

Fact Sheet

Tailored Plan Enrollment & Timelines

Tailored Plans Launch July 1, 2024

NC Medicaid will transition beneficiaries who may need certain services for a severe mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) to the **Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plan (Tailored Plans) July 1, 2024**. Until then, potential Tailored Plan members will receive health care services the same way they do today, through NC Medicaid Direct or Standard Plans.

This fact sheet provides details on what Tailored Plans are, who qualifies for a Tailored Plan, and how and when this transition will occur.

WHAT ARE TAILORED PLANS?

Tailored Plans are integrated health plans that provide:

- Physical health services
- Behavioral health services for beneficiaries who may have significant mental health needs, severe substance use disorders, I/DD or TBI.
- Tailored Care Management (TCM) for eligible beneficiaries
- Pharmacy services
- Added services, such as wellness programs.

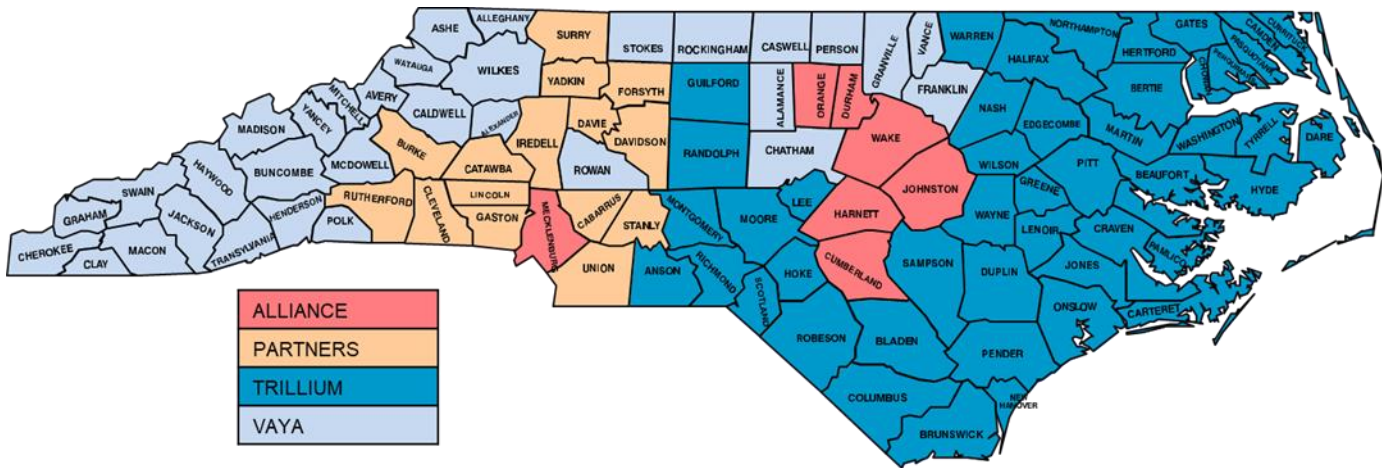
TAILORED PLAN SERVICE AREAS

There are four Tailored Plans, and only one Tailored Plan serves each county. Tailored Plan service areas are based on the county that manages the beneficiary's Medicaid case (e.g., administrative county). Tailored Plans are Local Management Entities/Managed Care Organizations (LME/MCOs) that will provide services for Tailored Plan members.

As of Feb. 1, 2024, there are new county alignments for the consolidated LME/MCOs. The underlined counties were recently added to a new LME/MCO catchment area as a part of the LME/MCO Consolidation. To learn more, visit [LME/MCO Consolidation Fact Sheet](#).

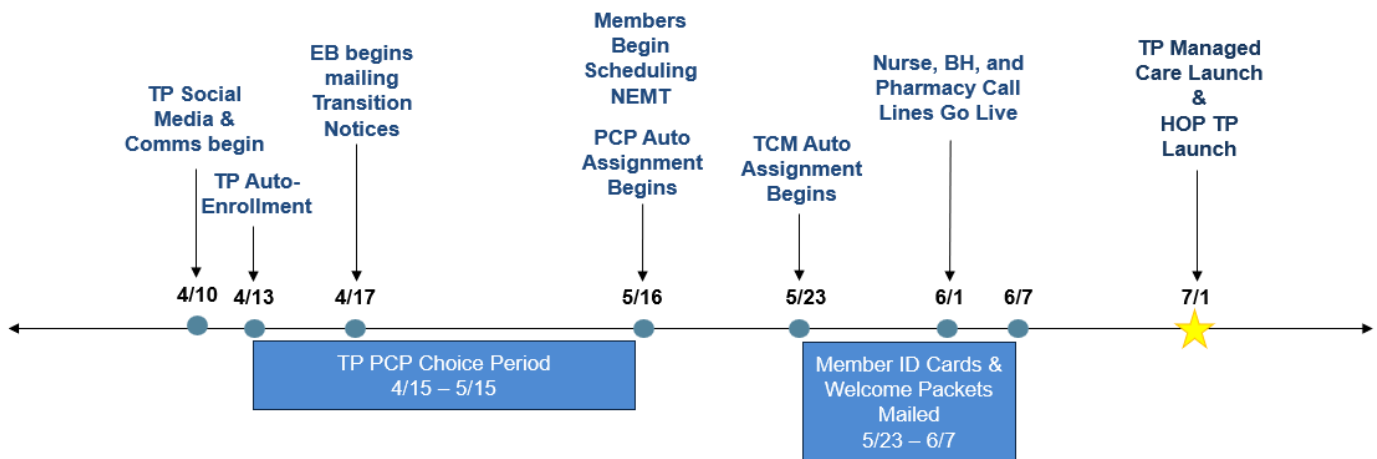
- **Alliance Health:** Cumberland, Durham, Harnett*, Johnston, Mecklenburg, Orange, Wake
- **Partners Health Management:** Burke, Cabarrus, Catawba, Cleveland, Davie, Davidson, Forsyth, Gaston, Iredell, Lincoln, Rutherford, Stanly, Surry, Union, Yadkin

- **Trillium Health Resources:** Anson, Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Guilford, Halifax, Hertford, Hoke, Hyde, Jones, Lee, Lenoir, Martin, Montgomery, Moore, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Randolph, Richmond, Robeson, Sampson, Scotland, Tyrrell, Warren, Washington, Wayne, Wilson
- **Vaya Health:** Alamance, Alexander, Alleghany, Ashe, Avery, Buncombe, Caldwell, Caswell, Chatham, Cherokee, Clay, Franklin, Graham, Granville, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Person, Polk, Rockingham, Rowan, Stokes, Swain, Transylvania, Vance, Watauga, Wilkes, Yancey



*Harnett County will become part of the TBI waiver on July 1, 2024, pending CMS approval.

TAILORED PLAN TRANSITION TIMELINE



MILESTONE	IMPORTANCE	TIMELINE	WHO CAN HELP?
Auto-enrollment	Beneficiaries who qualify for Tailored Plan will be auto-enrolled in Tailored Plans based on managed care	Beginning 4/13/2024*	Beneficiaries should contact the Enrollment Broker at 1-833-870-5500 (TTY: 711 or

MILESTONE	IMPORTANCE	TIMELINE	WHO CAN HELP?
	<p>status and administrative county.</p> <p>Beneficiaries will receive a notice from the Enrollment Broker with their enrollment and choices.</p> <p>Enrollment Broker sample notices</p>		<p>RelayNC.com) for assistance.</p>
Choice Period	<p>Beneficiaries need to choose a primary care provider (PCP) with their Tailored Plan.</p> <p>Beneficiaries may choose a different health plan (if applicable).</p> <p>Beneficiaries who have a TCM in NC Medicaid Direct will keep their TCM when they enroll in the Tailored Plan.</p>	4/15/2024 – 5/15/2024*	<p>Beneficiaries should contact their Tailored Plan to choose a PCP and TCM.</p> <p>Beneficiaries should contact the Enrollment Broker to choose a different health plan (if applicable).</p>
PCP Auto-assignment	Beneficiaries who do not choose a PCP will be assigned to one by their Tailored Plan.	Beginning 5/16/2024*	Beneficiaries should contact their Tailored Plan for assistance.
TCM Assignment	<p>Beneficiaries who have a TCM in NC Medicaid Direct will keep their TCM when they enroll in the Tailored Plan.</p> <p>Beneficiaries who did not have a TCM in Medicaid Direct and did not choose will be automatically assigned to one by their Tailored Plan.</p>	Beginning 5/23/2024*	Beneficiaries should contact their Tailored Plan to choose or change a TCM.
Day 1 – Tailored Plan Start Date	Beneficiaries will begin receiving health care services from their Tailored Plan.	7/1/2024*	Beneficiaries should contact their Tailored Plan and/or the Enrollment Broker for assistance.

*Dates are approximate and subject to change.

TAILORED PLAN ENROLLMENT CRITERIA

NC Medicaid is responsible for managing and maintaining Tailored Plan enrollment criteria. NC Medicaid collects and reviews claims, encounters and information from the Tailored Plans (such as Innovations and TBI Waivers) to identify beneficiaries eligible for a Tailored Plan.

Identification for Tailored Plan enrollment will be an ongoing process. To learn more about Tailored Plan enrollment criteria, visit Appendix B

TAILORED PLAN POPULATIONS – MANAGED CARE STATUS

Auto-enrollment for Tailored Plan is based on:

1. If a beneficiary meets the Tailored Plan enrollment criteria
2. The county that manages the beneficiary's Medicaid case (administrative county)
3. Specific population considerations (e.g., Tribal/IHS eligible or dual eligible)

Beneficiaries with the following managed care status in NC FAST will be auto-enrolled in the Tailored Plan that serves their county.

- Tailored Plan
- Tailored Plan - TBI/Innovation
- Tailored Plan - TBI/Innovation - Dual Eligible
- Tailored Plan - TCL (**Transitions to Community Living**)

Beneficiaries with the following managed care status will not be auto-enrolled (opt-in) in Tailored Plans but can choose the Tailored Plan that serves their county.

- | | |
|---|---|
| • Tribal - Tailored Plan | • Tribal - Tailored Plan - TBI/Innovation - Dual Eligible |
| • IHS - Tailored Plan | • IHS - Tailored Plan - TBI/Innovation - Dual Eligible |
| • Tribal - Tailored Plan - TBI/Innovation | • Tribal - Tailored Plan - TCL |
| • IHS - Tailored Plan - TBI/Innovation | • IHS - Tailored Plan - TCL |

CHOICE PERIOD APRIL 15 – MAY 15

Beneficiaries auto-enrolled in a Tailored Plan or who may choose a Tailored Plan (opt-in) can choose their PCP/TCM provider April 15, 2024 through May 15, 2024. **Beneficiaries who receive Tailored Care Management (TCM) from their LME/MCO will continue to receive TCM when enrolled in the Tailored Plan.**

Members should contact their Tailored Plan by calling the phone number in their notice (see chart below) to:

- Choose a PCP with their Tailored Plan
- Choose or change their TCM Provider/Care Manager with their Tailored Plan

TAILORED PLAN	MEMBER SERVICES PHONE NUMBER
Alliance Health	1-800-510-9132
Partners Health Management	1-888-235-4673
Trillium Health Resources	1-877-685-2415
Vaya Health	1-800-962-9003

Some beneficiaries who are **NOT auto-enrolled** in the Tailored Plan have other health care options and can contact the Enrollment Broker to choose or change their health plan.

To choose a different health care option (if applicable):

- **Phone:** 1-833-870-5500 (TTY: 711 or RelayNC.com)
- Enrollment Form: Fill out the form and mail or fax to
Mail: P.O. Box 613, Morrisville NC 27560
Fax: 1-833-898-9655
- Website*: ncmedicaidplans.gov/enroll
- Mobile App*: NC Medicaid Managed Care on Google Play (Android) or the App Store (iPhone)

***Tailored Plan-enrolled members cannot enroll in a Standard Plan through the website or mobile app.**

Certain behavioral health, I/DD or TBI services are only offered by Tailored Plans. The Enrollment Broker will explain choices and the beneficiary must confirm their decision to choose a Standard Plan before the Enrollment Broker will move them to a Standard Plan. If the Enrollment Broker cannot reach the beneficiary, the request to move to a Standard Plan will be denied.

WELCOME PACKET MAILINGS

After PCP and TCM auto-assignment, Tailored Plans will mail welcome packets to their new members. The welcome packet will include:

- Health Plan ID card: Includes member name, Medicaid ID number, Member service line phone numbers and the member's PCP.
- Member Handbook: Every Tailored Plan member will get at least one handbook. Some members, like those on Innovations or TBI waiver, will get an additional handbook with more information about their specific benefits and services.
- Welcome letter: The letter will have their TCM provider assignment, information about the Tailored Plan's website and member portal, how to access Non-Emergency Medical Transportation (NEMT) and other benefit information.

If a member does not get a welcome packet in the mail, they should contact their Tailored Plan.

