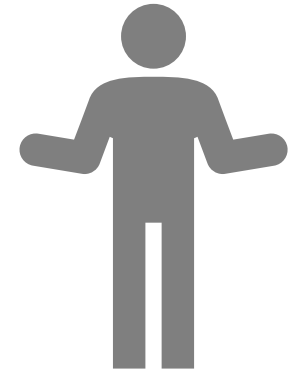


How does NC Medicaid Managed Care Affect Me?



**Guidance for People with Disabilities and Older
Adults Who Use NC Medicaid**

**Trish Farnham, Senior Policy Analyst
Quality and Population Health,
Division of Health Benefits**

June 28, 2019, v2

Acronyms Used in Today's Call

- **ABD: Aged, Blind, Disabled**
- **BH: Behavioral Health**
- **CAP/C: Community Alternatives Program for Children**
- **CAP/DA: Community Alternatives Program for Disabled Adults**
- **DD Center: Developmental Disability Center**
- **DSS: Division of Social Services**
- **ICF: Intermediate Care Facility**
- **ID: Intellectual Disability**

Acronyms Used in Today's Call

- **LME-MCO:** Local Management Entity-Managed Care Organization
- **LTSS:** Long-Term Services and Supports
- **PACE:** Program of All-Inclusive Care for the Elderly
- **PCP:** Primary Care Physician
- **PCS:** Personal Care Service
- **PHP:** Prepaid Health Plan
- **SUD:** Substance Use Disorder
- **TBI:** Traumatic Brain Injury
- **TCLI:** Transitions to Community Living Initiative

The Intent of Today's Call

- **Focus on the beneficiary's experience and "next steps" related to NC Medicaid Managed Care Enrollment.**
- **Focus on beneficiaries who are older or have disabilities.**
- **Provide information on how NC Medicaid Managed Care impacts different groups.**
- **For many, Medicaid isn't just health insurance, but a support essential to living a full life.**
- **Won't cover everything but we have more webinars scheduled!**

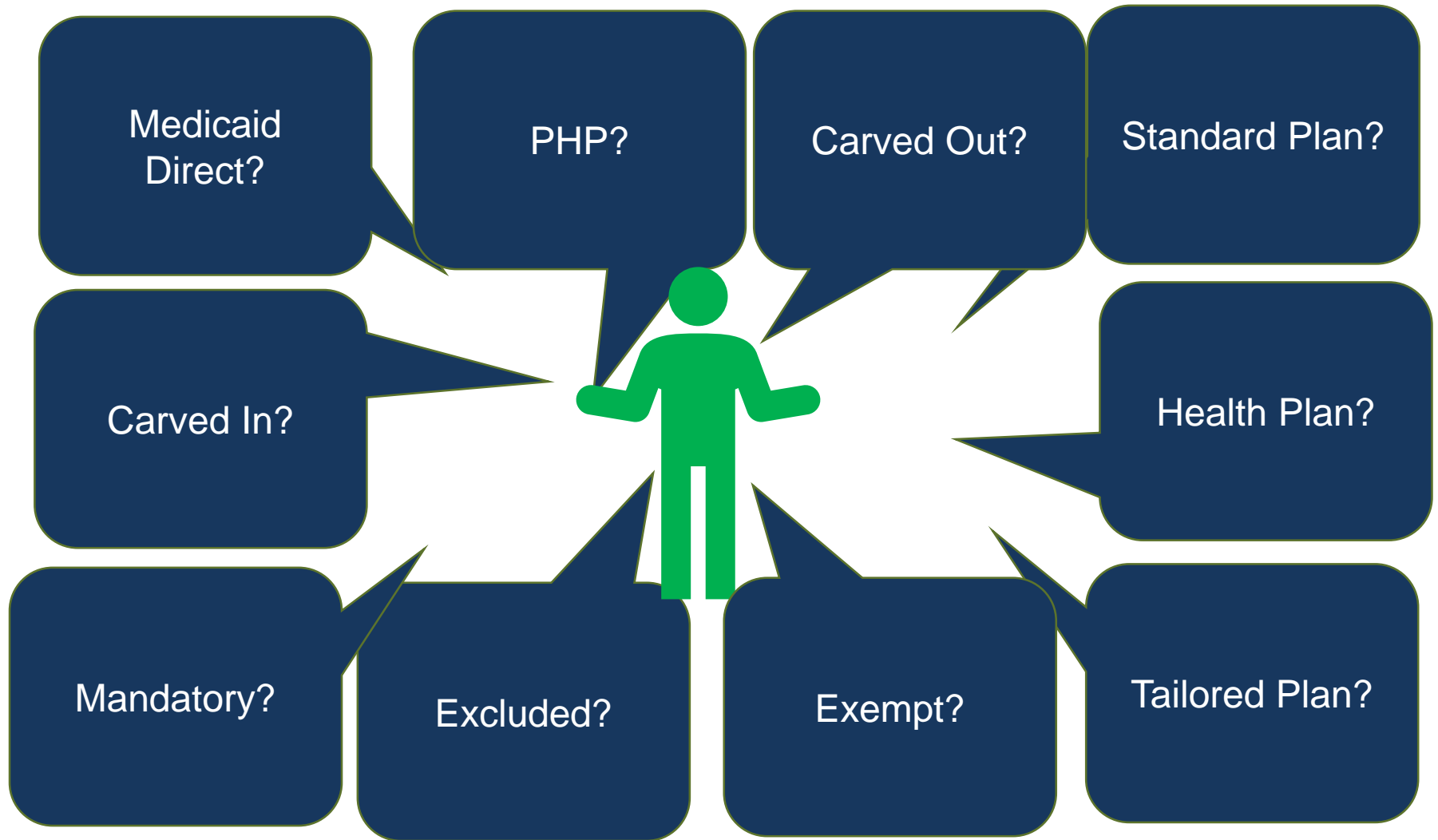
LTSS in NC Medicaid

The populations using LTSS are extremely diverse in terms of individuals' care needs, service utilization and spending. Over the next five years, the transition of programs that support these citizens will offer significant opportunities to improve care coordination, access to community-based services and outcomes for these vulnerable populations....

*North Carolina's Vision for
Long-term Services and Supports
transition to Managed Care*



There is a lot of information out there...



What do Some of those Terms Mean?

Medicaid Direct

- New name for our current Medicaid program
- Fee-for-service + LME-MCOs (or PACE)
- What everyone on Medicaid has now

NC Medicaid Managed Care

- The term used reference the five “prepaid health plans” or “PHPs” or “health plan”
- Also called “Standard Plan”

Tailored Plan

- Specialized plans for members with significant behavioral health needs and intellectual/developmental disabilities.
- What the LME-MCOs will become in a few years
- NOT the focus of today’s webinar

So What Does Medicaid Managed Care Actually Mean?

State Medicaid Program

Contract

Health Plan

Provides a payment for each member covered

Sets service requirements

Establishes its quality goals for improving services and health

Monitors Plan's activities

Sets strategic direction based on vision, legislative and regulatory requirements and stakeholder guidance

Is responsible for providing services covered by the contract

Builds and manages a provider network to serve its members

Provides care coordination and care management

Develops innovative services and approaches to meet member need

Follows state's quality and oversight requirements

NC's Medicaid Managed Care Health Plans

Health Plan	Website	Phone
	<u>www.WellCare.com/nc</u>	1-866-799-5318 (TTY: 711)
	<u>www.UHCCommunityPlan.com/NC.html</u>	1-800-349-1855 (TTY: 711)
	<u>www.HealthyBlueNC.com</u>	1-844-594-5070 (TTY: 711)
	<u>www.AmeriHealthCaritasNC.com</u>	1-855-375-8811 (TTY: 1-866-209-6421)
	<u>www.CarolinaCompleteHealth.com</u>	1-833-552-3876 (TTY: 711 or 1-833-552-2962)

Carolina Complete Health will be available in Phase 2.

It will only be offered to people who live in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Catawba, Cleveland, Columbus, Cumberland, Gaston, Harnett, Hoke, Iredell, Lee, Lincoln, Mecklenburg, Montgomery, Moore, New Hanover, Pender, Richmond, Robeson, Rowan, Sampson, Scotland, Stanly, Union

NC Medicaid Managed Care Regions

Region 1

Avery
Buncombe
Burke
Caldwell
Cherokee
Clay
Graham
Haywood
Henderson
Jackson
Macon
Madison
McDowell
Mitchell
Polk
Rutherford
Swain
Transylvania
Yancey

Region 2

Alleghany
Ashe
Davidson
Davie
Forsyth
Guilford
Randolph
Rockingham
Stokes
Surry
Watauga
Wilkes
Yadkin

Region 3

Alexander
Anson
Cabarrus
Catawba
Cleveland
Gaston
Iredell
Lincoln
Mecklenburg
Rowan
Stanly
Union

Region 4

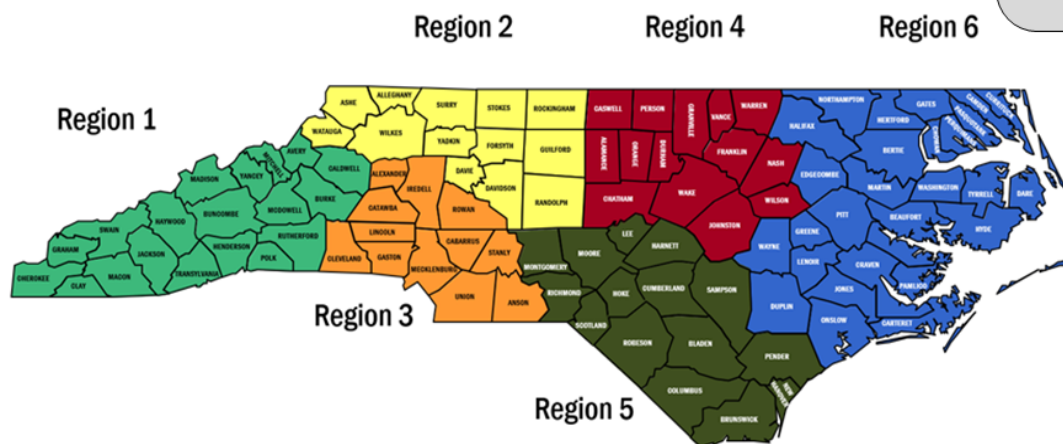
Alamance
Caswell
Chatham
Durham
Franklin
Granville
Johnston
Nash
Orange
Person
Vance
Wake
Warren
Wilson

Region 5

Bladen
Brunswick
Columbus
Cumberland
Harnett
Hoke
Lee
Montgomery
Moore
New Hanover
Pender
Richmond
Robeson
Sampson
Scotland

Region 6

Beaufort
Bertie
Camden
Carteret
Chowan
Craven
Currituck
Dare
Duplin
Edgecombe
Gates
Greene
Halifax
Hertford
Hyde
Jones
Lenoir
Martin
Northampton
Onslow
Pamlico
Pasquotank
Perquimans
Pitt
Tyrrell
Washington
Wayne



Phase 1 Region 2 & 4 Counties

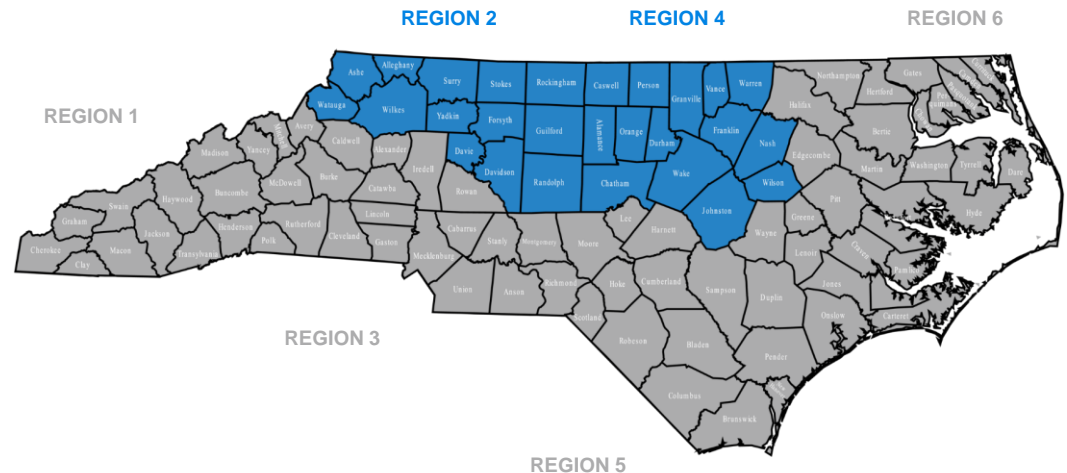
Launch Date: November 1, 2019

Region 2

Alleghany
Ashe
Davidson
Davie
Forsyth
Guilford
Randolph
Rockingham
Stokes
Surry
Watauga
Wilkes
Yadkin

Region 4

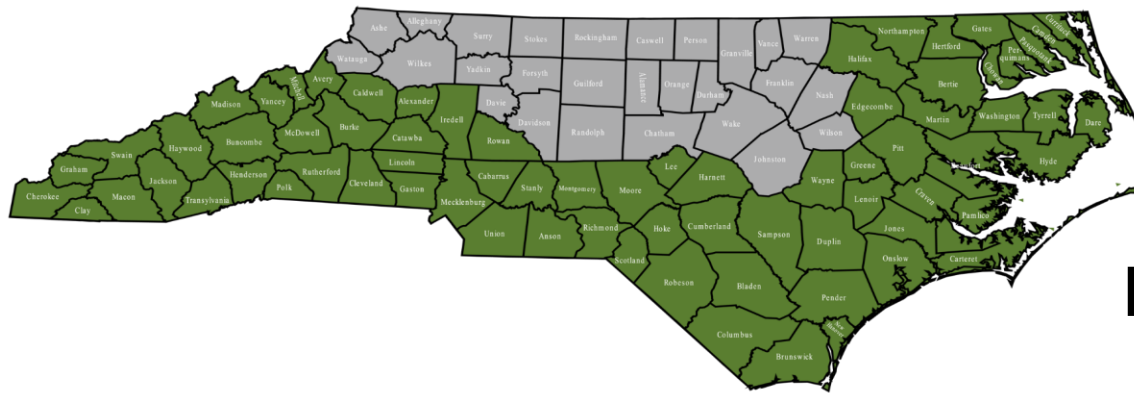
Alamance
Caswell
Chatham
Durham
Franklin
Granville
Johnston
Nash
Orange
Person
Vance
Wake
Warren
Wilson



Live in one of these counties?
Today's presentation will focus
on dates impacting you.

Phase 2 – Regions 1,3,5,6

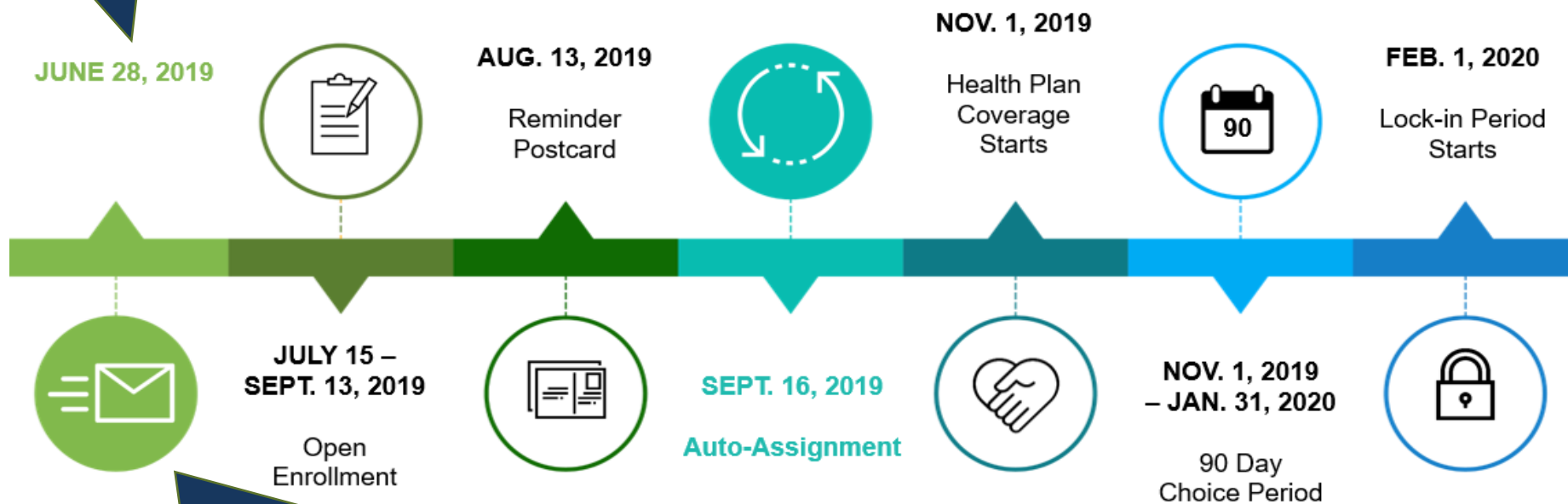
Launch Date: February 1, 2020



**Live in one these
counties?
We'll do this
presentation again in
the fall!**

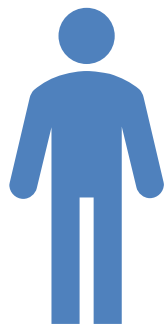
Phase 1 Timing – Regions 2 and 4

That's today!



When we talk about letters in this presentation, this is what we're talking about. They will start being mailed in next few weeks. A lot of people will NOT receive one.

So How Does All of This Impact Me?



If I receive Medicaid and Medicare



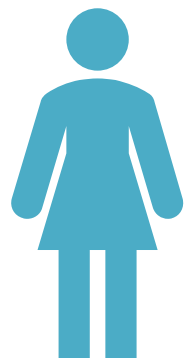
If I am in a nursing facility



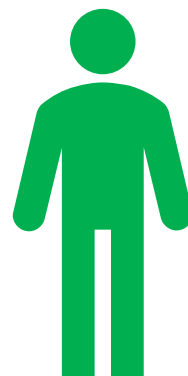
If I receive CAP/DA, CAP/C or PACE



If I have a Medicaid Deductible

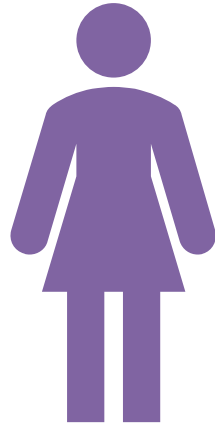


If I am on the CAP/DA or CAP/C Waiting List

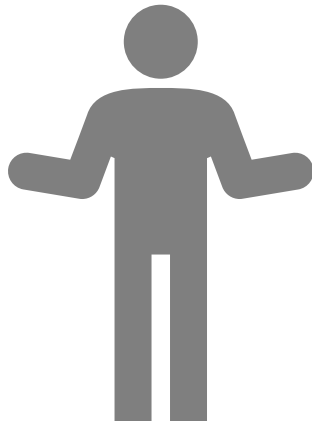


If I use services through an LME-MCO

So How Does this Impact Me?



What if I am not in any of those groups?



What if I am not sure about which group I am in?

Groups We Are Going to Talk About Today



We'll Do Our Best to Talk About Them All

Important Qualifiers

- We are trying to give people a general sense of whether they'll be enrolling in a health plan and their "next steps."
- Because factors in people's lives change, we can't address every scenario.
- We are using language like "likely to" and "should not" intentionally.
- The most important number you can have is the Enrollment Broker's number and we'll talk about them in this presentation.
- No matter if you enroll in a health plan or stay in Medicaid Direct, if you are eligible for Medicaid, you will still receive Medicaid!

Just a refresher: The Enrollment Broker

The Enrollment Broker (also known as Maximus) is responsible for choice counseling for Health Plan and PCP selection; as part of this, the Enrollment Broker is also responsible for mailing all notices and handling enrollment.

“An Enrollment Broker is an entity that performs choice counseling or enrollment activities, or both. Eligibility services are completed by NC Medicaid, not by the Enrollment Broker. Enrollment Brokers and subcontractors must not have direct or indirect financial ties to any Health Plan or healthcare provider that furnishes services in the same state where the Enrollment Broker work is performed.”

Source: The Centers for Medicare & Medicaid Services (CMS) Code of Federal Regulations 42 CFR § 438.810 – Expenditures for enrollment broker services

Choice Counseling

- Deliver information and assistance to beneficiaries
- Provide unbiased, choice counseling to beneficiaries
- Simplify the application and enrollment process so it's easy to understand



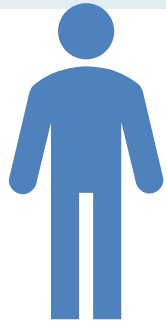
Trained customer
service team



Responsive and
understanding



Makes health info
easy to understand



If you receive Medicaid and Medicare

If you receive both Medicaid and Medicare (are “dually eligible”):



You do not need to do anything right now. The way you receive services is not changing at this time.

- “Dually eligible” members are staying in NC Medicaid Direct.
- It does not matter what other services you may be receiving, you are not going to be enrolling in a new Medicaid health plan.
- You should not get a letter.



If you use **CAP/DA**, **CAP/C**, or **PACE**

If you are on the CAP/DA or CAP/C waiver or are enrolled in PACE:



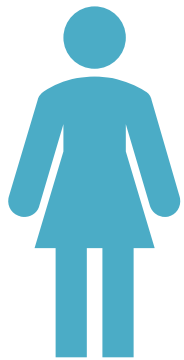
You do not need to do anything right now. The way you receive services is not changing at this time.

- **CAP/DA and CAP/C waiver recipients are staying in NC Medicaid Direct.**
- **You won't be enrolling in a new Medicaid health plan right now.**
- **PACE members will also not be choosing a new Medicaid Health Plan. PACE is already a managed care program.**
- **You should not receive a letter.**



If you are in a nursing facility

- **Remember: if you have Medicare and Medicaid, you are not enrolling in a new Medicaid health plan.**
- **Medicaid-only nursing facility residents who are in the facility *less than 90 days* *may* be getting a letter and have the opportunity to enroll with a Medicaid health plan.**
- **If you receive Medicaid and are in the facility for *more than 90 days*, you will not likely be enrolling in a new Medicaid health plan any time soon. You will stay in NC Medicaid Direct.**



If you have Medicaid only and are on the waiting list for the CAP/DA or CAP/C waiver

If you only receive Medicaid and are on the CAP/DA or CAP/C waiver waiting list:



You may be enrolling in NC Medicaid Managed Care, but can remain on the waiver waiting list.

- Remember, if you have Medicare and Medicaid you are not enrolling in a new Medicaid health plan.
- If you **ONLY** have Medicaid and are on the waiting list, you may be picking a new Medicaid health plan soon (if not otherwise excluded—e.g. have been in a nursing facility for more than 90 days).
- If you are not otherwise excluded, you may be getting a letter.



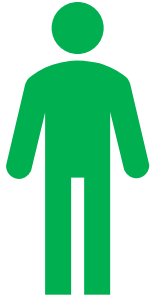
If you have a Medicaid Deductible and have to “spend down.”

If you have a
"Medicaid
Deductible" or
"spend down:"



You do not need to do
anything right now. The
way you receive services is
not changing at this time.

- It does not matter what other services you use, you will not be enrolling in a new Medicaid health plan.
- You should not receive a letter.



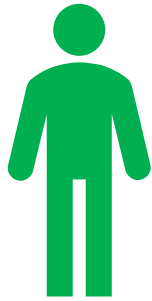
If you are on the Innovations or TBI waiver

If you are on the
Innovations or TBI
waiver:



You do not need to do
anything now. The way
you receive services is
not changing at this
time.

- Innovations and TBI waiver recipients will remain in NC Medicaid Direct.
- Waiver services will continue to be managed by your LME-MCOs.
- You should not receive a letter.



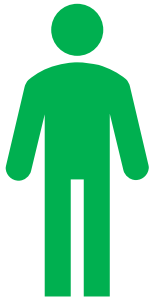
If you are on the Innovations or TBI waiver waiting list

If you receive Medicaid
and are on the
Innovations or TBI
waiver waiting list:



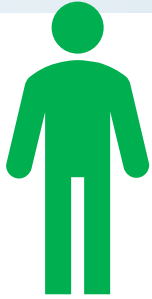
You are probably not
going to be enrolling in a
new health plan right
now.

- Beneficiaries on the Innovations or TBI waiver waiting list will stay in Medicaid Direct.
- Beneficiaries will have the option of enrolling in a Medicaid health plan.
- If you choose to enroll in a Medicaid health plan, you can stay on the waiting list.



Other LME-MCO populations who will not be enrolling in a health plan.

- **Staying in NC Medicaid Direct:**
 - TCLI participants
 - Members with significant ID/BH/SUD service needs.
 - State DD Center and ICF residents.
 - People without Medicaid who use LME-MCO services.
- **Your services will continue to be managed by the LME-MCOs.**
- **You should not receive a letter.**



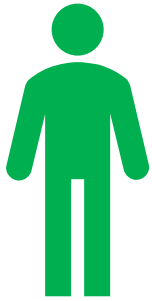
If you use other services for a developmental disability, mental health needs, substance addiction or traumatic brain injury

You are not on Innovations or TBI waiver but use other services for a developmental disability, mental health needs, substance addiction or traumatic brain injury:



Your next step depends on a few things.

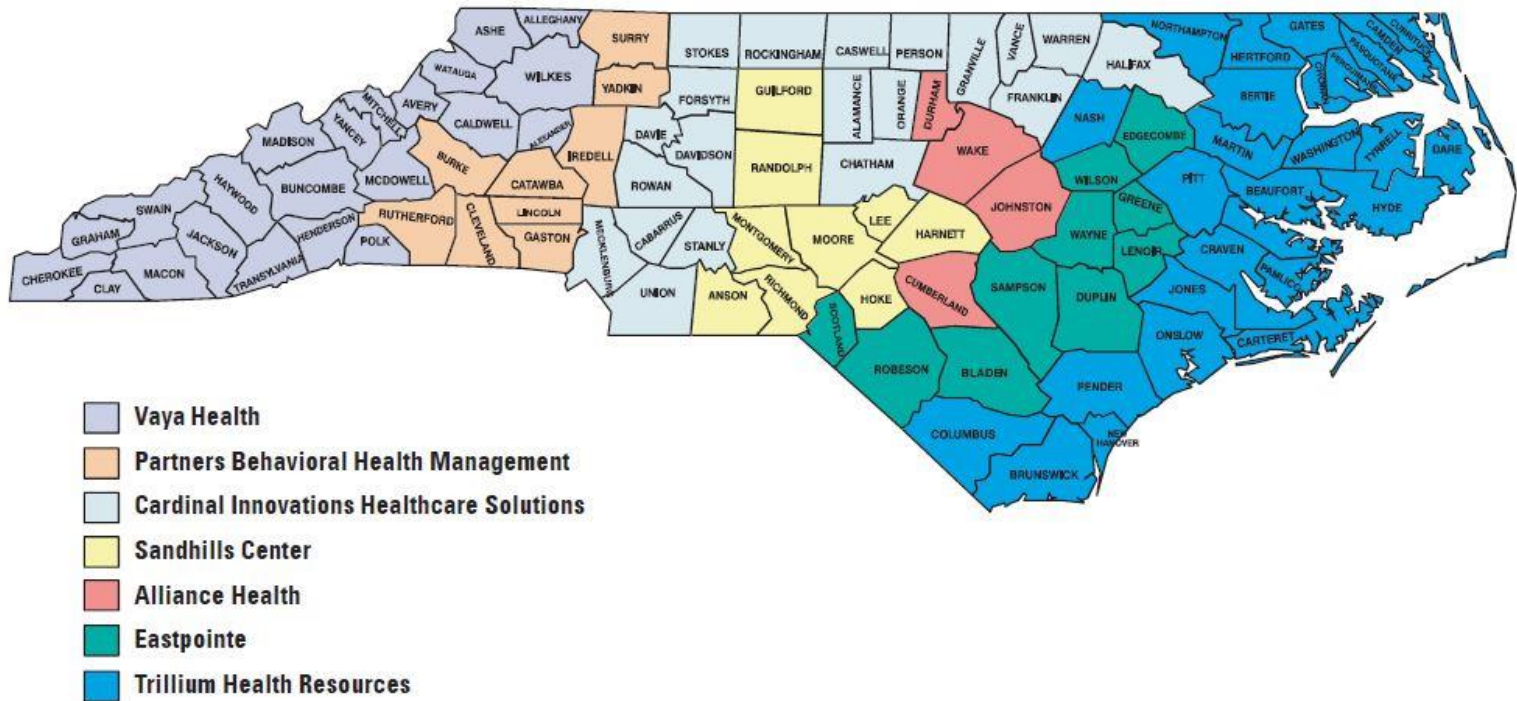
- Some people with mild service needs may enroll in a health plan.
- Folks with more significant service needs will remain in NC Medicaid Direct.
- Criteria is based on services used and diagnoses.
- Please call your LME-MCO or the Enrollment Broker for more information.



If you use services related to a developmental disability, a mental health or substance use need, your LME-MCO is also a good source of information.

Local Management Entities/Managed Care Organizations

July 2019



Contact information for the LME-MCO's can be found at <https://www.ncdhhs.gov/providers/lme-mco-directory>



If you have Medicaid and do not use any of the services previously listed.

If you only have Medicaid and do not use any of the services previously listed:



You may be enrolling in a new health plan soon, depending on your situation.

- **You may be enrolling in a new Medicaid health plan soon!**
- **You may be getting a letter soon.**
- **The Enrollment Broker can help!**

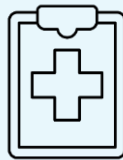
A special note to PCS service users and/or adult care home residents.

- Medicaid beneficiaries who use PCS often fall into several categories.
- PCS will be both a “covered service” under the Medicaid Health Plans and in NC Medicaid Direct.
- Special Assistance Medicaid is included in both Medicaid Direct and NC Medicaid Managed Care.
- Some PCS users/adult care home residents may enroll with a health plan and others will stay in NC Medicaid Direct. It depends on factors like if person also receives Medicare, what other services the person uses, etc.
- Next best step if it’s still not clear? Call the Enrollment Broker.

So What Does it Mean to Be Enrolled in a Health Plan?

The Impact of Managed Care on Beneficiaries

What's new?



Can choose a
Health Plan



Most will be enrolled in
NC Medicaid Managed Care

What's staying the same?



Eligibility rules



Services covered



Co-pays (if any)



Report changes to
local DSS

So What Does it Mean to Be Enrolled in a Health Plan?

Some of the Benefits



Network of
providers



See the doctor as
often as needed



No monthly
premiums



24-hour
nurse line



Help with
referrals

**And another really
important one.....**

A Long Standing Vision...

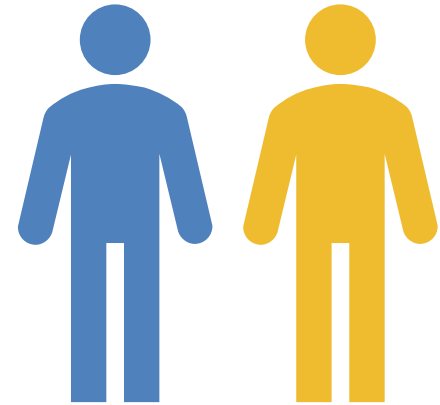
Individuals and their families have a strong, highly competent, consistent case manager or case management entity who serves as the person's ally and follows the person through services and across lifespan.

Summarized from *What Whole Person Care Means*, 2014 Stakeholder Synthesis

What Does it Mean to be Enrolled in a Health Plan?

Improved access to “whole person” care management.

- **Expedited screening of support needs for all new enrollees who are older or have disabilities (“ABD” Medicaid eligibility categories).**
- **Care management for enrolled LTSS members.**
- **“Whole person” integrative approach.**
- **Stay tuned for future webinars!**



So if I am Enrolling with a Health Plan, What Next?

- You will likely get a letter that looks like this one.
- PLEASE call the enrollment broker to guide you through next steps!

FIND SAMPLE
LETTERS HERE



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Health Benefits

Questions? Go to ncmedicalplans.gov.
Or call us at **1-833-870-5500** (TTY: 1-833-870-5588),
7 a.m. to 5 p.m., Monday through Saturday. We can
speak with you in other languages.

**ENROLLMENT PACKET NOTICE TO HOUSEHOLD WHERE ALL PEOPLE MUST CHOOSE
A HEALTH PLAN (MANDATORY)**
NC Medicaid 20190531 v1.0

Patricia A. Jones
17 Main Street
Raleigh, NC 27603

June 28, 2019

Dear Patricia A. Jones:

There will be a new way to get Medicaid health care

Starting **November 1, 2019**, most people will get the same Medicaid services in a new way –
through health insurance plans.

A **health plan** is a group of doctors, hospitals and other providers. They work together to give
you the health care you need. Everything will come from the same plan. This includes physical
health, mental health, and medicine. Some health plans provide added services like programs to
help you quit smoking.

Some things will stay the same

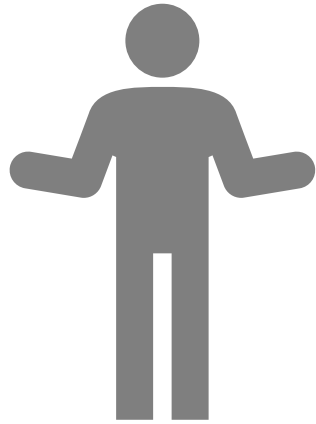
Medicaid eligibility rules are not changing.

**The people below should choose a primary care provider and health
plan by September 13, 2019**

Patricia A. Jones	Medicaid ID: XXX-XX-XXXX
Rodney M. Jones	Medicaid ID: XXX-XX-XXXX

[https://files.nc.gov/ncdma/1.-Enrollment-
Packet-Mandatory-Notice.docx.pdf](https://files.nc.gov/ncdma/1.-Enrollment-Packet-Mandatory-Notice.docx.pdf)

What If I Don't Know What to Do?



- I don't know if I have Medicare or a "spend down."
- I get some services, but I don't know what they're called.
- I could be in several categories.
- I used to be in one category but now I'm in another.
- What if some people in my household will be enrolling and others won't be?

To select a Medicaid health plan or if you are unsure what to do next....

If you are unsure what services you receive and want to know how NC Medicaid Managed Care impacts you:



Contact the NC Medicaid Enrollment Broker

- Contact the NC Medicaid Enrollment Broker
- 833-870-5500 (free call)
- www.ncmedicaidplans.gov

All of the Ways to Contact the Enrollment Broker

Options for Beneficiaries

1. Visit ncmedicaidplans.gov to learn more
2. Visit ncmedicaidplans.gov to chat with an Enrollment Specialist
3. Download and use the NC Medicaid Managed Care mobile app on your smart phone
4. Call 1-833-870-5500 to speak with an Enrollment Specialist. The call is free.
5. Individuals with hearing impairments may contact an Enrollment Specialist via the TTY line 1-833-870-5588.
6. Beneficiaries can also enroll by mailing or faxing their completed enrollment form



Questions?

Did you have general questions that were not answered on today's webinar?

- **Please email your question to:**

Medicaid.Transformation@dhhs.nc.gov

Upcoming DHHS-Sponsored Webinars you may be Interested In

- **For 7/11/2019: NC Medicaid Managed Care from an LTSS Perspective**
 - **Overview:** The transition to NC Medicaid Managed Care will impact different
This webinar will provide an “LTSS specific” overview of key elements related to NC Medicaid Managed Care.
- **For 7/25/2019: Care Management from an LTSS Perspective**
 - **Overview:** LTSS members transitioning to NC Medicaid Managed Care may have access to care management support for the first time. This webinar will provide an overview of the NC Medicaid Managed Care’s care management design.
- **For [Date TBD, August, 2019]: Last Supporting the LTSS Community through the Transition to Managed Care**
 - **Overview:** As NC transitions to managed care, North Carolina is establishing processes for ensuring providers and members have a smooth transition. This webinar will discuss activities related to Prior Authorization submissions and provider payment considerations at the time of transition.

To Receive Notices and Register for Webinars

- **Stay Updated:**
 - NC Medicaid Transformation website
 - Providers may benefit from signing up for NC TRACKS Email Distribution List.
 - More opportunities to come!
- **Register for Webinars:**
 - <https://medicaid.ncdhhs.gov/provider-transition-managed-care>
 - Announcements will also be released through other DHHS channels (like the MFP Roundtable e-group)

Today's Key Take Aways

- Whether you will be enrolling in NC Medicaid Managed Care depends on a lot of things.
- If you are going to be enrolling or have the option to enroll in NC Medicaid Managed Care, you will likely be getting a letter.
- For people in Phase I counties, these letters will come in the next few weeks.
- If you have questions about your eligibility for NC Medicaid Managed Care or need help through the enrollment process:
 - PLEASE CALL THE ENROLLMENT BROKER!
 - LME-MCOs and DSSs are also prepared to help you!

**CONTACT INFORMATION
FOR ENROLLMENT
BROKER**

833-870-5500 (free call)

www.ncmedicaidplans.gov

And just to say it one more time...

- If you have questions about your eligibility for NC Medicaid Managed Care or need help through the enrollment process:
 - PLEASE CALL THE ENROLLMENT BROKER!
 - LME-MCOs and DSSs are also prepared to help you!

**CONTACT INFORMATION FOR
ENROLLMENT BROKER
833-870-5500 (free call)
www.ncmedicaidplans.gov**

THANK YOU!