Understanding the Changes to Medicaid in North Carolina
Frequently Asked Questions (FAQ)
February 18, 2020

There is a lot of information about changes to Medicaid in North Carolina. Everyone who is eligible to get Medicaid will still get Medicaid.

This document provides answers to some common questions. It covers the changes to Medicaid, when they will happen, how they impact consumers and providers, and who to contact for help.

**What is happening with NC Medicaid?**

**How is NC Medicaid changing?**

- North Carolina is changing how most consumers receive Medicaid services.
- Most consumers will get the same Medicaid services, but in a new way—through health plans.
- A health plan coordinates your health care with a group of doctors, hospitals, and other providers. They will work together to provide you with health care. Almost everything will come from the same plan. This includes physical health services, behavioral health services, and medicine your doctor prescribes for you. Some health plans will provide added services like gym memberships.

**What will the new health plans look like?**

- There will be three types of health plans: 1) Standard Plans, 2) Behavioral Health Intellectual/Developmental Disability (I/DD) Tailored Plans, and 3) a Statewide Foster Care Plan.
- Standard Plans will provide integrated physical health, behavioral health, pharmacy, and long-term services and supports to the majority of Medicaid beneficiaries, as well as programs and services that address other unmet health resource needs.
- Behavioral Health I/DD Tailored Plans will provide the same services as Standard Plans, but will also provide additional specialized services that serve individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury (TBI).
- A Statewide Foster Care Plan will be available to children in foster care and will cover a full range of physical health, pharmacy, and behavioral health services.

**When are these changes happening?**

- For now, North Carolina’s move to Medicaid Managed Care has been suspended.
- Despite the current delay, the State continues to plan to launch the Behavioral Health I/DD Tailored Plans in Summer 2021.
How will the Medicaid Managed Care suspension affect my coverage?

- The suspension has no impact on your coverage. You will continue to have access to all the Medicaid services you do now. If you need special services for a behavioral health condition, I/DD, or TBI, you will continue receiving those services the same way you do today through NC Medicaid and your Local Management Entity/Managed Care Organization (LME/MCO).
- If you are currently enrolled in the Innovations and/or TBI waivers, you will also continue to receive those services the same way you do today.
- Everyone who is eligible for Medicaid will still get Medicaid.

What is happening with the development of Behavioral Health I/DD Tailored Plans more specifically?

What are next steps with Behavioral Health I/DD Tailored Plan development?

- Design work for Behavioral Health I/DD Tailored Plans is ongoing despite the Medicaid Managed Care suspension.
- The Department continues to meet with stakeholders to discuss Behavioral Health I/DD Tailored Plan design.
- The Department plans to issue a Request for Application (RFA) in Spring 2020. The Department will use the RFA process to award Behavioral Health I/DD Tailored Plan contracts.

Where can I learn more about what will be included in the Behavioral Health I/DD Tailored Plan RFA?

- The Department has issued a series of policy papers over the past two years that highlight different elements of the Behavioral Health I/DD Tailored Plan.
- The Department released its most recent policy paper, the Behavioral Health I/DD Tailored Plan Pre-Release Policy Paper, on January 30, 2020 to highlight additional components that will be included in the RFA.

Will there be an opportunity for public comment on the Pre-Release Policy Paper?

- Yes, there is a public comment period on the Behavioral Health I/DD Tailored Plan Pre-Release Policy Paper, which closes on February 21, 2020.

How do these changes impact me as a Medicaid provider?¹

How does the suspension affect my ability to serve patients that are on Medicaid?

- The suspension has no effect on your ability to accept Medicaid patients.
- You will continue to serve Medicaid patients the same way you do today.

¹ For more information, see Medicaid Managed Care Questions and Answers for Providers.
How does the suspension affect Medicaid billing processes?

- The suspension has no effect on Medicaid billing policies for providers.
- You will continue to bill for Medicaid services and access NCTracks the same way you do today.

What happens if I already began contracting with Medicaid health plans?

- You should review your health plan contracts to understand the impact of any terms and effective dates now that managed care is suspended.
- You should continue to contract with Standard Plans, so that you can be considered an “in-network” provider when Standard Plans launch.
- More information can be found in the Medicaid Managed Care Provider Playbook.

Who can I contact for more information or to help with my Medicaid health care?

- More information is available on the Medicaid web page and the Behavioral Health I/DD Tailored Plan web page
- Email NC Medicaid at Medicaid.Transformation@dhhs.nc.gov
- Call the Medicaid Contact Center at 888-245-0179