

# North Carolina Department of Health and Human Services Division of Medical Assistance

2501 Mail Service Center • Raleigh, N. C. 27699-2501 • Tel 919-855-4100 • Fax 919-733-6608

Beverly Eaves Perdue, Governor Albert A. Delia, Acting Secretary Michael Watson, Director

September 20, 2012

Subject: Beneficiary Notice regarding changes and general information for Medicaid and NCHC recipients

Dear County Director of Social Services:

Beginning early October, a mass mailing will be sent to all Health Choice and Medicaid beneficiaries, including MQB beneficiaries with important information and upcoming changes for both the Medicaid and North Carolina Health Choice programs. One notice will be mailed to each casehead/payee, regardless of how many cases are in EIS. The language of the notice (English or Spanish) is determined by the language preference in EIS for the casehead. An English version of the notice has been posted on the website at <a href="http://www.ncdhhs.gov/dma/pub/consumerlibrary.htm">http://www.ncdhhs.gov/dma/pub/consumerlibrary.htm</a> and is also attached. A Spanish version of the notice is being translated and will be posted upon completion.

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

Sincerely,

Michael Watson, Director

MW/scr Attachments



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#### **Beneficiary Notices, Fall 2012**

# This notice is being sent to <u>all</u> Medicaid and NC Health Choice beneficiaries so that everyone knows about the important information and changes.

Important Information For Medicaid Beneficiaries Under Age 21 <u>This pertains to all services mentioned in this notice.</u> Children under age 21 who have Medicaid are entitled to medically necessary screening, diagnostic and treatment services that are needed to "correct or ameliorate defects and physical and mental illnesses and conditions" under the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program, regardless of whether the requested service is covered under the Medicaid State Plan. For more information about EPSDT, please refer to: <u>http://www.ncdhhs.gov/dma/epsdt</u>. EPSDT does not apply to children who have NC Health Choice.

#### IMPORTANT INFORMATION FOR NORTH CAROLINA HEALTH CHOICE FOR CHILDREN BENEFICIARIES

This notice is to let you know about important information and changes that are taking place in <u>NC Health Choice</u>.

<u>NCHC Handbook</u> The NCHC/Medicaid handbook called, "*A Consumer's Guide to NC Health Care Coverage Programs for Families and Children*" is available on the Division of Medical Assistance (DMA) Web site at: <u>http://www.ncdhhs.gov/dma/pub/0712\_famchld.pdf</u> or from your local department of social services (DSS) office. The handbook has important information about the services covered and your rights and responsibilities.

<u>Where can I find more information?</u> Health Choice Program Web Page with eligibility, application, and review request information and forms: <u>http://www.ncdhhs.gov/dma/healthchoice/</u>; NC Healthy Start Foundation - For NCHC eligibility and application information in 12 foreign languages: <u>www.NCHealthyStart.org</u> or call your county DSS caseworker or the DHHS Customer Service Center at 1-800-662-7030; Children with Special Health Care Needs help line – 1/800-737-3028.

### **IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID BENEFICIARIES**

This notice is to let you know about important information and changes that are going to be taking place in Medicaid.

**Satisfaction Survey** Medicaid wants to know how satisfied you are with your health care as a member of Carolina ACCESS. A telephone survey is being conducted and you may have been chosen to participate. If you receive a call, the person will identify themselves as calling from Clearwater Research on behalf of Medicaid and the University of North Carolina-Charlotte. Please take a few minutes to answer the questions. The information you give is very important and is **confidential**. No one at the doctor's office or Medicaid will see any names or know how you answered the questions. Your decision to participate or not participate will not affect your Medicaid benefits. By answering the questions, you have an opportunity to let us know how Carolina ACCESS can serve you better.

**Diabetic Adults and Medical Eye Exams** Medical eye exams are covered for adults with diseases or symptoms that affect the eyes, including diabetes.

# **IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID BENEFICIARIES**

**Personal Care Services** Beginning January 1, 2013, personal care services will be offered under a new benefit program. The new program will replace the current In-Home Care for Adults (IHCA), In-Home Care for Children (IHCC), and Adult Care Home personal care services. An independent assessment in each beneficiary's residence will be required to determine qualification and authorized service level for the new program. Beneficiaries may qualify for the new program if they demonstrate need for hands-on assistance with three hands-on Activities of Daily Living (ADLs), or with two ADLs including one that requires extensive or greater assistance. Qualifying ADLs may include bathing, dressing, mobility, toileting, or eating. Recipients who qualify for the new program may receive assistance with ADLs and related homemaking tasks that are essential to their care at home; medication assistance; and help with medical monitoring, medical equipment, and adaptive or assistive devices.

<u>NC Health Insurance Premium Payment (NC HIPP)</u> The HIPP program is for Medicaid beneficiaries who are able to obtain health insurance through their employer and who also have high cost health care issues. If you qualify for HIPP, each month Medicaid will reimburse the health insurance premium payment. You may even be eligible for a family health insurance policy that covers non-Medicaid family members. This means that your family has a chance to have health insurance coverage through an employer at no cost to you. You should apply if you are able to get health insurance through an employer, you have one or more Medicaid beneficiaries in your family, and one or all of you have health issues that cost a lot. NC HIPP is completely free to join; however, NC Health Choice beneficiaries **are not eligible**. To learn more about the benefits of becoming an NC HIPP member, visit us online at <u>www.MyNCHIPP.com</u>, and for more information or to start your application by phone, call us toll-free at 1-855-MyNCHIPP (855-696-2447).

<u>Attention all Behavioral Health Recipients</u> Changes continue for behavioral health care coverage across the state. Over the 2012 year, your services will begin to be managed by your Local Management Entities (LMEs). LMEs continue making the change on the following proposed timeline:

- July 1, 2012 Smoky Mountain Center, consisting of Alexander, Alleghany, Ashe, Avery, Caldwell, Cherokee, Clay, Graham, Haywood, Jackson, Macon, McDowell, Swain, Watauga, and Wilkes Counties
- October 1, 2012 Sandhills LME, consisting of Anson, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, and Richmond Counties
- January 1, 2013 Pathways, consisting of Burke, Catawba, Cleveland, Gaston, Iredell, Lincoln, Surry, and Yadkin Counties
- January 1, 2013 Eastpointe, consisting of Bladen, Columbus, Duplin, Edgecombe, Greene, Lenoir, Nash, Robeson, Sampson, Scotland, Wayne, and Wilson Counties
- January 1, 2013 Mecklenburg LME
- January 1, 2013 The Durham Center, consisting of Durham, Cumberland, Johnston, and possibly Wake Counties
- January 1, 2013 CenterPoint, consisting of Davie, Forsyth, Rockingham, and Stokes Counties
- January 1, 2013 CoastalCare consisting of Brunswick, New Hanover, Pender, Onslow, and Carteret Counties
- January 1, 2012 Sandhills LME, adding Guilford County

This should not change the kind of services that are available to you under Medicaid. You may have a change in who provides you services. The provider must be someone who is enrolled to provide services with the LME in your county. Your LME is responsible for making sure that your treatment needs are covered by an approved provider. Once the LME begins managing your services, Targeted Case Management (TCM) will no longer be a covered service. For parents and guardians, your child could still receive TCM under EPSDT if needed. The LME can provide services like TCM to children who need them.

**Change to your Medicaid Identification Card (MID)** If you receive mental health services through a Local Management Entity (LME-MCO), there have been changes to your Medicaid card. Beginning with annual cards printed April 2012, the name and telephone number of the LME-MCO that can help you with your behavioral health benefits have been added to the back of your card. If you do not need behavioral health assistance, you will not need to use this number. For primary care assistance, please do not call the LME-MCO number. Use the number on the front of your card for primary care physical health services. If you have questions about this, please call the Division of Medical Assistance Behavioral Health Unit at 919-855-4290.

#### IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID AND NORTH CAROLINA HEALTH CHOICE FOR CHILDREN BENEFICIARIES

This notice is to let you know about important information and changes that are going to be taking place in Medicaid and NC Health Choice.

#### Parents/Caregivers: Important Information About Dental Services for Children

The American Dental Association, the American Academy of Pediatric Dentistry, and the American Academy of Pediatrics all recommend that children have their first dental visit before age 1. Regular dental check-ups every six (6) months are important for not only the optimal oral health of your child, but also for his or her overall health. Oral disease that goes untreated can affect children in many ways beyond pain and infection such as difficulty sleeping, difficulty eating, absences from school, and poor concentration at school. Dental decay is one of the most common diseases of childhood that can be prevented through routine visits to a dentist. Don't wait until dental problems develop to visit a dentist. Remember that preventive oral health care is important for the well-being of children of all ages, including children with baby teeth. To locate a dentist for your child's dental care, refer to the NC Medicaid Dental Provider List on the DMA website at <a href="http://www.ncdhhs.gov/dma/dental/dental/nov.htm">http://www.ncdhhs.gov/dma/dental/dental/nov.htm</a> or call the DHHS Customer Service Center at 1-800-662-7030.

## IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID AND NORTH CAROLINA HEALTH CHOICE FOR CHILDREN BENEFICIARIES

## <u>Annual Visit Limit</u>

#### **Mandatory Services**

Mandatory services are services that must be provided by each state Medicaid program to Medicaid beneficiaries. NC Medicaid covers 22 visits for the annual mandatory visit limit period July 1 through June 30. The 22 visits for the annual mandatory visit limit can be provided by:

Physicians (except for physicians enrolled in N.C. Medicaid with a specialty of oncology, radiology, or nuclear medicine)

Nurse practitioners Nurse midwives

Rural health clinics

Physician Assistants Health departments Federally qualified health centers

#### **Optional Services**

Each state may decide which, if any, optional services will be covered by Medicaid. Optional services that are covered by the NC Medicaid Program for NC Medicaid beneficiaries include optometry, chiropractic services, and podiatry. NC Medicaid covers 8 annual optional visits for the period July 1 through June 30. The 8 visits for the optional visit limit can be provided by Chiropractors, Optometrists, and Podiatrists.

The following beneficiaries are exempt from the annual visit limitation.

- Beneficiaries under the age of 21
- Beneficiaries enrolled in a Community Alternatives Program (CAP)
- Pregnant beneficiaries who are receiving prenatal and pregnancy-related services.

If a provider anticipates that additional care will be needed for a specific condition, and the care is medically necessary, the provider may request an exception to the annual visit limit for mandatory services by completing the general Request for Prior Approval Form (372-118). The exception must be requested and approved before the service is rendered.

<u>Hemophilia Specialty Pharmacy Program</u> In the near future, pharmacy providers that provide hemophilia drugs to Medicaid and Health Choice beneficiaries will have to start following standards of care developed by the Division of Medical Assistance, in association with Community Care of North Carolina. Hemophilia drugs are drugs used to treat bleeding disorders. These standards will ensure that Medicaid and Health Choice beneficiaries receive quality care when receiving hemophilia services.

<u>Changes to the North Carolina Medicaid and Health Choice Preferred Drug List</u> Annual changes to the North Carolina Medicaid and Health Choice Preferred Drug List (PDL) will be occurring in the near future. The annual PDL Review Panel meeting will occur in September 2012. The annual changes recommended to the PDL will be announced on the DMA website at <a href="http://www.ncdhhs.gov/dma/pharmacy/index.htm">http://www.ncdhhs.gov/dma/pharmacy/index.htm</a>.

<u>Only YOU can protect your Medicaid Insurance Number</u> Allowing anyone else to use your Medicaid card or number is against the law and is considered fraud. Fraud is serious business and can cause you to lose your Medicaid insurance or be put in jail. Some examples of fraud are:

- A friend who has a bad toothache does not have insurance. They ask if they can borrow your card to go to the dentist. **Just say NO!** If your friend uses your card at the dentist, then when you need to see the dentist for the same type of problem you may be denied treatment because your record shows you already received treatment.
- A business owner tells you he will fix your car for free if you give him your Medicaid number. **Just say NO!** It is against the law to accept a gift in exchange for your Medicaid number, and you may lose your Medicaid insurance or go to jail.
- You hear that someone will pay you \$50.00 for your Medicaid number. **Just say NO!** It is against the law to sell your Medicaid number, and you may go to jail or lose your Medicaid insurance.

If anyone offers you money, gifts or to provide a service for free in exchange for your Medicaid number, please report it! You do not have to give your name. You can report the following ways:

- Call your county department of social services office, or
- Contact the Division of Medical Assistance by calling the DHHS Customer Service Center at 1-800-662-7030 (English or Spanish), or
- Call the Medicaid fraud, waste, and program abuse tip line at 1-877-DMA-TIP1 (1-877-362-8471), or
- Complete and submit a Medicaid fraud and abuse confidential online complaint form via http://www.ncdhhs.gov/dma/fraud/reportfraudform.htm.

<u>Who to Contact With Questions About Information in This Notice:</u> For questions or concerns please contact the DHHS Customer Service Center at 1-800-662-7030 (English/Spanish) or 1-877-452-2514 (this is a TTY number and only those with TTY equipment can talk to a person when this number is dialed). The DHHS Customer Service Center is available to assist you Monday – Friday 8 am to 5 pm.