

Thank you for joining. The Community Partners webinar will begin shortly.

Gracias por unirte. El seminario web para socios comunitarios comenzará en breve.

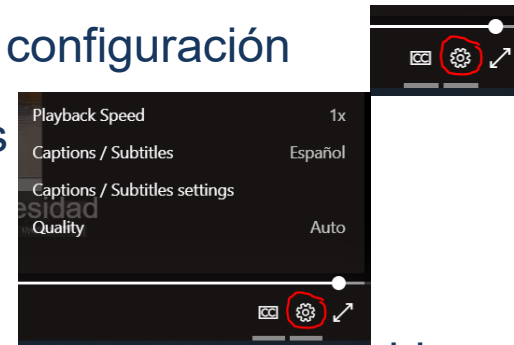
A copy of today's slide deck and recording will be available on our website at [medicaid.ncdhhs.gov/transformation/more-information](https://www.medicicaid.ncdhhs.gov/transformation/more-information)

Una copia de la presentación y de la grabación de hoy estará disponible en nuestro sitio web

Quick tips on attending a Microsoft Teams Live Event / Consejos rápidos para asistir a un evento en vivo de Microsoft Teams

To view the webinar with captions/subtitles / Para ver el seminario web con subtítulos:

- Click the settings (gear icon) / Haga clic en el icono de configuración
- Click captions/subtitles / Haga clic en captions/subtitles

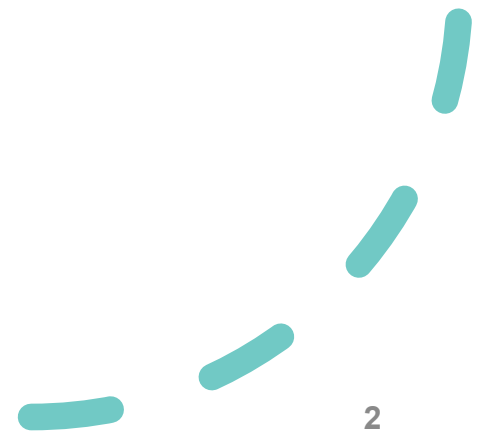


Use the Q&A feature at the top right of the screen to ask questions and provide comments, we will try to answer as many questions as possible in the Q&A session at the end of the webinar.



**Ericka
Johnson**

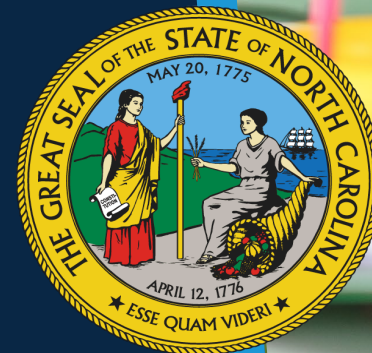
**Chief of Staff
NC Medicaid**



NCMEDICAID
FOR MORE **PEOPLE**

NC Medicaid Community Partners Webinar

Sept. 12, 2024



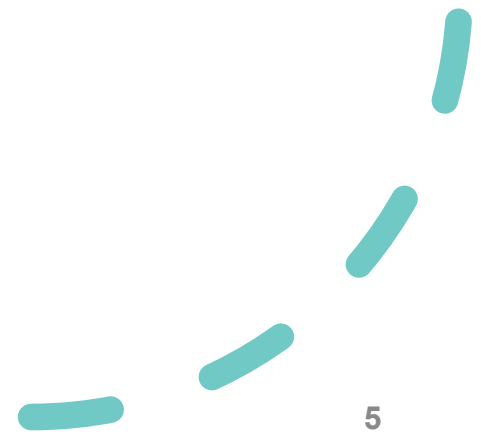
AGENDA

- Welcome
- Medicaid Expansion Updates
- CFSP Health Plan Award
- Medical Debt Relief
- Medicaid Recertification
- Resources
- Questions & Answers



**Jay
Ludlam**

**Deputy Secretary
NC Medicaid**



MEDICAID EXPANSION

Where we are today

- Nine months since launch, 543,560 adults have Medicaid thanks to expansion
- Almost met our two-year goal of adding 600,000 adults
- Track our progress each month on our [Medicaid Expansion dashboard](#)
- For more information, see the [news release](#)



CFSP HEALTH PLAN AWARD

Blue Cross Blue Shield NC was selected to operate the Children and Families Specialty Plan

A first-of-its-kind initiative, the Children and Families Specialty Plan (CFSP) is a single, statewide NC Medicaid Managed Care plan that will wrap Medicaid-enrolled children, youth and their families in the child welfare system with seamless, integrated and coordinated health care.

At launch, the CFSP will operate statewide, offering robust care management to approximately 31,000 current and former foster care children and youth that will be automatically enrolled.

More information

- [Press release](#)
- [CFSP webpage](#)

CFSP HEALTH PLAN AWARD

The CFSP provides comprehensive coverage for all services provided by the Standard Plan in addition to most Tailored Plan services

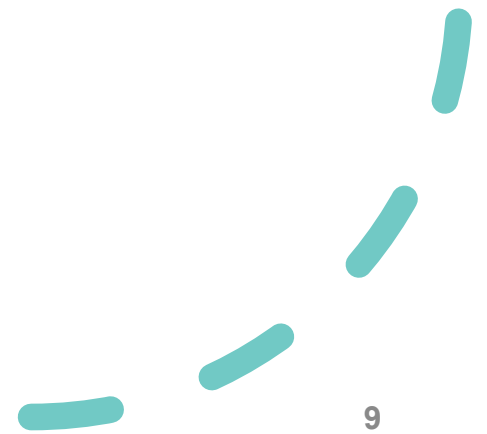
As a statewide entity, the CFSP, regardless of a member's geographic location or situation, will provide members with the same basic Medicaid benefits and services and the following services:

- Physical health
- Behavioral health such as outpatient therapy, inpatient treatment and crisis and therapeutic residential options for children
- 1915(i) Home and Community-Based services
- Intellectual/Developmental Disabilities (I/DD) services
- Long term services and supports
- Pharmacy services
- Unmet health-related resource needs including housing, food, transportation and interpersonal violence



**Julia
Lerche**

Chief Strategy Officer and Chief Actuary



MEDICAL DEBT RELIEF

All eligible hospitals in NC have signed on to participate in the medical debt mitigation program

This program is expected to relieve approximately \$4 billion in medical debt held by nearly 2 million low- and middle-income North Carolinians, and includes:

- Medicaid enrollees with outstanding medical debt owed to participating hospitals, dating back to Jan. 1, 2014.
- Those not enrolled in Medicaid with medical debt more than two years old and dating back to Jan. 1, 2024 but have:
 - Income at least at or below 350% of the Federal Poverty Level (FPL) or,
 - Total medical debt owed to a participating hospital that exceeds 5% of their income

Exceptions apply to individuals with a payment plan agreement with the hospital.

MEDICAL DEBT RELIEF

All eligible hospitals in NC have signed on to participate in the medical debt mitigation program

- Participating hospitals will relieve all outstanding debt owed by current Medicaid enrollees, dating back to Jan. 1, 2014
- Patients do not need to take any action now. Participating hospitals will work with a third-party vendor to identify outstanding debt eligible for relief for other eligible individuals.
- Participating hospitals will implement new policies designed to prevent low and middle-income consumers from accumulating medical debt in the future.
- The goal of the program is to have eligible North Carolinians to begin to see relief for existing medical debt over the next two years.

MEDICAL DEBT RELIEF KEY DATES

Oct. 1, 2024

Hospitals begin the work to relieve past medical debt

Jan. 1, 2025

- Hospitals put policies into place to qualify individuals for discounts through charity care based on their income
- Individuals at participating hospitals will automatically qualify for charity care if they are already enrolled in a public benefit program

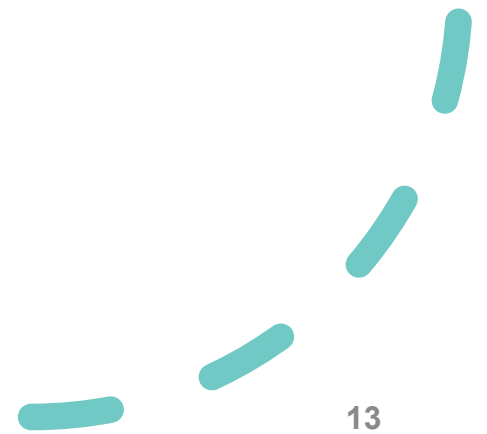
July 1, 2025

- Participating hospitals will curb aggressive debt collection practices
- Medical debt from participating hospitals will no longer negatively affect someone's credit rating
- Participating hospitals will forgive past debt of individuals currently enrolled in Medicaid



**Melanie
Bush**

Deputy Medicaid Director



MEDICAID RECERTIFICATION (RENEWAL)

Continuous Coverage Unwinding is coming to an end
Medicaid renewals are not

- Recertification takes place every 6 or 12 months based on your Medicaid program
- Your Medicaid caseworker will try to complete your recertification using information from electronic sources - without contacting you
- If your Medicaid caseworker needs more information from you to finish your recertification, they will mail you a letter
- **REMEMBER** – Your local Department of Social Services and NC Medicaid will **NEVER** ask for money to enroll or renew Medicaid coverage. To report scams, call 1-877-326-8471.

MEDICAID RECERTIFICATION (RENEWAL)

What you need to know

- Make sure your local Department of Social Services (DSS) has your up-to-date contact information
 - Get in the habit of contacting your local DSS anytime you move, change your phone number or email address. Find your local DSS [here](#)
- Always open any mail from your local DSS
 - If DSS needs information to finish your recertification, you will get a letter in the mail
- Complete your renewal form (if you get one) and send it back right away
- If your Medicaid is renewed, you will get a letter telling you:
 - Your NC Medicaid benefits will stay the same
 - Your Medicaid is changing to a different Medicaid program - you do not need to do anything unless you do not agree with the change or have concerns with the new program
 - Your Medicaid was not renewed

MEDICAID RECERTIFICATION (RENEWAL)

Medicaid renewal for beneficiaries who got benefits with the expansion of Medicaid

Many beneficiaries who got Medicaid with the expansion of Medicaid will soon go through their first Medicaid renewal

- If their effective date of coverage was in December 2023, they are due for renewal in December 2024
- DSS caseworkers can begin working on these renewals anytime between October through December
- It's important to make sure these beneficiaries understand the "What you need to know" information

MEDICAID RECERTIFICATION (RENEWAL)

What if you lost your Medicaid Coverage?

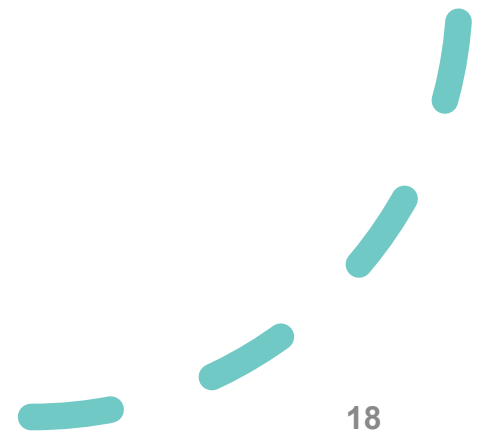
Review the letter from your local DSS to see why you lost Medicaid coverage

- If your coverage ended because DSS did not have the information they needed to complete the renewal, then you can contact your local DSS to provide the missing information
- If your coverage ended because DSS found you are no longer eligible for the program, you will need to find another option for health coverage
 - If your coverage is terminated (ended) – you can apply for health care coverage on the federal Health Insurance Marketplace at [healthcare.gov](https://www.healthcare.gov)
- You can appeal the decision or reapply at any time



**Kathy
Batton**

**Communications Manager
NC Medicaid**



HISPANIC FEDERATION HOTLINE

A Health Hotline (NC Salud) dedicated to serving the Spanish-speaking community in North Carolina.

North Carolina residents can reach the hotline by calling 1-844-438-6827. All call representatives are bilingual and ready to assist with a wide range of services, including:

- Bilingual assistance for all questions related to Medicaid or federal Health Insurance Marketplace ([healthcare.gov](https://www.healthcare.gov))
- General information about Medicaid eligibility
- Application referrals to bilingual individuals to help you fill out a Medicaid or federal Health Insurance Marketplace application
- Information about low-cost medical services available in the caller's county of residence

MEDICAID AMBASSADOR INITIATIVE

How to become a Medicaid Ambassador?

- Send an email stating your interest in becoming a Medicaid Ambassador to Medicaid.NCEngagement@dhhs.nc.gov
- Complete the Medicaid Essentials training
- Complete ePASS navigation training either by attending a live ePASS demo or watching the recording posted to the Medicaid expansion website
- Have an established confidentiality agreement with your organization
- Sign the Attestation form with NC Medicaid that you meet all the requirements

ePASS RESOURCES

- ePASS Fact Sheet [English](#) | [Spanish](#)
- Watch our video on how to help someone with an application using the links below:
 - English youtu.be/204bNI5pGkl
 - Spanish youtu.be/whLNhXj7zvM
- [ePASS website \(epass.nc.gov\)](https://epass.nc.gov)
- Local DSS Directory ncdhhs.gov/localdss

FREE Bilingual Print Materials

Available at no cost: Submit your request before Friday, Sept. 20, 2024

Order here: [Bit.ly/TPprints](https://bit.ly/TPprints)



Scan me

Tailored Care Managers trabajan contigo

Un experto que te ayudará a manejar tu atención médica:
doctores • transporte a citas médicas • medicamentos • alimentos y nutrición • recursos de vivienda • formularios y aplicaciones • ayuda en el trabajo • y más!



Disponible para miembros con Tailored Plans (Planes personalizados) y algunas personas con NC Medicaid Direct

Llama a tu plan de Medicaid y pregunta por un Tailored Care Manager (Gestor de cuidados personalizados):
Alliance Health 1-800-510-9132 Partners Health Management 1-888-235-4673
Trillium Health Resources 1-877-685-2415 Vaya Health 1-800-962-9003

¿No estás seguro(a)? Encuentra tu plan de Medicaid: 1-833-870-5500
Visita medicaid.nc.gov/tailored-care-management-es

Departamento de Salud y Servicios Humanos de Carolina del Norte (NCDHHS)
NCDHHS es un empleador y proveedor que ofrece igualdad de oportunidades.
Foto de archivo: Reuters de iStock. Para fines ilustrativos únicamente. Agosto, 2023

Moving to a Medicaid Tailored Plan?
Call your Tailored Plan to make sure your doctors and specialists are in your network



Tailored Plans are a new kind of Medicaid health plan. If you get a welcome packet and new health plan ID card from **Alliance, Partners, Trillium or Vaya**, you have a Tailored Plan. Not sure? Call 1-833-870-5500.

Check to see if your **providers (doctors and specialists)** accept your Tailored Plan—not just “Medicaid.”

Call your Tailored Plan. They can check for you.

- Alliance Health 1-800-510-9132
- Partners Health 1-888-235-4673
- Trillium Health 1-877-685-2415
- Vaya Total Care 1-800-962-9003

Providers that don't accept your Tailored Plan are considered “out-of-network.”

You can keep seeing them until January 31, 2025.

You may be able to keep seeing an out-of-network provider after January 31, 2025. Talk to your Tailored Plan.


Search the directory:
at ncmedicaidplans.gov

Have a unique situation or need help?
Call your Tailored Plan or 1-833-870-5500

Learn more at medicaid.nc.gov/tailored-plans
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Transition of Care Policy:
What happens if your doctor or specialist is not in your network?



If your NC Medicaid is moving to a Tailored Plan, your **providers (doctors or specialists)** need to accept your Tailored Plan to provide services to you. Providers who do not will be considered **out-of-network**.


During your move to Tailored Plans:

- 1 You may keep seeing the **Medicaid providers you see now** until January 31, 2025—even if they're not listed on your health plan ID card.
- 2 Your coverage for the **prescriptions** you take now also stays the same until January 31, 2025. Talk to your Tailored Plan if you have concerns.
- 3 You may keep seeing the **dental** providers you see now. Your dental coverage will not change.
- 4 You may change your **primary care provider (PCP)** for any reason until January 31, 2025, and twice a year after that. This is the doctor you see when you feel sick, need a check-up or need help with chronic conditions like diabetes.

If you would like to continue to see an out-of-network provider after January 31, 2025, talk to your Tailored Plan.


- Alliance Health: 1-800-510-9132 • Trillium Health: 1-877-685-2415
- Partners Health: 1-888-235-4673 • Vaya Total Care: 1-800-962-9003

Learn more at medicaid.nc.gov/tailored-plans
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Tailored Care Managers Work With You

An expert to help navigate your health care:
doctors • rides to appointments • prescriptions • food and nutrition
housing resources • forms and applications • job coaching • and more!




Available for Tailored Plan members and some people with NC Medicaid Direct

Call your Medicaid plan and ask for a Tailored Care Manager:
Alliance Health 1-800-510-9132 Partners Health Management 1-888-235-4673
Trillium Health Resources 1-877-685-2415 Vaya Health 1-800-962-9003

Not sure? Find your Medicaid plan: 1-833-870-5500
Learn more at medicaid.nc.gov/tailored-care-management

NC Department of Health and Human Services
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Free rides to and from your medical appointments, covered by Medicaid



Non-Emergency Medical Transportation (NEMT) services are covered with your NC Medicaid Tailored Plan.

Who qualifies for free rides?
This service is for people with NC Medicaid to help them get to their **medical and mental health appointments**. This includes people on the Tailored Plan, a kind of Medicaid health plan. Accessible rides are also available.

Get a ride to and from any Medicaid appointment, including:

- Doctors or specialists
- Mental health appointments
- Picking up prescriptions
- Substance abuse treatment

How to schedule NEMT rides
NEW! If your NC Medicaid is moving to a Tailored Plan, call your Tailored Plan to request these ride services:

- Alliance Health: 1-855-759-9600 • Trillium Health: 1-877-685-2415
- Partners Health: 1-833-577-2309 • Vaya Health: 1-888-621-2084

You can begin scheduling rides today for appointments on or after July 1, 2024.

DID YOU KNOW?

- For the best availability, request your ride at least 2 days before your appointment. For urgent pickups, like a hospital discharge, call as soon as you can.
- If you drive yourself to an appointment, or if you receive a ride from a family member or friend, you might qualify for travel-related reimbursements such as gas vouchers. Contact your Tailored Plan to learn more.

Learn more at medicaid.ncdhs.gov/nemt

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Bilingual Flyers about Tailored Plans and Tailored Care Management services

Bilingual poster package (18x24) about Tailored Care Management and Non-Emergency Medical Transportation

PROVIDER RESOURCES

- NC Medicaid Website [medicaid.ncdhhs.gov](https://www.medicaid.ncdhhs.gov)
 - Includes County and Provider Playbooks
- NC Medicaid Help Center [medicaid.ncdhhs.gov/helpcenter](https://www.medicaid.ncdhhs.gov/helpcenter)
- Regular Medicaid Bulletins [medicaid.ncdhhs.gov/providers/medicaid-bulletin](https://www.medicaid.ncdhhs.gov/providers/medicaid-bulletin)
- NC Medicaid Managed Care Webinar Series (Back Porch Chat)

Hosted by Medicaid and AHEC

Nov. 21, 2024, noon-1 p.m.

Feb. 20, 2025, noon-1 p.m.

May 15, 2025, noon-1 p.m.

To register or view previous webinars

ncahec.net/practice-support/medicaid-managed-care-2-2/

QUESTIONS & ANSWERS

A copy of today's slide deck and recording will be available
on our website at

medicaid.ncdhhs.gov/transformation/more-information

If we couldn't get to your question, feel free to email it to

Medicaid.NCEngagement@dhhs.nc.gov