



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

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Robin Gary Cummings, M.D.
Deputy Secretary for Health Services
Director, Division of Medical Assistance

November 21, 2014

Dear County Director of Social Services:

Re: Annual Eligibility Redeterminations for Exchange Participation and Insurance Affordability Programs

The purpose of this letter is to notify the counties about the upcoming annual reenrollment process for Qualified Health Plans (QHP) offered through the Federal Facilitated Marketplace (FFM). We anticipate an increase in calls from individuals/enrollees with questions regarding the reenrollment process. The changes will also have a direct impact on the counties, due to a potential increase in applications for Medicaid/CHIP once an assessment/determination, is made by the FFM.

Open enrollment is November 15, 2014 through February 15, 2014 with coverage beginning January 1, 2015. There are some important updates that may impact potential coverage for enrollees. The FFM will not accept changes reported via mail by enrollees. Individuals should be encouraged to report changes within thirty (30) days of any such change, on-line or via phone contact at (800) 318-2596.

During the enrollment process, if an enrollee does not report any updates or changes, the FFM will complete a redetermination for plan year 2015 based on the information provided at the initial enrollment. If the individual remains eligible, they will be reenrolled in the same QHP they currently have, if it remains available. If the plan is no longer available, the FFM will enroll the individual into a new QHP, according to a certain priority level.

If the individual is assessed and found potentially eligible for Medicaid/CHIP, the application will be transferred to the counties via the account transfer, to determine eligibility. The application date will be the date the change in circumstance is reported at the FFM/Exchange. If

www.ncdhhs.gov

Tel 919-855-4100 • Fax 919-733-6608

Location: 1985 Umstead Drive • Kirby Building • Raleigh, NC 27603

Mailing Address: 2501 Mail Service Center • Raleigh, NC 27699-2501

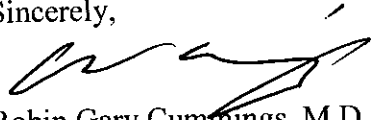
An Equal Opportunity / Affirmative Action Employer



the individual is eligible, coverage would begin the first day of the month of eligibility. The individual may potentially receive both, Medicaid/CHIP and their current Qualified Health plan coverage until December 31, 2014 when the current Qualified Health Plan ends. Counties should follow MA-3215 Processing Application requirements.

Please be sure your staff is aware of this reenrollment information. If you have questions regarding this information, please contact the Operation Support Team at ost.policy.questions@dhhs.nc.gov.

Sincerely,



Robin Gary Cummings, M.D.
Deputy Secretary for Health Services
Director, Division of Medical Assistance