

What Providers Need to Know: NC Health Choice Move to Medicaid

NC Health Choice will end April 1, 2023.

Currently, North Carolina has two programs that offer medical coverage for eligible children – Medicaid and NC Health Choice. A provision included in the North Carolina state budget, approved in July 2022, directed the Department of Health and Human Services to move NC Health Choice beneficiaries to Medicaid. Beneficiaries ages 6-18 who are currently eligible for NC Health Choice will be eligible for Medicaid benefits as part of the Medicaid for Infants and Children program beginning April 1, 2023.

Beneficiaries will not lose Medicaid eligibility or coverage when NC Health Choice ends.

WHAT IS HAPPENING AND WHEN?

Beneficiaries served under the NC Health Choice program will be moved to Medicaid effective April 1, 2023. Beneficiaries will be moved to an existing Medicaid eligibility code and Benefit plan, Medicaid for Infants and Children (MIC). The MIC program is expanding to include beneficiaries ages 6-18 whose household income is > 133% and <= 211% of the Federal Poverty Level.

Approximately 55,000 children are currently enrolled in NC Health Choice and will be moved to Medicaid. These beneficiaries will receive new Medicaid ID cards to replace their old NC Health Choice ID card.

WHAT DOES THIS MEAN FOR BENEFICIARIES?

Beneficiaries moving from NC Health Choice to Medicaid will:

- Have more health care provider choices
- Be eligible for Early & Periodic Screening, Diagnosis and Treatment (EPSDT), a benefit designed to discover and treat health conditions before they become serious
- No longer have enrollment fees or copays
- Be eligible for non-emergency medical transportation (NEMT) to access Medicaid-covered services
- Receive a new Medicaid ID card to replace their NC Health Choice ID card

Beneficiaries do not need to take any action. Their Medicaid ID (Recipient ID) number will not change.

WHAT DO PROVIDERS NEED TO DO?

- Providers enrolled in both NC Health Choice and NC Medicaid will not need to do anything
- Providers who are enrolled only in the NC Health Choice Health Plan must enroll in the Medicaid Health Plan to continue serving these beneficiaries. This can be done by submitting a Manage Change Request (MCR) through the secure NCTracks Provider Portal.
 - Providers who choose to not enroll in the Medicaid health plan will no longer be eligible to render services to NC Medicaid beneficiaries beginning April 1, 2023 and are subject to termination if there are no other active health plans on their provider record.
- Providers should continue to verify beneficiary's eligibility through NCTracks with their Medicaid ID number.
- Once transitioned to Medicaid, former NC Health Choice beneficiaries no longer have a copayment for services.

WHAT IF I HAVE QUESTIONS?

Additional resources for providers on the transition to managed care can be found in the [NC Medicaid Help Center](#) the [Provider Playbook](#) and on the [Medicaid Transformation website](#). The **Day One Quick Reference Guide** can also be found on the Provider Playbook [Fact Sheet](#) page.

For general provider inquiries and complaints regarding health plans, contact the **Provider Ombudsman** at Medicaid.ProviderOmbudsman@dhhs.nc.gov, or 866-304-7062. The Provider Ombudsman contact information is also published in each health plan's provider manual.

For questions related to your NCTracks provider information, please contact the NCTracks Call Center at 800-688-6696. To update your information, please log into NCTracks (<https://www.nctracks.nc.gov>) provider portal to verify your information and submit an MCR. For all other questions, please contact the NC Medicaid Contact Center at 888-245- 0179.

