

Fact Sheet

NC Medicaid

NC Medicaid Managed Care

What is auto-enrollment and how does it work?

Most people in NC Medicaid *must choose* a health plan as part of the State's transition to NC Medicaid Managed Care. These individuals are called "mandatory" beneficiaries. In addition, some people *will stay* in NC Medicaid Direct ("excluded beneficiaries"), and others *will be able to choose* whether they move to a health plan or not ("exempt beneficiaries"). For more information, refer to the ["Do I need to choose a health plan?" Fact Sheet](#) or <http://bit.ly/NCChooseAHealthPlan>.

Mandatory beneficiaries who did not choose a health plan during open enrollment were automatically enrolled in a health plan by NC Medicaid. This process, called "auto-enrollment," enrolled beneficiaries in a health plan based on their unique circumstances such as geographic location, existing provider relationships and health plan assignments of other family members.

What to Expect After Auto-Enrollment

The head of the beneficiary household will receive a notice by mail that includes health plan assignments for all members of the household. Beneficiaries will be assigned to a primary care provider (PCP) by their health plan. The health plan will send each member a Welcome Packet and Medicaid ID card.

Beneficiaries Can Change their Health Plan through September 30, 2021

Beneficiaries will have through Sept. 30, 2021 (90 days after NC Medicaid Managed Care begins on July 1, 2021) to change their health plan for any reason. If you would like to keep the health plan you were enrolled in, you do not need to do anything. You will begin to receive your care through your new health plan on July 1, 2021.

For questions or to change your health plan, please call the NC Medicaid Enrollment Broker Call Center at **833-870-5500** or visit ncmedicaidplans.gov.

Additional Reminders

Exempt beneficiaries will remain in NC Medicaid Direct unless they chose a health plan during open enrollment.

Excluded beneficiaries will remain in NC Medicaid Direct. Auto-enrollment does not apply to exempt or excluded beneficiaries.

Federally recognized tribal members and others eligible for services through Indian Health Service (IHS) – exempt or excluded – who live in Cherokee, Graham, Haywood, Jackson, or Swain County will be auto-enrolled in the EBCI Tribal Option unless they chose a different health plan during open enrollment. They can change the way they receive health care services at any time. The 90-day choice period does not apply to these beneficiaries.

