



North Carolina
Department of Health and Human Services
Division of Medical Assistance
Recipient Services EIS

801 Ruggles Drive – 2501 Mail Service Center - Raleigh, N.C. 27699-2501

Michael F. Easley, Governor
Carmen Hooker Odom, Secretary

L. Allen Dobson, Jr., M.D., Assistant Secretary
for Health Policy and Medical Assistance
(919) 855-4000

April 17, 2006

Re: Prescription Limit Increase and Carolina Access Survey

Dear County Director of Social Services:

Enclosed is the text for 2 inserts that will be included with the May 2006 Medicaid ID cards. There will be both an English and a Spanish version of the first insert which gives recipients information on the prescription limit increase. Effective June 1, or shortly thereafter, the prescription limit will increase from 6 prescriptions per month to 8 prescriptions per month with the possibility of 3 additional prescriptions if the physician determines they are needed.

The second insert notifies recipients of a survey Carolina ACCESS will be conducting in May 2006 to find out how recipients feel about the health care they are receiving.

If you have any questions regarding this information, please contact your Medicaid Program Representative.

Sincerely,

L. Allen Dobson

Notice of Prescription Limit Increase for Recipients over the Age of 21

A new prescription limit will become effective some time after June 1, 2006 for recipients over the age of 21. If you are over the age of 21, you will no longer be limited to six (6) prescriptions per month. You will be able to get up to eight (8) prescriptions each month. And, three (3) more prescriptions may be allowed during the month if your doctor and pharmacist think they are needed.

If you are getting more than 11 prescriptions each month, the Medicaid program will assign you to a pharmacy where you will need to go to get all of your prescriptions. The pharmacy that you are assigned to or “locked in” to will be the pharmacy that you went to most frequently in a previous month. “Locked in” means that all of your prescriptions must be filled at the same pharmacy. You will get a letter from the Medicaid program that will explain this new “lock-in” program in more detail.

If you are not getting more than 11 prescriptions now, but in the future you need more than 11 prescriptions each month, the pharmacy will call the Medicaid program and you will be “locked-in” to a pharmacy.

If you have questions, contact the CARE-LINE, Information and Referral Service, Monday-Friday, except state holidays, by calling 1-800-662-7030 (English/Spanish) or 1-877-452-2514 for a TTY number that is only answered for the deaf or hearing impaired. In the Triangle area, call 919-855-4400 (English/Spanish) or 919-733-4851 (TTY for hearing impaired).

Aviso de Incremento en el Número de Prescripciones para Beneficiarios
Mayores de 21 Años

Un aumento en el número de prescripciones se hará efectivo después de Junio 1ro., 2006 para beneficiarios mayores de 21 años. Si usted es mayor de 21 años, ya no estará limitado a 6 prescripciones por mes. El límite se incrementará a 8 prescripciones por mes. También podría recibir 3 prescripciones más durante el mes si su doctor o farmacéutico así lo recomiendan.

Si usted recibe más de 11 prescripciones cada mes, el programa de Medicaid le asignará una farmacia donde podrá obtener todas sus prescripciones. La farmacia que le será asignada será aquella en la que haya surtido sus prescripciones en el mes previo. Esto significa que usted tendrá que obtener todas sus prescripciones en la misma farmacia. Usted recibirá una carta de Medicaid explicándole más detalladamente este programa.

Si usted ahora no obtiene más de 11 prescripciones, pero en el futuro usted llega a necesitar más de 11 prescripciones por mes, la farmacia llamará al programa de Medicaid para que sea asignado a esa farmacia.

Si usted tiene preguntas llame al 1 800 662-7030 (CARE-LINE), de lunes a viernes (excepto en días festivos); o llame al 1 877 452-2514 (Sistema TTY para personas sordas o con problemas de audición). En el área del Triangulo puede llamar al 919 855-4414 (en inglés y español), o 919 733-4851 (Sistema TTY para personas sordas o con problemas de audición).

ATTENTION: Carolina ACCESS Members

Carolina ACCESS would like to know how you feel about your health care. Beginning in May, someone may call you and ask you questions about how good you think your health care has been. Not everyone will be called. The person who calls you will identify themselves and tell you why they are calling.

Your answers will not be shared with anyone. Please take the time to answer these questions. Your health care is very important to us. By answering these questions, you can help Carolina ACCESS provide you with a good health care program.