

Fact Sheet

What is Tailored Care Management

Tailored Care Management begins Dec. 1, 2022

Tailored Care Management is a new type of care management that begins Dec. 1, 2022, for eligible NC Medicaid beneficiaries.

If you are eligible to receive Tailored Care Management, you will have a Tailored Care Management provider assigned to you. A letter was mailed to you with the name of your Tailored Care Management provider.

Standard Plan and Eastern Band of Cherokee Indians (EBCI) Tribal Option members are not eligible for Tailored Care Management.

WHAT IS TAILORED CARE MANAGEMENT?

Tailored Care Management provides extra support to help you rate your needs and set up a plan to meet your health goals. If you are eligible for Tailored Care Management, you will have 1 care manager who will:

- Organize services for physical health, behavioral health, intellectual/developmental disabilities (I/DD), pharmacy, long-term services and supports and traumatic brain injury (TBI).
- Connect you to local programs and community resources to help with health-related needs (such as housing, food, transportation, personal safety and employment).
- Make plans that focus on your needs and goals.

Examples of help a Tailored Care manager can give:

- A full review of your care management needs.
- Help schedule your appointments and transportation to and from Medicaid-covered providers.
- Help get answers to your questions about medicines and how to take them.
- Follow-up with doctors or specialists about your care needs.
- Help you and your family find local assistance and resources.

WHAT MAKES TAILORED CARE MANAGEMENT DIFFERENT?

Tailored Care Management is like the current care management you receive from the Local Management Entity/Managed Care Organizations (LME/MCOs) and Community Care of North Carolina (CCNC). With Tailored Care Management you will also get:

- More thorough and organized care management through one Tailored Care manager.
- Regular meetings and contact from your Tailored Care manager.

- More communication from your Tailored Care manager and planned calls or meetings to make sure your health needs and goals are met.
- Coordination with your Primary Care Provider (PCP), pharmacy and health-related resource contacts.

WHO IS ELIGIBLE FOR TAILORED CARE MANAGEMENT?

You are eligible* for Tailored Care Management starting December 1, 2022, if you are age 3 and older and will be enrolled in a Tailored Plan (starting April 1, 2023).

Some people who are not eligible to enroll in a Tailored Plan are still eligible for Tailored Care Management starting December 1, 2022, including:

- Children and adolescents in foster care with a serious emotional disturbance or substance use disorder
- Dual-eligible adults with a serious mental illness or substance use disorder
- Dual-eligible children (3 years and older) and adults with I/DD who are **NOT** on the Innovations or TBI waivers

Children in NC Health Choice, children (ages 0-3) and immigrants under the 5-year ban who fall into the above categories will be eligible for Tailored Care Management on April 1, 2023, with the start of Tailored Plan. Until that time, they will receive care coordination from the LME/MCO or CCNC as needed.

* You should call your LME/MCO if you are not sure if you are eligible for Tailored Care Management.

CAN I CHANGE MY TAILORED CARE MANAGEMENT PROVIDER?

You, your family or your legal guardian can choose a different Tailored Care Management provider by calling your LME/MCO. You can change your Tailored Care Management provider for any reason, without limits on the number of changes from December 1, 2022, until March 31, 2023.

CAN I OPT-OUT OF TAILORED CARE MANAGEMENT SERVICES?

You can choose not to receive (opt-out) Tailored Care Management services. To opt-out of Tailored Care Management you should contact your LME/MCO and request to opt-out of Tailored Care Management. You can opt-out of Tailored Care Management at any time without any changes to other services you get.

I AM ON THE INNOVATIONS WAIVER OR TBI WAIVER, WHAT ARE MY CHOICES?

If you get waiver services and want to keep your current care coordinator you do not need to do anything. You will be assigned to your current care coordinator.

Your care coordinator should explain the difference between care coordination (main focus is on waiver services) or Tailored Care Management (focus is on waiver services, physical health and social and community needs) to you. You can choose to receive care coordination or Tailored Care Management from your care coordinator.

You will keep your Innovations or TBI Waiver (slot) services if you select Tailored Care Management or waiver care coordination.

WHAT IS A DUPLICATIVE SERVICE?

A duplicative service is a service that gives care management or care coordination. You cannot get both Tailored Care Management and the services below at the same time:

- Assertive Community Treatment (ACT) or Critical Time Intervention (CTI)
- If you reside in and Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IIDs) or Skilled Nursing Facility
- If you participate in Care Management for At-Risk Children (CMARC)
- High-Fidelity Wraparound (HFW) program or Child ACT
- Community Alternatives Program for Children (CAP/C)
- Community Alternatives Program for Adults with Disabilities (CAP/DA)
- Program of All-Inclusive Care for the Elderly (PACE)
- Primary Care case management
- EBCI Tribal Option care coordination

LME/MCOs will develop rules to make sure beneficiaries moving between these services and Tailored Care Management can move with no problems. Sometimes, you may get both services for a short time to make sure there is no problem with the move.

TAILORED CARE MANAGEMENT ASSIGNMENT

If you are eligible for Tailored Care Management, you were mailed a letter telling you about it in November 2022. The letter includes:

- What is Tailored Care Management
- Your assigned Tailored Care Management provider
- How to opt-out of Tailored Care Management
- How to change your Tailored Care Management provider by calling your LME/MCO

Children and youth served by the child welfare system (including children in foster care, children receiving adoption assistance and former foster youth under age 26) will be assigned to their LME/MCO for plan-based Tailored Care Management.

If they want, children and youth served by the child welfare system and their guardian may request to change their Tailored Care Management provider.

Starting December 1, 2022, Tailored Care Management providers will begin contacting the beneficiaries they will care for to explain care management services, get consent and begin care management assessments.

After the Tailored Plan launch on April 1, 2023, Tailored Care Management contact will begin when the Tailored Plan member is assigned a Tailored Care Management provider.

HOW TO CHANGE YOUR TAILORED CARE MANAGEMENT PROVIDER

Until March 31, 2023, you can change your Tailored Care Management provider as many times as you want. After April 1, 2023, you can change your TCM provider 2 times each year without cause.

There is no limit to the number of times you can change your Tailored Care Management provider with cause each year.

- If you are on the Innovations and TBI waivers you can choose your current care coordinator as your Tailored Care Management provider or choose a different Tailored Care Management provider.
- You can also opt-out of care management if you choose. This will not affect the other services you receive in any way.

If you want to change your Tailored Care Management provider, you should contact your LME/MCO at the Member Services phone number below. The LME/MCO can share information on certified Tailored Care Management providers in their organization by population served, age and geography.

LME/MCO	Member Services Phone Numer
Alliance Health	1-800-510-9132
Eastpointe	1-800-913-6109
Partners Health Management	1-888-235-4673
Sandhills Center	1-800-256-2452
Trillium Health Resources	1-877-685-2415
Vaya Health	1-800-962-9003

BENEFICIARY RESOURCES

Resource	Information
Tailored Care Management webpage	medicaid.ncdhhs.gov/tailored-care-management
List of Tailored Care Management providers	LME/MCO's will list their TCM providers on their websites. LME/MCO call centers will also have lists of TCM providers in their region.
Tailored Plan Services	ncmedicaidplans.gov/learn/get-answers/tailored-plan-services
Tailored Plan webpage	medicaid.ncdhhs.gov/Behavioral-Health-IDD-Tailored-Plans
NC Medicaid Ombudsman	ncmedicaidombudsman.org 1-877-201-3750 / Monday – Friday, 8 a.m. to 5 p.m.

