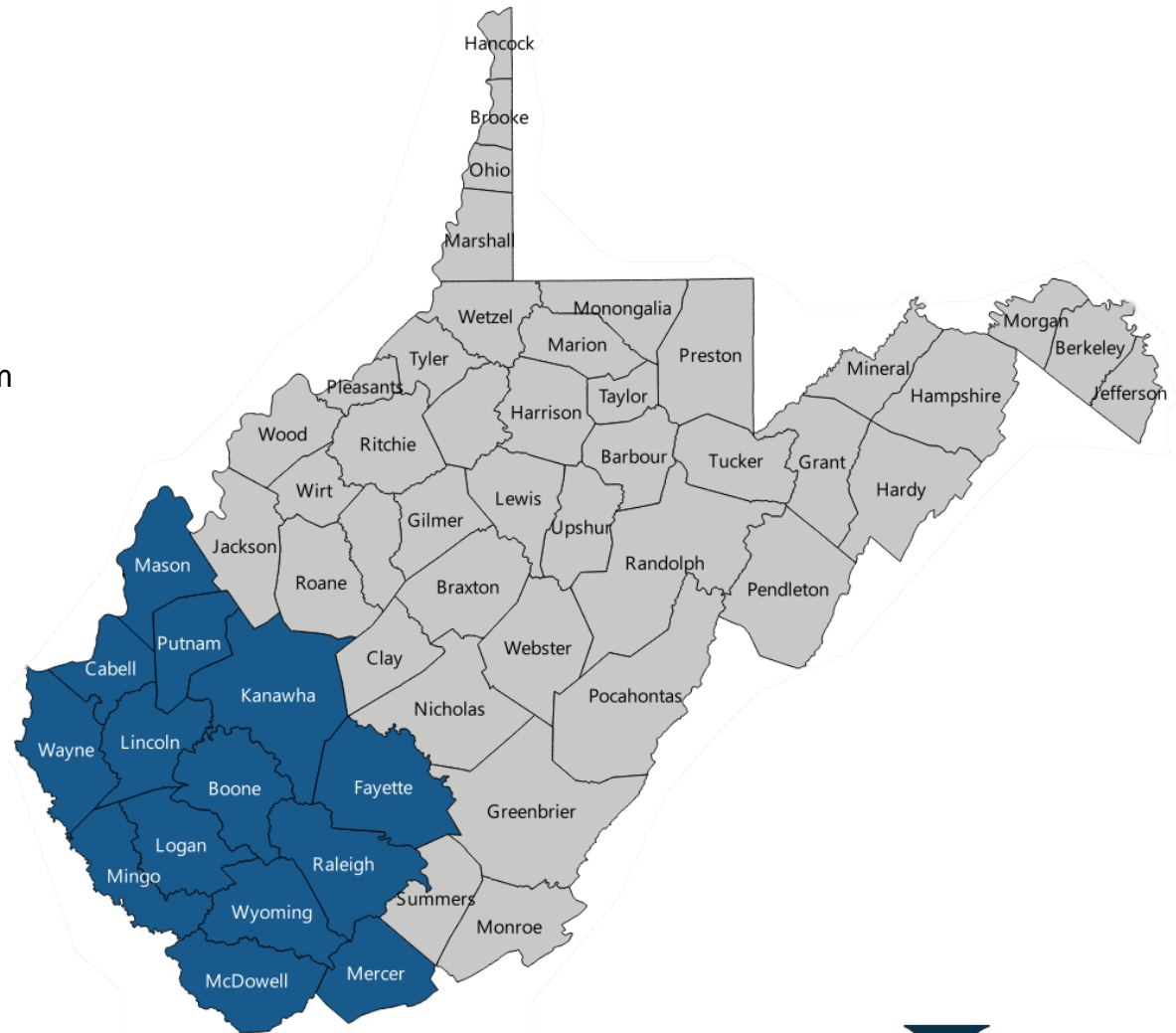
**FFS** = Fee-For-Service

**FQHC** = Federally Qualified Health Center

**KEPRO** = Keystone Peer Review Org Inc.

# 26. Chronic Conditions Health Home Service Area

■ Counties Included In The Pre-Diabetes, Diabetes, Obesity, At-Risk For Anxiety &/Or Depression Health Home Program





## 27. Program Waivers With Impact On The SMI Population

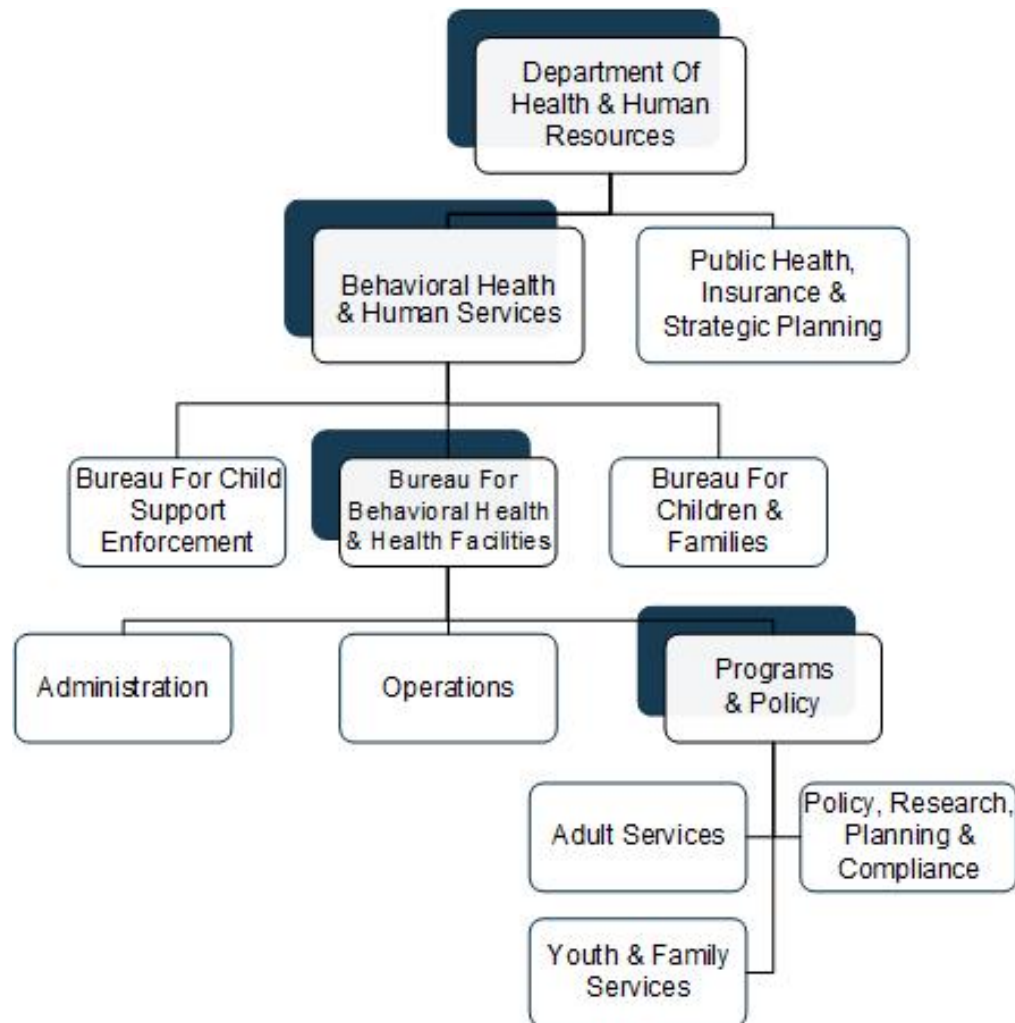
Waiver Title	Waiver Description	Waiver Type	2018 Enrollment Cap	Effective Date	Expiration Date
<b>West Virginia Mountain Health Trust (WV-05)</b>	Authorizes mandatory statewide enrollment of beneficiaries, with exclusions, into capitated managed care	1915 (b)	None	07/01/17	06/30/19
<b>West Virginia Creating A Continuum Of Care For Medicaid Enrollees With Substance Use Disorders</b>	Expands the addiction treatment benefits package to include methadone treatment, short-term residential treatment in an institution for mental disease, and peer recovery support services	1115	None	01/01/18	12/31/22
<b>WV Aged &amp; Disabled (0134.R06.00)</b>	Provides HCBS for individuals 65 and older - or 18 to 64 and physically disabled - who would otherwise require a nursing facility level of care	1915 (c)	5,499	07/01/15	06/30/20
<b>WV TBI (0876.R01.00)</b>	Provides HCBS to individuals with a traumatic brain injury ages three and older who would otherwise need a nursing facility level of care	1915 (c)	62	07/01/15	06/30/20

**HCBS**= Home- & Community-Based Services  
**SMI** = Serious Mental Illness

**TBI** = Traumatic Brain Injury  
**WV** = West Virginia

# **D. WEST VIRGINIA BEHAVIORAL HEALTH ADMINISTRATION & FINANCE SYSTEM**

## 28. Bureau For Behavioral Health & Health Facilities Governance: Organization Chart



## 29. Bureau For Behavioral Health & Health Facilities Governance: Key Leadership

Name	Position	Department
<b>Bill Crouch</b>	Secretary	Department Of Health & Human Resources (DHHR)
<b>Harold Clifton</b>	Deputy Secretary Of Behavioral Health & Human Services	DHHR
<b>Vickie Jones</b>	Commissioner	DHHR Bureau For Behavioral Health & Health Facilities
<b>Shevona Lusk</b>	Deputy Commissioner Of Operations	DHHR Bureau For Behavioral Health & Health Facilities
<b>Kimberly Walsh</b>	Deputy Commissioner Of Programs	DHHR Bureau For Behavioral Health & Health Facilities
<b>Damon Larossi</b>	Deputy Commissioner Of Administration	DHHR Bureau For Behavioral Health & Health Facilities
<b>Peg Moss</b>	Adult Services Program Manager	DHHR Bureau For Behavioral Health & Health Facilities
<b>Kathy Paxton</b>	Substance Abuse Program Manager	DHHR Bureau For Behavioral Health & Health Facilities

## 30. State Psychiatric Institutions

Institution	Location	Beds	FY 2015 Discharges	FY 2015 Average Daily Census
Mildred Mitchell Bateman Hospital	Huntington	110	496	108
William R. Sharpe Jr. Hospital	Weston	150	432	137
<b>Total</b>		<b>260</b>	<b>928</b>	<b>235</b>

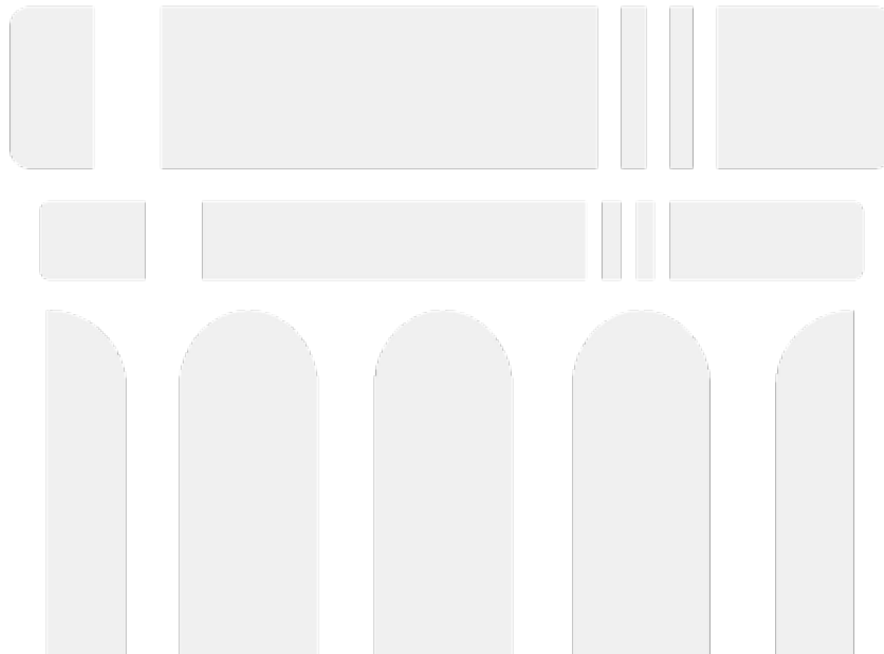
FY = Fiscal Year

# 31. Accountable Care Organizations (ACOs)

## Medicare Shared Savings Program

- |                                     |   |
|-------------------------------------|---|
| 1. Aledade Accountable Care 12, LLC | 8. Ohio River Basin ACO                       |
| 2. Aledade Primary Care ACO         | 9. Physicians Accountable Care Solutions, LLC |
| 3. Aledade West Virginia ACO        | 10. Signature Partners in Health, LLC         |
| 4. Genesis Healthcare ACO, LLC      | 11. THP-Meritus ACO, LLC                      |
| 5. Loudoun Medical Group ACO, LLC   | 12. Western Maryland ACO                      |
| 6. Meritus Health ACO               | 13. Western Maryland Physician Network, LLC   |
| 7. Ohio Integrated Care Providers   |   |

# APPENDIX A: SOURCES



# Sources

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### A. Health Care Marketplace Overview

#### 1. Physical Health Care Coverage Map

- United States Department of Health and Human Services. (2017, October 25). Plan Year 2018 Individual Medical Coverage Landscape. Retrieved November 1, 2017 from <https://data.healthcare.gov/dataset/QHP-PY2018-Medi-Indi-Land-10-23-2017/hd64-a3rh>
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