# Fact Sheet Transition of Care

### **NC Medicaid**

## Navigating North Carolina's Transition to NC Medicaid Managed Care: A Fact Sheet for Members

This Fact Sheet can help beneficiaries who will transition to NC Medicaid Managed Care on July 1, 2021.

It provides answers to questions and health plan contact information.

For general information, view NC Medicaid's **Beneficiary Portal**.

The North Carolina Medicaid program is transforming the way most people receive Medicaid or NC Health Choice services. This process is often called Medicaid Transformation. In 2015, the NC General Assembly enacted Session Law 2015-245, which directed the North Carolina Department of Health and Human Services (NCDHHS) to transition Medicaid and NC Health Choice from fee-for-service to managed care. Most beneficiaries will transition to NC Medicaid Managed Care on July 1, 2021. Some beneficiaries will stay in NC Medicaid Direct (fee-for-service).

NC Medicaid, in partnership with the Eastern Band of Cherokee Indians (EBCI), will also launch the EBCI Tribal Option on July 1, 2021 for eligible members. This Fact Sheet does *not* apply to the EBCI Tribal Option. For more information, please contact the NC Medicaid Enrollment Broker Call Center (833-870-5500; TTY: 833-870-5588).

#### I CURRENTLY RECEIVE SERVICES THROUGH NC MEDICAID DIRECT, WILL THOSE CHANGE?

Your eligibility for Medicaid will not change as a result of NC Medicaid Managed Care, but your services may be managed differently from how they are now. If you are transitioning to NC Medicaid Managed Care, your new health plan will be responsible for providing nearly every service Medicaid currently covers, and may also offer additional services not currently available in NC Medicaid Direct.

Some NC Medicaid Direct services like dental care will be "carved out," which means you can still receive them, but it won't be managed by your new health plan. Beneficiaries who do not move to NC Medicaid Managed Care will continue to receive services like they do now. If you are receiving services for behavioral health, substance use, intellectual and developmental disability (I/DD) or traumatic brain injury (TBI) right now, contact your new health plan (if enrolled) or the NC Medicaid Enrollment Broker Call Center (833-870-5500; TTY: 833-870-5588) for more information on your options.

#### WHAT IF I NEED A RIDE TO AN APPOINTMENT SCHEDULED FOR JULY 1 OR LATER?

Health plans will begin accepting member calls for non-emergency medical transportation (NEMT) on June 1, 2021, to schedule appointments for transportation on or after July 1, 2021.

If you need transportation to a medical appointment that is scheduled to happen on or after July 1, 2021, you can call your new health plan's number provided in the NEMT section of this Fact Sheet to ensure you have a transportation appointment scheduled.

NC Medicaid will also provide historic transportation records to your new health plan, so your transportation may have already been arranged or you may be called.

We recommend calling your health plan to confirm your scheduled appointments.

If you require NEMT for an appointment happening before July 1, 2021, please call your local DSS office.

#### WILL MY APPROVED SERVICES CONTINUE AFTER JULY 1?

If you receive a specific service that has been approved by NC Medicaid through a process called "prior service authorization" or "service authorization," your new health plan will honor that authorization for at least the first 90 days (unless it expires sooner), and longer in many situations. You can contact your new health plan's Member Services line for information on your authorizations.

If your new health plan changes the services you receive and you don't like the change, you may appeal the decision by calling your new health plan's Member Services line.

#### WHAT DO I DO IF I CAN'T GET MY SERVICES AFTER JULY 1, 2021?

Because of the protections in place, you shouldn't experience a service disruption during this transition. If you have trouble receiving your services after July 1, 2021 (e.g., your home health provider doesn't show up, you have a challenge getting a medication refilled), call the agency/provider that provides that service. If you still have trouble, call your new health plan's Member Services line.

#### WHAT IF I HAVE AN APPEAL UNDER REVIEW WHEN THE TRANSITION HAPPENS ON JULY 1?

If you have appealed an initial request for services under NC Medicaid Direct, you can reapply for the service starting July 1, 2021, directly with your new health plan. If you are under a Maintenance of Services/Continuation of Benefits arrangement for services that are covered by NC Medicaid Direct, those will continue while you are reassessed by your new health plan.

#### WHAT CAN I DO BEFORE JULY 1 TO PREPARE FOR THE TRANSITION?

NC Medicaid and the health plans are working hard to make sure you get the care you need, but you can also help ensure this transition goes smoothly. Here are some things to do before July 1, 2021, to prepare for the transition:

- Be prepared to pick up calls from phone numbers you may not recognize. Health plans may be reaching out to you to make sure that your services continue as expected.
- Be on the lookout for important information in the mail about your new health plan.
- Refill your prescriptions as you normally would and take your new insurance ID card to the pharmacy for refills after July 1, 2021.
- Schedule transportation for health care appointments occurring in early July.
- Check with the service providers that are most important to you to make sure they accept your health plan. If they
  don't, call you health plan's Member Services line or the Enrollment Broker (833-870-5500; TTY: 833-870-5588)
  to learn about your options.

Fact Sheets will be updated periodically with new information. Created April 2021. For more information, please visit <a href="https://www.ncdhhs.gov/assistance/medicaid-transformation">https://www.ncdhhs.gov/assistance/medicaid-transformation</a>.

#### WHO DO I CONTACT FOR ADDITIONAL INFORMATION ABOUT MY HEALTH PLAN?

Who do I contact if	Contact Information
<ul> <li>I don't know if I need to enroll in NC Medicaid Managed Care</li> <li>I don't know which health plan I am enrolled in</li> </ul>	NC Medicaid Enrollment Broker:
	• 833-870-5500 (TTY: 833-870-5588)
<ul> <li>I have questions about my new health plan</li> <li>I need to know who my primary care provider is</li> <li>I need to get a replacement Medicaid ID card</li> <li>I need to know if my provider is enrolled in the health plan</li> <li>I need to know what benefits my new health plan provides</li> <li>I can't get my services (e.g., in-home aide does not show up as planned, medical supplies are not received, provider won't take the new health plan)</li> <li>I need to know if my approved services will continue</li> <li>I want to check on my appeal currently under review.</li> <li>Reminder: This contact information is also on your new Medicaid ID card that you received from your health plan.</li> </ul>	AmeriHealth Caritas:  • Member Services: 855-375-8811  • Website: www.amerihealthcaritasnc.com  Carolina Complete Health:  • Member Services: 833-552-3876  • Website: www.carolinacompletehealth.com  HealthyBlue:  • Member Services: 844-594-5070  • Website: www.healthybluenc.com  UnitedHealthcare:  • Member Services: 800-349-1855  • Website: www.uhccommunityplan.com/nc  WellCare:  • Member Services: 866-799-5318  • Website: www.wellcare.com/nc  Hours of operation vary by health plan
I need a ride to an appointment (non-emergency medical transportation) that occurs after July 1, 2021	Beginning June 1, 2021, you can call to reserve a ride for an appointment scheduled for July 1, 2021 or after by calling:  AmeriHealth Caritas:  ModivCare: 833-498-2262 Member Services: 855-375-8811 (after hours)  Carolina Complete Health: Member Services: 833-552-3876  HealthyBlue: LogistiCare: 855-397-3602 Member Services: 844-594-5070  UnitedHealthcare: Member Services: 800-349-1855  WellCare: Member Services: 866-799-5318  Hours of operation vary by health plan

Who do I contact if	Contact Information
I need support for non-life-threatening behavioral health issues, including issues with providers not showing up as scheduled	AmeriHealth Caritas:
	Behavioral Crisis Line: 833-712-2262
	Carolina Complete Health:
	Behavioral Crisis Line: 855-798-7093
	HealthyBlue:
	Behavioral Crisis Line: 844-594-5076
	UnitedHealthcare:
	Behavioral Crisis Line: 877-334-1141
	WellCare:
	Behavioral Crisis Line: 833-207-4240
	Hours of Operation: 24 hours a day/7 days a week
I need medical advice/support for non-emergency medical issues, including issues with providers not showing up as scheduled	AmeriHealth Caritas:
	<ul> <li>Nurse Line: 888-674-8710</li> </ul>
	Carolina Complete Health:
	<ul> <li>Nurse Line: 833-552-3876</li> </ul>
	HealthyBlue:
	Nurse Line: 844-545-1427
	UnitedHealthcare:
	<ul> <li>Nurse Line: 855-202-0992</li> </ul>
	WellCare:
	<ul> <li>Nurse Line: 877-907-7939</li> </ul>
	Hours of Operation: 24 hours a day/7 days a week