October 2, 2012

SUBJECT: Community Care of North Carolina/Carolina ACCESS (CCNC/CA) Medical Home Enrollment Project

Dear County Director of Social Services:

Local Department of Social Services offices and DMA enrollment partners worked diligently between August 2011 and February 2012 to enroll newly approved mandatory and optional Medicaid beneficiaries, as well as beneficiaries in twelve of the highest utilized exemption codes. As a result, CCNC/CA managed care enrollment increased by 15% with just over 1.3 million beneficiaries enrolled with a medical home as of March 2012. Likewise, the highest utilized CCNC/CA exemption codes reached a record low of 14,116 beneficiaries.

Since March 2012, the number of beneficiaries assigned to one of the targeted* exemption codes has increased by 126%. Enrollment into these exemption codes is often system generated or automatic as circumstances change for the beneficiary; but the need to reestablish a statewide outreach initiative is necessary. The goal is to increase enrollment to match or exceed the number in March; and more specifically, to increase enrollment among the Aged, Blind, and Disabled (ABD) beneficiaries to 75% of the total ABD population.

The Division of Medical Assistance has contracted with Public Consulting Group (PCG) to assist with this ongoing enrollment project. Using an automated process, PCG will match beneficiaries to a CCNC/CA medical home for whom they have an established relationship. Beneficiaries without an established medical home will be assigned a CCNC/CA medical home within twenty five miles of their residence, in the same county, who has enrollment slots for new patients. Maximum monthly outreach should not exceed 7,500 beneficiaries.

Enclosed you will find enrollment notifications that will be mailed monthly to exempt beneficiaries. DMA has reactivated the previously used toll free number and will have staff to answer beneficiary questions, change medical home assignments, and explain CCNC/CA benefits. This number is only available for beneficiaries receiving notifications. Beneficiaries who contact their caseworkers about this initiative should be assisted as needed and instructed to contact DMA toll-free at (855) 843-3402.

If you have questions, please contact your CCNC/CA Managed Care Consultant (http://www.ncdhhs.gov/dma/ca/MCC_0212.pdf).

Sincerely,

Michael Watson, Director

*Targeted exemption codes include: 9900010, 9900011, 9900016, 9900029, 9900030, 9900031, 9900032, 9900033, 9900040, 9900050, 9900050, 9900070, and 9999903. In addition, once beneficiaries have been removed from obsolete exemption codes 9900016, 9900030, 9900031, 9900033, 9900040, 9999903, these codes will be end dated in EIS.
Dear <Casehead>

Medicaid has enrolled <Recipient Name> with a special health care plan that offers better benefits! They are described on the back of this letter. It is called Community Care of North Carolina/Carolina ACCESS (CCNC/CA). It provides the following primary care doctor:

<Name of medical home>
<Address>
<Address>
<Address>
<Phone Number>

As a beneficiary of a specific Medicaid coverage group, you are not required to enroll at this time. If you choose not to enroll, or if you want to choose another primary care doctor, contact the Division of Medical Assistance toll free 1-855-843-3402. The customer service representative will also be able to answer any questions you have.

Please read the back of this letter for important information about CCNC/CA.
Dear <Casehead Name> 

Medicaid has enrolled <Recipient Name> with a special health care plan that offers better benefits! They are described on the back of this letter. It is called Community Care of North Carolina/Carolina ACCESS (CCNC/CA). It provides the following a primary care doctor:

(Name of medical home)  
<Address>  
<Address>  
<Address>  
<Phone Number>  

As a beneficiary of Medicare and Medicaid, you are not required to enroll at this time. If you choose not to enroll, or if you want to choose another primary care doctor, contact the Division of Medical Assistance toll free at 1-855-843-3402. A Customer Service Representative will also be available to answer any questions you have.

If last year you contacted the department of social services and requested not to be enrolled, you have received this letter in error; Please contact the Division of Medical Assistance at the toll free number given above.

Please read the back of this letter for important information about CCNC/CA.
North Carolina Department of Health and Human Services  
Division of Medical Assistance  
2501 Mail Service Center • Raleigh, N. C. 27699-2501 • Tel 919-855-4100 • Fax 919-733-6608

Beverly Eaves Perdue, Governor  
Albert A. Delia, Acting Secretary  
Michael Watson, Director

<Case Id#>  <Client County #>

DMA-Managed Care  
2501 Mail Service Center  
Raleigh, NC 27699-2501

<Date>

<Casehead>
<Address>
<Address>
<Address>

Dear <Casehead>

Medicaid has enrolled <Recipient Name> with a special health care plan that offers better benefits! The benefits are described on the back of this letter. It is called Community Care of North Carolina/Carolina ACCESS (CCNC/CA), and provides the following a primary care doctor:

{Name of medical home}
<Address>
<Address>
<Address>
<Phone Number>

As a beneficiary of Medicaid, you are required to enroll at this time. If you want to choose another primary care doctor, call the Division of Medical Assistance toll free at 1-855-843-3402 and we will assist you in this process. The customer service representative will also be available to answer any questions you have.

Please read the back of this letter for important information about CCNC/CA.