



Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plan Cross-Functional Training

Agenda

- **Introductions**
- **NC Medicaid**
 - **NC Medicaid Managed Care Timeline**
 - **NC Medicaid Populations**
 - **EBCI Tribal Option & NC Medicaid Direct Overview**
 - **Standard Plan & Tailored Plan Overview**
 - **Tailored Plan Key Milestones**
- **Tailored Plan**
- **Standard Plans**
 - **AmeriHealth Caritas**
 - **Carolina Complete Health**
 - **Healthy Blue**
 - **UnitedHealthcare Community Plan**
 - **WellCare**
- **EBCI Tribal Option**
- **Community Care of North Carolina (CCNC)**
- **NC Medicaid Enrollment Broker**
- **NC Medicaid Ombudsman**
- **Questions**

Table of Contents

- Slide 4 – 5 : Introductions
- Slides 6 – 20: NC Medicaid
 - NC Medicaid Managed Care Timeline
 - NC Medicaid Populations
 - EBCI Tribal Option & NC Medicaid Direct Overview
 - Standard Plan & Tailored Plan Overview
 - Tailored Plan Key Milestones
- Slides 21 – 53: Tailored Plans
 - 21 – 25: Alliance Health
 - 26 – 30: Eastpointe
 - 31 – 35: Partners Health Management
 - 36 – 40: Sandhills Center
 - 41 – 45: Trillium Health Resources
 - 46 – 53: Vaya Health
- Slides 54 – 75: Standard Plans
 - 54 – 57: AmeriHealth Caritas
 - 58 – 61: Carolina Complete Health
 - 62 – 65: Healthy Blue
 - 66 – 70: UnitedHealthcare Community Plan
 - 71 – 75: WellCare
- Slides 76 – 80: EBCI Tribal Option
- Slides 81 – 84: Community Care of North Carolina (CCNC)
- Slides 85 – 89: NC Medicaid Enrollment Broker
- Slides 90 – 93: NC Medicaid Ombudsman
- Appendix

Introduction – Who's here? (Tailored Plans)



Introduction – Who's here?



NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

**NC Medicaid
Enrollment
Broker**



EBCI TRIBAL OPTION



NC MEDICAID
OMBUDSMAN



Community Care
OF NORTH CAROLINA



carolina
complete health™

WellCare
Beyond Healthcare. A Better You.

**County DSS
Staff**



UnitedHealthcare®
Community Plan



HealthyBlueNC



AmeriHealth Caritas™
North Carolina



NCDHHS

NC Medicaid
Division of Health Benefits

NC Medicaid

NC Medicaid Managed Care Timeline

- Standard Plans and the EBCI Tribal Option launched on **July 1, 2021**.
- Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans (Tailored Plans) will launch on **December 1, 2022**.
- Some beneficiaries will stay in NC Medicaid Direct (fee-for-service). They will transition to NC Medicaid Managed Care at a future date.



NC Medicaid Populations

Standard Plan

- Most families and children
- Children who receive NC Health Choice
- Pregnant women
- People who are blind or disabled and not receiving Medicare

NC Medicaid Direct with LME/MCO and CCNC

- People who receive Medicaid and Medicare (duals)
- People who are medically needy
- People in the HIPP program
- Children who receive CAP/C services
- People who receive CAP/DA services
- Children and youth in foster care

Tailored Plan

- People who may have a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI)
- Innovations Waiver participants
- TBI Waiver participants

EBCI Tribal Option with LME/MCO

- Federally recognized tribal members
- Individuals who qualify for services through Indian Health Service (IHS)

Only available in these counties: Buncombe, Clay, Cherokee, Graham, Haywood, Henderson, Jackson, Macon, Madison, Swain, Transylvania

*This slide may not include all Medicaid populations

Eastern Band of Cherokee Indians (EBCI) Tribal Option

- The EBCI Tribal Option is the primary care case management entity (PCCMe) created by the Cherokee Indian Hospital Authority (CIHA). The EBCI Tribal Option launched **July 1, 2021**.
- Medicaid beneficiaries who qualify for the EBCI Tribal Option:
 - Federally recognized tribal members
 - Individuals who qualify for services through Indian Health Service (IHS)
- The EBCI Tribal Option is available to beneficiaries who live in the following counties:
 - Buncombe, Clay, Cherokee, Graham, Haywood, Henderson, Jackson, Mason, Madison, Swain, Transylvania

EBCI Tribal Option

- Manages the primary care needs of members. Offers added services, such as wellness programs and education vouchers.
- Vaya Health as an LME/MCO provides care coordination for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).
- EBCI Tribal Option members can get services from any NC Medicaid or NC Health Choice provider.

NC Medicaid Direct

- NC Medicaid Direct is North Carolina's health care program for Medicaid beneficiaries who are not enrolled in Standard Plans, EBCI Tribal Option or Tailored Plans.
- On **December 1, 2022**, NC Medicaid will transition beneficiaries who need certain services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) to Tailored Plans.
- Some beneficiaries will remain in NC Medicaid Direct or can choose NC Medicaid Direct instead of a health plan.

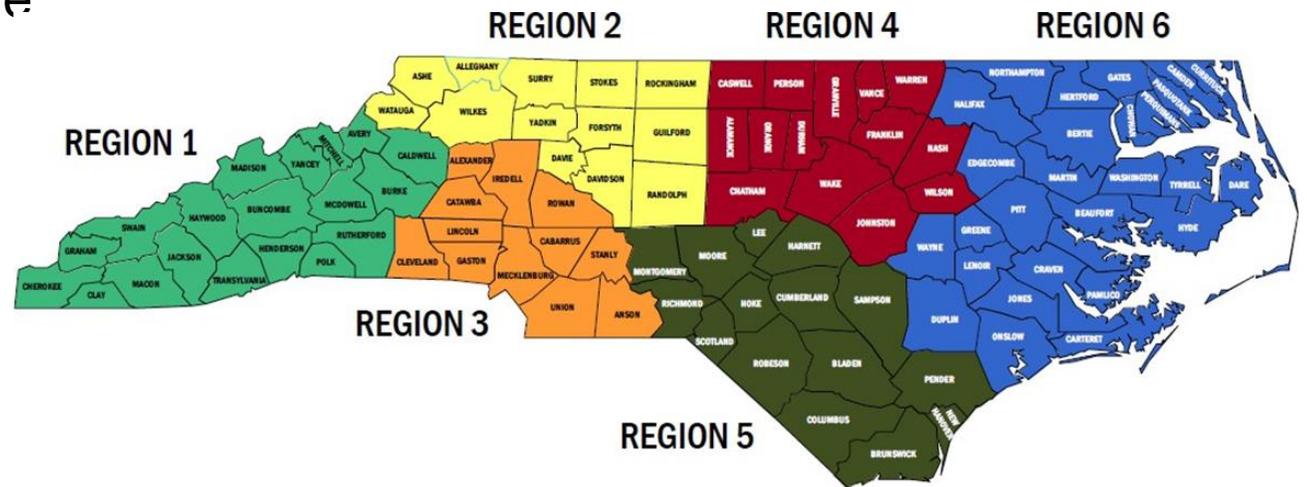
NC Medicaid Direct w/ LME/MCO

Beneficiaries not enrolled in the Tailored Plan will receive services for a mental health disorder, substance use disorder, intellectual/developmental disabilities (I/DD) or traumatic brain injury (TBI) from an LME/MCO.

[Tailored Plan] will serve as the LME/MCO for beneficiaries enrolled in NC Medicaid Direct.

Standard Plans

- Approximately 1.7 million Medicaid beneficiaries are enrolled in Standard Plans
- The following Standard Plans are available statewide:
 - AmeriHealth Caritas
 - Healthy Blue
 - UnitedHealthcare Community Plan
 - WellCare
- Carolina Complete Health is only available in regions 3, 4 and 5



Standard Plan and Tailored Plan Overview

Health care options for beneficiaries will be dependent on:

- ✔ Managed Care status
- ✔ Enrollment rules for residential or administrative county

Standard Plan

Standard Plans provide integrated physical health, behavioral health, pharmacy and long-term services and support to most Medicaid beneficiaries, as well as other programs and services that address other unmet health-related resource needs.

- Enrollment is based on the beneficiary's **residential county** (county where beneficiary lives).
- Depending on residential county, beneficiaries can choose from either 4 or 5 Standard Plans.

Tailored Plan

Tailored Plans will provide the same services as Standard Plans as well as additional services for individuals with a mental health disorder, substance use disorder, I/DD or TBI, and State-funded services.

- Enrollment is based on the beneficiary's **administrative county** (county that manages the beneficiary's Medicaid case).
- There is only **1** Tailored Plan per county. If a beneficiary's administrative county changes to a different service area, they will move to the Tailored Plan that offers services in that county.

What is the Tailored Plan?



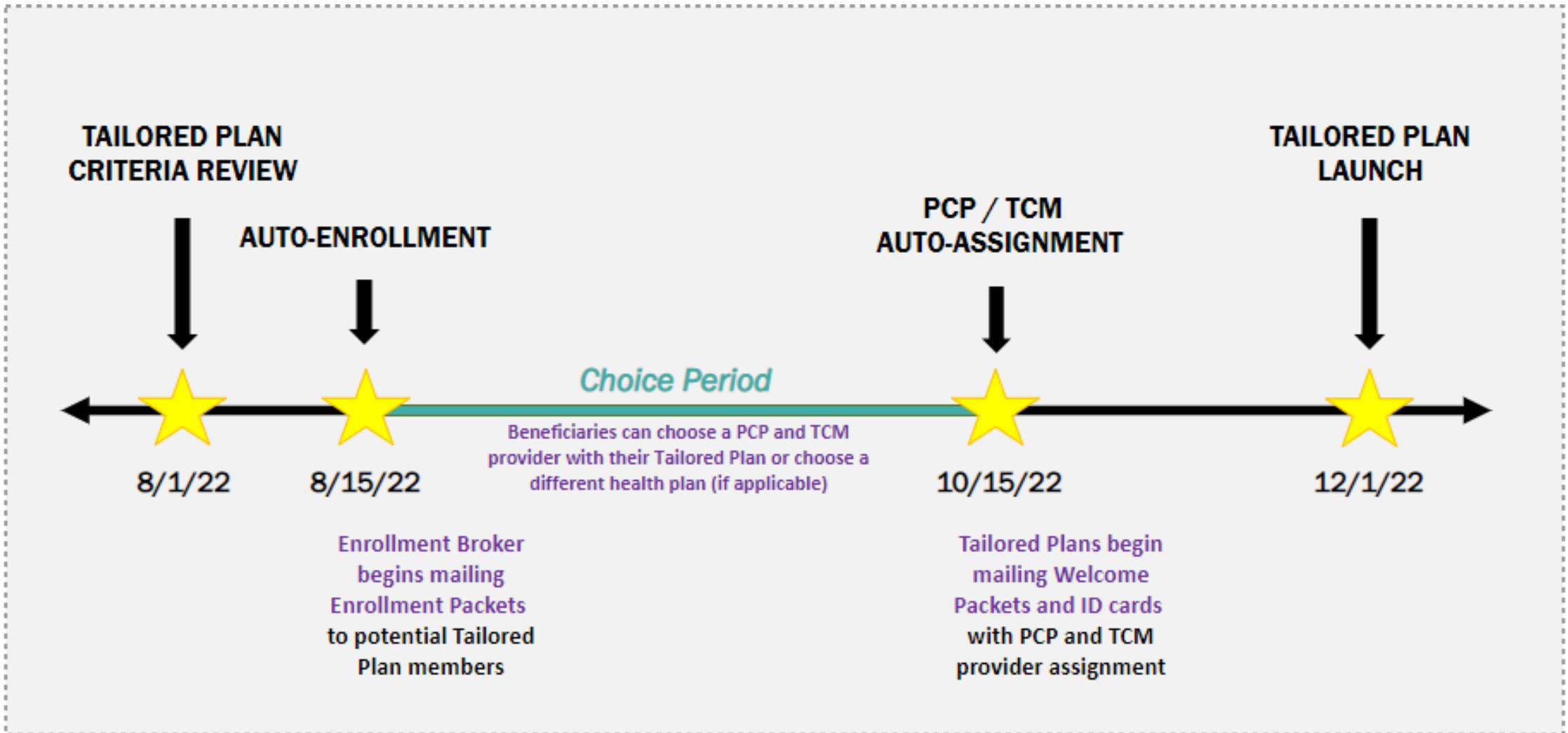
The Tailored Plan will provide:

- Physical health, pharmacy and enhanced behavioral health services for beneficiaries who may have significant mental health needs, severe substance use disorders, intellectual/developmental disabilities (I/DD) or traumatic brain injury (TBI)
- Services for Innovations and TBI Waiver beneficiaries and Waiver waitlist beneficiaries
- Added services, such as wellness programs
- Non-emergency medical transportation (NEMT) for Medicaid-covered services (including carved out services)
- Tailored care management
 - Tailored care management will focus on the whole person and help address physical health, pharmacy, behavioral health, I/DD, TBI and long-term services and supports (LTSS) needs. It will also address unmet health-related resource needs.
- State-funded services

Traumatic Brain Injury (TBI) Waiver

- Alliance Health is the only Tailored Plan that provides TBI Waiver services.
- **At Tailored Plan launch on December 1, 2022**, TBI Waiver services will only be available in the following counties:
 - Cumberland
 - Durham
 - Johnston
 - Wake
- The TBI Waiver may expand to other counties and services areas at a later date.

Tailored Plan Timeline and Key Milestones



Auto-Enrollment

Begins August 15, 2022

Beneficiaries who qualify for Tailored Plan will be auto-enrolled in Tailored Plans based on managed care status and administrative county.

Beneficiaries will receive a notice from the Enrollment Broker with their enrollment and choices.

➤ **Beneficiaries may contact the Enrollment Broker and Tailored Plan for assistance.**

Beneficiaries can contact their **Tailored Plan** to:

- Choose a primary care provider (PCP) and Tailored Care Management provider

Beneficiaries can contact the **Enrollment Broker** to:

- Choose a different health care option (if applicable)
 - By calling **1-833-870-5500** (TTY: 711 or RelayNC.com)
 - Online at ncmedicaidplans.gov

Choice Period

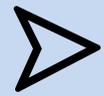
August 15, 2022 through October 14, 2022

During this time, beneficiaries may choose a primary care provider (PCP) and Tailored Care Management provider or a different health plan (if applicable)

- To choose a PCP or Tailored Care Management provider with the Tailored Plan, beneficiaries should contact their Tailored Plan.
- To choose a different health plan, beneficiaries should contact the Enrollment Broker.



Beneficiaries may contact the Enrollment Broker for choice counseling and enrollment assistance.



Beneficiaries should contact the Tailored Plan to choose a PCP and Tailored Care Management provider.

PCP and Tailored Care Management Auto-Assignment

Begins October 15, 2022

- Beneficiaries who have not chosen a PCP or Tailored Care Management provider with the Tailored Plan will be auto-assigned to one by their Tailored Plan.
- Tailored Plans will begin mailing Welcome Packets and ID cards to their members.



Beneficiaries may contact the Tailored Plan for questions about coverage or benefits.

Tailored Plan Launch

December 1, 2022

 **Tailored Plan services begin**

What's changing?

Tailored Plan members will begin receiving health care services from their Tailored Plan.

Tailored Plan members will receive a Welcome Letter, Member ID Card, and Member Handbook from their Tailored Plan.

What's staying the same?

Beneficiaries will continue to receive the same health care services Medicaid covers today.

Medicaid eligibility rules and processes are not changing.



Tailored Plan: Alliance Health
May 5th 2022, 1:00 – 3:00 pm

DSS Liaison

Expected Hire Date: Fall 2022

Tailored Plan: Alliance Health

Presenters:

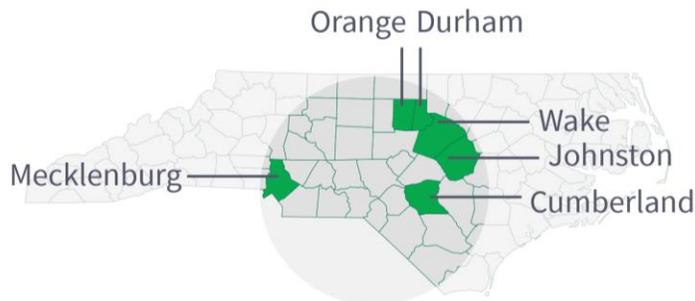
LaKeisha McCormick – Member Inclusion and Outreach Manager
Jennifer Meade – Community Engagement Manager

Contact Information:

- **Member and Recipient Service Line**
800-510-9132 Monday – Saturday, 7 a.m. to 6 p.m
- **Behavioral Health Crisis Line**
877-223-4617 (24 hours a day, 7 days a week)
- **Nurse Line**
855-759-9400 (24 hours a day, 7 days a week)
- **Website**
www.AllianceTailoredPlan.org (Active June 15, 2022)
- **NEMT: 855-759-9600**

Counties Served:

Cumberland, Durham, Johnston, Mecklenburg, Orange, and Wake



Alliance Health 5200 W. Paramount Parkway, Suite 200
Morrisville, NC 27560

Member: First Middle Last	Primary Care Provider (PCP):
Date of Birth: 7/23/1984	Jane Doe
Member ID: 1234567	1234 MAIN ST
Plan Name: Medicaid OR NC Health Choice	STE 102
Effective Date: 7/1/2021	MORRISVILLE, NC 27560
	PCP Phone: 1-555-555-5555
	RxB N: XXXXXX
	RxPCN: MCD
	RxGRP: RXXXXX

Member Portal: www.AllianceHealthPlan.org

Member and Recipient Services (Mon-Sat 7 a.m.–6 p.m.):	1-800-510-9132
24-hour Nurse Services:	1-855-759-9400
24-hour Behavioral Health Crisis Services:	1-877-223-4617

If you are experiencing an emergency, please call 911 for immediate help.
Contact your primary care provider as soon as possible.

Provider Services (Mon-Sat 7 a.m.–6 p.m.):	1-855-759-9700
Pharmacy Services (Mon-Sat 7 a.m.–6 p.m.):	1-855-759-9300

All other claims are to be mailed to: Alliance Claims 5200 W. Paramount Parkway, Suite 200 Morrisville, NC 27560	All pharmacy claims are to be mailed to: Navitus Health Solutions, LLC P.O. Box 999 Appleton, WI 54912-0999
---	--

If you suspect a doctor, clinic, hospital, home health service or any other kind of health provider is committing Medicaid fraud, report it. Call 919-881-2320.

Tailored Plan: Alliance Health

Role in NC Medicaid Managed Care

- **Tailored Plan Role:**
 - Provide physical health, pharmacy and enhanced behavioral health services
 - Population: Individuals who have significant mental health needs, severe substance use disorders, intellectual and/or developmental disabilities (I/DD), traumatic brain injury (TBI)
- **Tailored Plan Services:**
 - Services for Innovations and TBI Waiver Beneficiaries
 - Value Added Services and/or Wellness Programs
 - Non-emergency Medicaid Transportation
 - Tailored Care Management

Role with NC Medicaid Direct

- **NC Medicaid Direct Role:**
 - To support the behavioral healthcare for members who receive services through NC Medicaid Direct
- **NC Medicaid Direct Services:**
 - Provide and coordinate services for:
 - Mental Health Disorders
 - Substance Use Disorders
 - Intellectual/Developmental Disability
 - Traumatic Brain Injury

Tailored Plan: Alliance Health

How we work together

DSS Liaison: DSS Liaison Contact Information TBD

- Participate in joint town halls or other educational events with DSS partners
- Ensure DSS partners understand Medicaid managed care, standard and tailored plans, transitions between plans, etc.
- Education and Technical Assistance

Member Operations Integration

- Website
- Member facing telephone lines (Member and Recipient Services line, Nurse Line, and Behavioral Health crisis line)
- Social media and local news outlets
- Community outreach and education
- Community Forums/Community Conversations/Town Halls

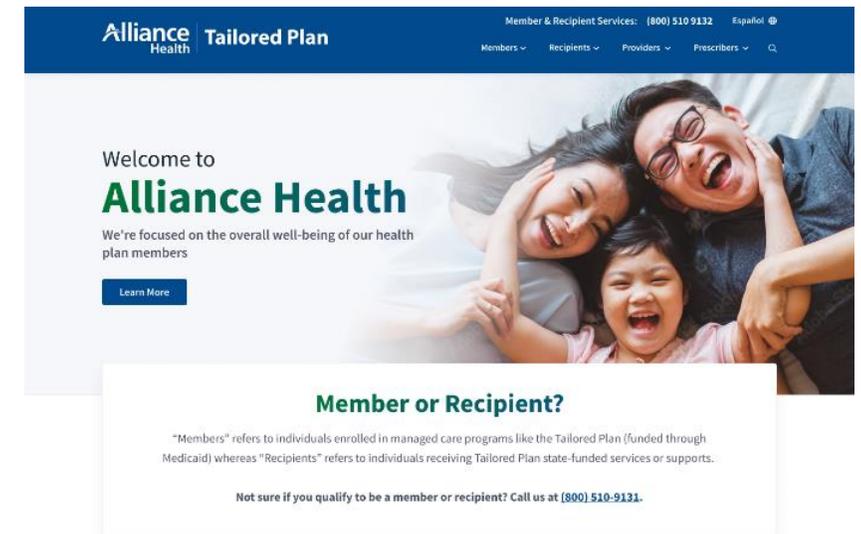
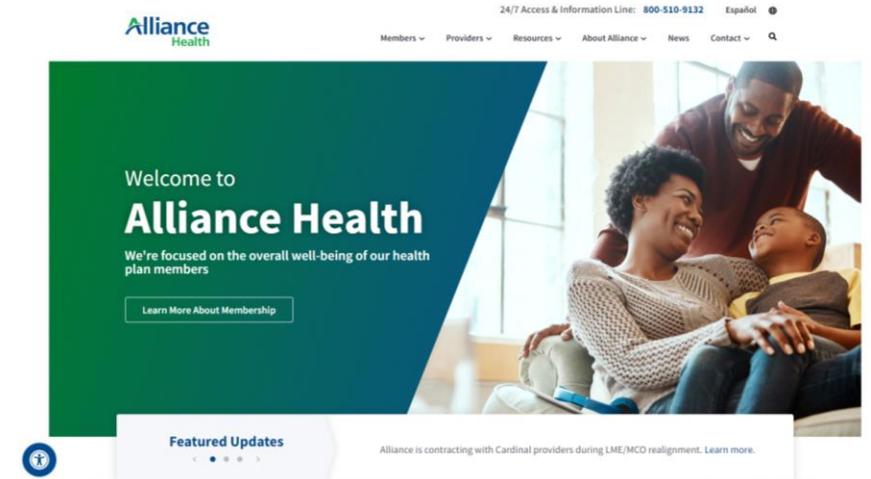
Tailored Plan: Alliance Health

Website Navigation

- **Main website:** AllianceHealthPlan.org
- **Tailored Plan website:** AllianceTailoredPlan.org

Key Features (Active June 15, 2022)

- Links to member portal and member and recipient handbooks
- Links to provider portal and provider operations manual
- Links to provider directory and online search tool
- Guide to accessing services
- Information on health promotion and educational materials
- Information on addressing appeals and grievances





Tailored Plan: Eastpointe
April 22nd 2022, 10:00 am – 12:00 pm

DSS Liaison
Maria McCrimmon
1-910-298-7068

Tailored Plan: Eastpointe

Presenters:

Maria McCrimmon, DSS Liaison, Director of MH/SU Care Coordination

Email: mccimmon@eastpointe.net | 1-910-298-7068

Katina Dial-Scott, Senior Director of Member Management

Email: kdialscott@eastpointe.net | 1-910-272-1244

Brooke Mickelson, Director of Training and Community Relations

Email: bmickelson@eastpointe.net | 1-252-407-2402

Contact Information:

- **Member and Recipient Service Line**

- 1-800-913-6109 (TTY 711)

- **Nurse Line**

- 1-866-248-9512 (TTY 7110)

- **Behavioral Health Crisis Line**

- 1-866-218-1328 (TTY 711)

- **Website:**

- www.eastpointe.net

- **NEMT:** 1-800-913-6109

Eastpointe Catchment Area:

Duplin, Edgecombe, Greene, Lenoir, Robeson, Sampson, Scotland, Warren, Wayne, Wilson



TAILORED PLAN

Member Name: Taylor Smith

Medicaid #: 253697459K

Member Number: 123456789

Plan Name: Eastpointe BH I/DD Tailored Health Plan

Address: 514 E. Main St. Beulaville, NC 28518

Primary Care Provider (PCP): Keystone Wellness Center

Address: 113 N. James St. Lumberton, NC 28359

Telephone: 1-800-739-1002

Rx BIN#: 003858

PCN: MA

RxGroup: EASTPT1

Member Portal:

WWW.EASTPOINTE.NET/MEMBERS-AND-FAMILIES/PATIENT-RESOURCES/MEMBER-PORTAL/

www.eastpointe.net

Member and Recipient Services Line: 1-800-913-6109/ TTY 1-888-819-5112

Behavioral Health Crisis Line: 1-866-218-1328/ TTY: 1-888-819-5112

Nurse Line: 1-866-248-9512

Provider Service Line: 1-888-977-2160

Prescriber Service Line: 1-866-240-9487

The North Carolina Department of Justice Medicaid Investigations Division (MID), fraud, waste, and abuse hotline: **Call (919) 881-2320** if you suspect a doctor, clinic, hospital, home health service or any other kind of medical provider is committing Medicaid fraud.

A replacement identification card shall be provided upon request by the Member or the Member's authorized representative or upon AMH/PCP change, at no charge to the Member. See your member handbook for a listing of carved out services.

Tailored Plan: Eastpointe

Role in NC Managed Care

NC Medicaid Managed Care

- One health plan for most of your health services, including physical health, behavioral health, and pharmacy and addressing unmet health related resource needs

Tailored Plan role:

- Provide welcome Packets, including Welcome Letter, Medicaid Card and Member Handbook
- Help members with primary care provider (PCP) information and complete PCP Auto-Assignment if no PCP is selected
- Provide ID Medicaid Card/Replacement Cards
- Conduct Care Needs Screening for members
- Operate Service lines
- Process appeals and grievances

Tailored Plan services

- Behavioral Health (BH), Physical Health, Pharmacy
- Long-term services and supports (LTSS)
- Provide Non-Emergent Medical Transportation (NEMT) Services

Role with NC Medicaid Direct

NC Medicaid Direct role:

- Manage services for behavioral health, substance use disorder, I/DD, or TBI

NC Medicaid Direct services

- Behavioral Health Services

Tailored Plan: Eastpointe

How we work together

DSS Liaison

- **Maria McCrimmon**, DSS Liaison, Director of MH/SU Care Coordination
 - 1-910-298-7068 | mccrimmon@eastpointe.net
- Virtual and/or In Person meetings will be held specifically with DSS beginning in May to discuss Tailored Plan
- Approved educational and marketing materials will be shared with DSS

Member Operations Integration

- Tailored Plan Mission: To deliver high-quality, whole-person care benefits to Medicaid members
- Eastpointe's communications are designed to:
 - Raise awareness about Tailored Plan benefits and services
 - Educate public benefits users about the differences between Tailored Plans and Standard Plans
 - Educate users on how to use the Eastpointe Tailored Plan most effectively
- Member education efforts will include in person and virtual events, information distribution at fairs and outreach events, web-based presence, social media blasts, and education of stakeholders who have contact with members/recipients.

Tailored Plan: Eastpointe

Website Navigation

- **Main website:** www.eastpointe.net
- **Tailored Plan website:** www.eastpointe.net (Same address)

Key Features

- Navigation bar at top includes links for Member/Recipient, Pharmacy, and Providers landing pages
- These three landing pages serve as the primary access points for related topics.
- Links on landing pages are setup to ensure the 2 click requirement is applied where required and to non-required when possible.

EASTPOINTE

Tailored Plan Home

Eastpointe connects those in need with the best possible behavioral health care.
Eastpointe works together with individuals, families, providers and communities to achieve valued outcomes in our behavioral healthcare system.

LEARN MORE

Member/Recipient

Our Member/Recipient section provides access to all the information Members/Recipients need to access and manage their services.

LEARN MORE

Pharmacy

Information on accessing Pharmacy services and assistance can be found here.

LEARN MORE

Providers

Providers can find information and tools here to assist them.

LEARN MORE

You can take a short, confidential screening for several behavioral health issues. It's free, easy and available 24-hours a day from any computer or mobile device. The screening is anonymous and provides details on how to access services if needed.

Take the Screening

ACCREDITED
NCCA
MANAGED BEHAVIORAL
HEALTHCARE ORGANIZATION



PARTNERS

Improving Lives.
Strengthening Communities.®

Tailored Plan: Partners Health Management
May 9th, 2022, 2:00 – 4:00 pm

DSS Liaison

Tara Conrad

TConrad@PartnersBHM.org

Tailored Plan: Partners Health Management

Presenters:

Tara Conrad, TConrad@PartnersBHM.org
 Community Engagement Director, DSS Liaison
 Allison Crotty, Acrotty@PartnersBHM.org
 Member Engagement Director

Contact Information:

- **Member and Recipient Services:**
- 1-888-235-4673, 7 a.m.-6 p.m. Mon.-Sat.
- **24/7 Behavioral Health Crisis Line:**
1-833-353-2093
- **24/7 Nurse Line:**
1-888-369-2452
- **Website:**
<https://www.partnersbhm.org/tailoredplan>
- **NEMT:** 1-888-235-4673

Serving 14 Counties in North Carolina

Burke	Gaston
Cabarrus	Iredell
Catawba	Lincoln
Cleveland	Rutherford
Davie	Stanly
Forsyth	Surry
Union	Yadkin





PARTNERS
Improving Lives.
Strengthening Communities.

Member ID Card

Partners Tailored Plan
901 S. New Hope Rd.
Gastonia, NC 28092
www.partnersbhm.org

Name: John A. Barnasham
Medicaid ID# XXXXXXXXXXXX
NC Health Choice ID#: N/A
Date Issued: 07/01/2022

PCP Informaton:
 PCP Name
 PCP Address
 xxx-xxx-xxxx

This card is not a guarantee of eligibility, enrollment or payment

FRONT

Important Contact Information/Información importante de contacto

Member and Recipient Services/Servicio para miembros y destinatarios (7 a.m.-6 p.m. EST).....1-888-235-4673, TTY: 711
 Partners MemberCONNECT.....www.partnersbhm.org
 24-Hour Nurse Line/Línea de enfermería las 24 horas.....1-888-369-2452
 24-Hour Behavioral Health Crisis Line/Línea de crisis de salud conductual las 24 horas.....1-833-353-2093

If you suspect a doctor, clinic, home health service or any other kind of medical provider is committing Medicaid fraud, report it. Call 919-881-2320.

For a medical emergency, go to the nearest emergency room or call 911.

Prescriber Services (7 am-6 pm EST).....1-866-453-7196
 Provider Services (7 am-6 pm EST).....1-877-398-4145



Partners

BACK

PARTNERS MEMBER ID CARD

Tailored Plan: Partners Health Management

Role in NC Medicaid Managed Care

- Covers managed care for our most vulnerable citizens
- Physical health, mental health, substance use disorders, intellectual/developmental disabilities, pharmacy care
- Innovations and registry services
- Tailored care management
- Wellness programs
- Non-emergency transportation services for Medicaid

Role with NC Medicaid Direct

- Mental health, substance use disorders, intellectual/developmental disabilities, traumatic brain injuries, care management
- Medical services will be fee-for-service
- Non-emergency transportation is handled by DSS

Tailored Plan: Partners Health Management

How we work together

DSS Liaison planned activities, communications and member operations integration:

DSS Liaison: Tara Conrad | TConrad@PartnersBHM.org



Community training series



Collaborative health fairs (*DSS, health plans, ombudsman, enrollment broker*)



Large-scale campaigns (*social media, mailings, radio, billboards*)



Distribution of materials (*handbooks, brochures, wallet cards, other resources*)

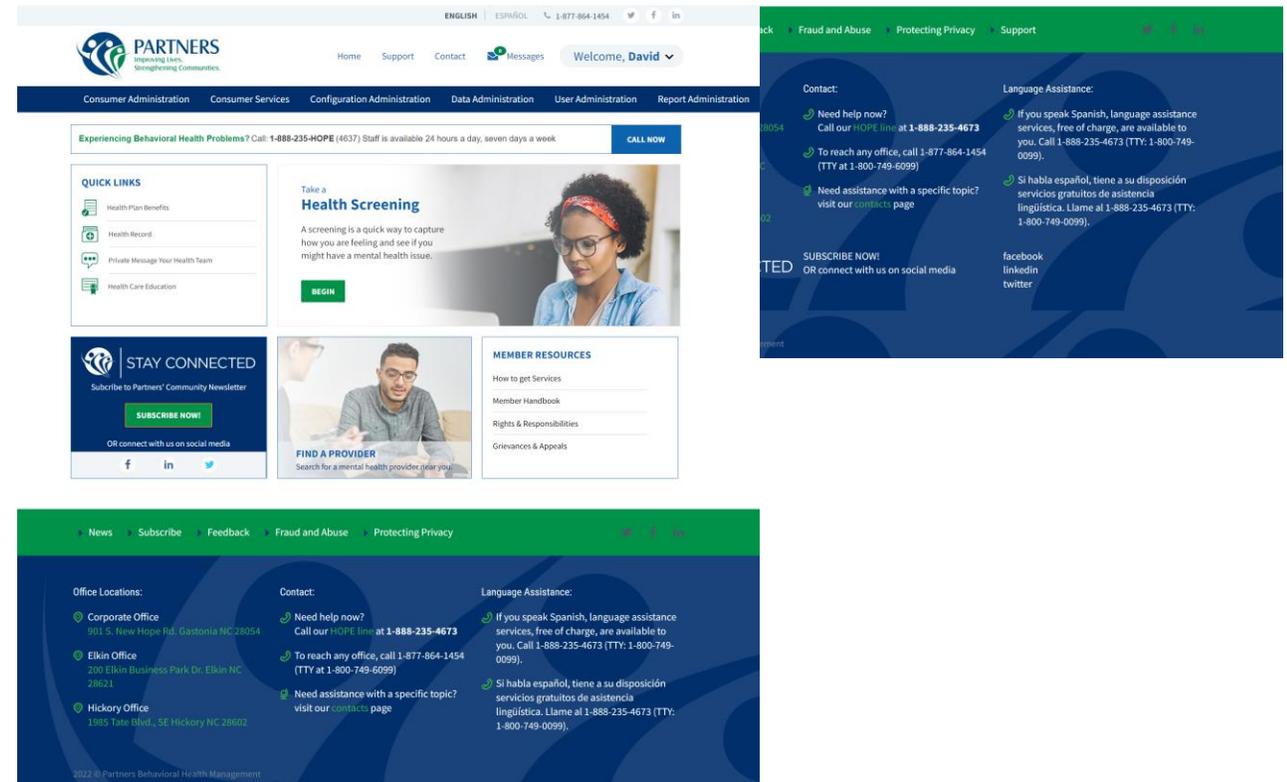
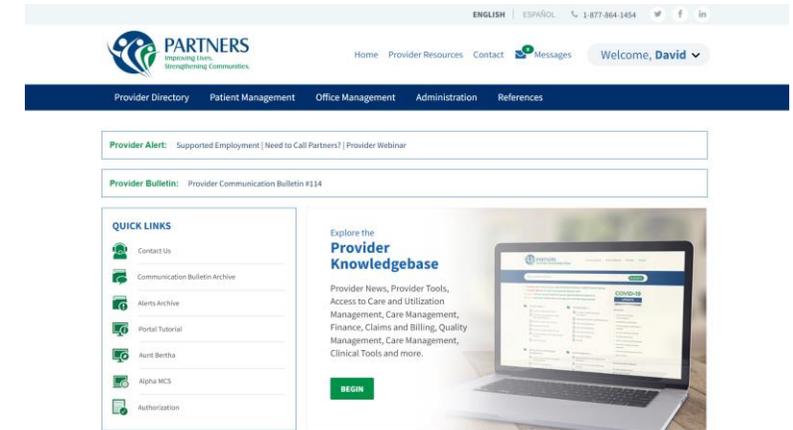
Tailored Plan: Partners Health Management

Website Navigation

- **Main website:** PartnersBHM.org
- **Tailored Plan website:** PartnersBHM.org/TailoredPlan

Key Features

- Member Medicaid Section
- Recipient State-funded Section
- Link to Member/Recipient and Provider Portals
- Resources Library
- Trainings Library
- Calendar of Events
- Newsletters





Tailored Plan: Sandhills Center
April 25th, 2022, 1:00 – 3:00 pm

DSS Liaison

Heather Renshaw

336-389-6424 | HeatherR@SandhillsCenter.org

Tailored Plan: Sandhills Center

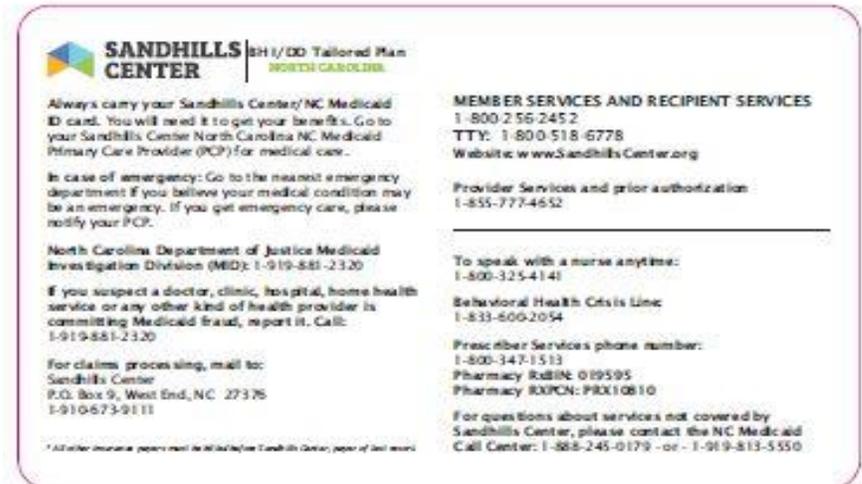
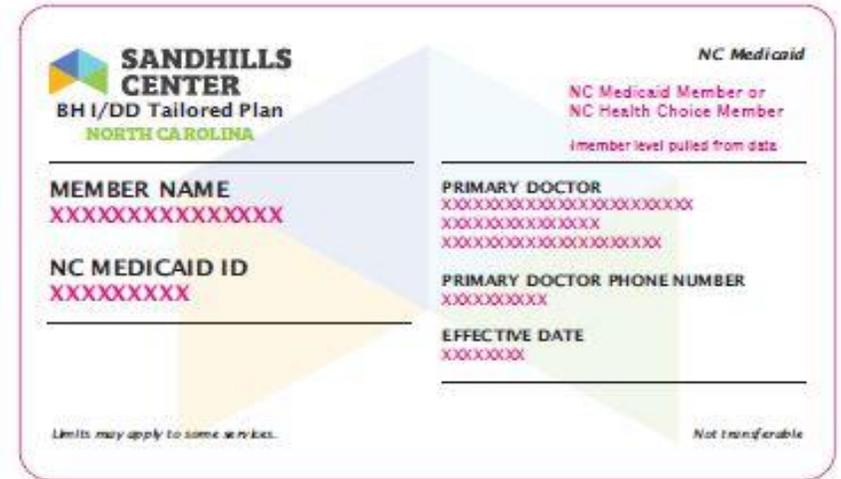
Presenters:

Jokena Islam – Customer Services Director
Heather Renshaw – DSS Liaison/Community Engagement Specialist
Heather Odendahl – Communications Specialist

Contact information:

- **Member & Recipient Service Line:**
- 1-800-256-2452 / TTY 1-866-518-6778 (24/7/365)
- **Behavioral Health Crisis Line:**
- 1-833-600-2054 (24/7/365)
- **Nurse Line:**
- 1-800-325-4141 (24/7/365)
- **Pharmacy Line:**
- 1-800-347-1513 (Mon.- Sat. 7 a.m. to 6 p.m.)
- **Non-emergency Medical Transportation Line:**
- 1-800-256-2452 / TTY 1-866-518-6778
- **Website:**
- www.SandhillsCenter.org
- **NEMT:** 1-800-256-2452

Counties Served: Anson, Davidson, Guilford, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond and Rockingham



Tailored Plan: Sandhills Center

Role in NC Medicaid Managed Care

- Manages integrated behavioral and physical health care.
- Assures that people in need have access to quality services in their communities.

Tailored Plan Services:

- Manage a Quality Provider Network
- Provide Tailored Care Management
- Access to 24/7/365 Support

Role with NC Medicaid Direct

- Manages behavioral health care for Medicaid members not in a Tailored Plan.
- Assures that people in need have access to quality services in their communities.

NC Medicaid Direct Services:

- Manage a Quality Provider Network
- Provide Care Coordination
- Access to 24/7/365 Support

Tailored Plan: Sandhills Center

How we work together

DSS Liaison

- Heather Renshaw – DSS Liaison/Community Engagement Specialist
 - 336-389-6424 | HeatherR@SandhillsCenter.org
- Collaborate with DSS designated staff and other local partners to provide information to members and potential members through educational and community events

Member Operations Integration

- Websites, brochures, posters, and streaming PPTs (where technology is available)
- Community presence
- Ensure collaborative relationships with partners

Tailored Plan: Sandhills Center

Website Navigation

- **Main website:** www.SandhillsCenter.org
- **Tailored Plan website:** www.SandhillsCenter.org (Same address)

Key Features

- Support Lines
- Member and Recipient Sections
- Provider Directory
- Contact Us and Grievance Forms
- Support Group Calendar
- News

The screenshot shows the Sandhills Center website homepage. At the top, there is a navigation bar with links for 'For Consumers and Families', 'For Providers', 'About Sandhills Center', 'News', 'Calendar', and 'Careers'. A search bar is located on the right. Below the navigation bar is a large banner image of a woman and a young boy. Overlaid on the banner is the text: 'Mental Health, I/DD and Substance Use Disorder Care for Individuals in 11 Central North Carolina Counties'. Below the banner are three main content boxes: 'Consumers & Families', 'Providers', and 'About Sandhills Center'. Each box contains a brief description and a 'Learn More' button. Below these boxes is a paragraph of text: 'Sandhills Center is a Local Management Entity-Managed Care Organization (LME-MCO) serving people in 11 counties in central North Carolina: Anson, Davidson, Guilford, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond and Rockingham. We have a robust network of providers who offer treatment and support for mental health, intellectual/developmental disabilities and substance use disorders. It is the goal of Sandhills Center to make treatment options available to those who need them, to enrich and support our Provider Network, and to contribute to the overall well-being of the communities we serve.' Below this text is a logo for 'TRANSFORMATION in North Carolina'. Further down is a green box with a red virus icon and the text: 'IMPORTANT INFORMATION FOR SANDHILLS CENTER MEMBERS AND PROVIDERS COVID-19 Resources. [Read more >](#)'. Below this are two columns: 'Featured News' and 'Upcoming Events'. The 'Featured News' column lists three news items with dates and brief descriptions. The 'Upcoming Events' column lists three events with dates and descriptions. At the bottom of the page is a footer with various links and logos, including URAC and the Sandhills Center logo. The footer also lists the counties served: Anson, Davidson, Guilford, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond, and Rockingham.



Tailored Plan: Trillium Health Resources
Monday, April 11th 2022, 1:00 – 3:00 pm

DSS Liaison

Sean Kenny

Sean.Kenny@trilliumnc.org

Tailored Plan: Trillium Health Resources

Presenter:

Sean Kenny, Head of DSS Engagement, Sean.Kenny@trilliumnc.org

Contact Information:

Member and Recipient Line

1-877-685-2415

- **Provider Support Line**

1-855-250-1539

- **Administrative and Business**

1-866-998-2597

- **Website**

www.trilliumhealthresources.org

- **NEMT:** 1-855-397-3612

- **Counties Served:** Beaufort, Bertie, Bladen, Brunswick, Camden, Craven, Chowan, Columbus, Currituck, Carteret, Dare, Gates, Hyde, Jones, Halifax, Hertford, Martin, Nash, New Hanover, Northampton, Onslow, Pender, Pamlico, Pitt, Pasquotank, Perquimans, Tyrrell, Washington



Behavioral Health Crisis Number: 1-866-990-9763
Member Services and Nurse Line: 1-877-685-2415 (TTY 711)
Provider Service Support Line: 1-855-250-1539
Prescriber Service Line: 1-866-245-4954
If you suspect a doctor, clinic, hospital, home health service or any other kind of health provider is committing Medicaid fraud, report it. Call (919) 881-2320.
For a full list of services and benefits available, please visit www.TrilliumHealthResources.org

Tailored Plan: Trillium Health Resources

Role in NC Medicaid Managed Care

- Trillium will manage Whole Person Care for members who experience Severe and Persistent Mental Illness, Severe Substance Use Disorders, Intellectual/Developmental Disabilities and Traumatic Brain Injury

Tailored Plan Services

- Non-emergency medical transportation (NEMT)
- Added Services
 - Gym Memberships
 - Tobacco Cessation
 - Asthma Relief
 - Recovery Support App
- Trillium also address unmet health related resource needs

Role with NC Medicaid Direct

- Trillium will continue to manage Mental health, substance use disorder (SUD) and intellectual/developmental disabilities (I/DD) services
 - Enhanced Services

Tailored Plan: Trillium Health Resources

How we work together

DSS Liaison

- Sean Kenny, Head of DSS Engagement | Sean.Kenny@trilliumnc.org
- DSS Communication Bulletins
- In-Person and Virtual trainings offered to DSS

Member Operations Integration

- The DSS Liaison is available for personal visits, “DSS Days”, and virtual meetings which will assist DSS.
- Our System of Care Coordinators will link community resources with each other on a continual basis.
- Trillium offers text alerts to members and care management.
- Trillium will offer Member Information Sessions.
- All activities focused on respecting the members integrity, culture, and independence.

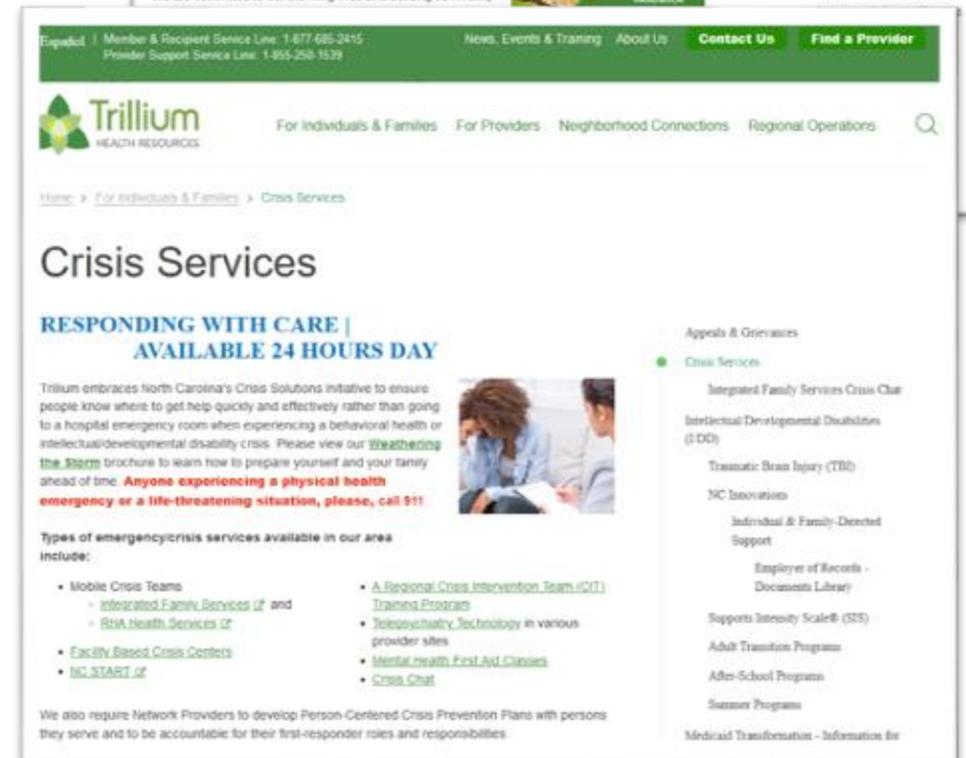
Tailored Plan: Trillium Health Resources

Website Navigation

- **Main website:** www.trilliumhealthresources.org
- **Tailored Plan website:** www.trilliumhealthresources.org (Same address)

Key Features

- How to select a provider
- Member Handbook
- New Member Orientation
- Benefits Plan and Service Definitions explanations
- Available in Spanish
- Member Communication Bulletins





VAYAHEALTH

Vaya Health Behavioral Health I/DD Tailored Plan
Thursday, April 21st 2022, 1:00 – 3:00 pm

DSS Liaison

Brian Shuping, BS, QMHP

Vice President, Community Relations

Brian.Shuping@vayahealth.com | 828-506-5759

Vaya Health Behavioral Health /DD Tailored Plan



Presenter / Key DSS Contact

Patty Wilson, VP of Learning & Development,
Patty.Wilson@vayahealth.com

Brian Shuping, VP of Community Relations and DSS Liaison
Brian.Shuping@vayahealth.com

Key Contact Information

- Member and Recipient Service Line: 1-800-962-9003
- Provider Support Service Line: 1-866-990-9712
- Pharmacy Service Line: 1-800-540-6083
- Nurse Line: 1-800-290-1623
- **24/7/365 Behavioral Health Crisis Line: 1-800-849-6127 (available for all residents of Vaya's 31 counties; do not have to be a Medicaid beneficiary)**
- Vaya Health website: www.vayahealth.com
- DHHS@vayahealth.com – point of contact for NCDHHS staff and officials; this email account is continuously monitored to ensure responsiveness

The logo for Vaya Health, featuring a stylized blue and white mountain range icon above the text "VAYAHEALTH" in a blue, sans-serif font.

200 RIDGEFIELD COURT
ASHEVILLE, NC 28806-2355

Member ID: _____ [NC Medicaid or NC Health Choice]

Member:
MEMBER NAME

PCP Name:
PROVIDER NAME
PCP Phone: 000-000-0000
PCP Address
City, State ZIP

Detailed benefit information is available at vayahealth.com

If you have a medical or life-threatening emergency, call 911 or go to a hospital emergency department immediately. For individuals who are hearing-impaired, dial 711 to reach NC Relay.

If you suspect a doctor, clinic, hospital, home health service or any other kind of health provider is committing Medicaid fraud, report it. Call 919-881-2320.

Member Portal: vayahealth.com
Member and Recipient Service Line: 1-800-849-6127 or TTY 711
Behavioral Health Crisis Line: 1-800-000-0000
Nurse Line: 1-800-000-0000
Provider Service Line: 1-800-000-0000
Prescriber Service Line: 1-800-000-0000

Vaya Health and YOU: Moving Forward Together

Vaya Health – Community Relations Directors



Dustin Burleson
dustin.burleson@vayahealth.com
828-467-1532



Shelly Foreman
shelly.foreman@vayahealth.com
828-508-9672



Zack Shepherd
zack.shepherd@vayahealth.com
336-984-8229



Elliot Clark
elliott.clark@vayahealth.com
919-608-7894



Angie Garner
angela.garner@vayahealth.com
828-606-2737



Cara Townsend-Dohner
cara.townsend-dohner@vayahealth.com
980-316-0043

Vaya Health Roles and Responsibilities



Role in NC Medicaid Managed Care

- Vaya Health is a local government entity and Behavioral Health I/DD Tailored Plan that will manage integrated, whole person health services and supports for Medicaid and NC Health Choice members starting Dec. 1, 2022
- **Medicaid Services include:**
 - Physical health care
 - Behavioral health (mental health and substance use disorder)
 - Pharmacy
 - Long-term services and supports (LTSS)
 - Innovations and TBI Waivers*
 - Tailored Care Management
 - Unmet health-related resource needs
- As a Tailored Plan, Vaya will also manage BH and IDD services for State-funded recipients, within available resources. State-funded services are not an entitlement, and do not include physical health, pharmacy, LTSS, or the Innovations or TBI waivers*.

Role with NC Medicaid Direct

- Vaya Health will manage behavioral health services for beneficiaries enrolled in NC Medicaid Direct
- **Services include:**
 - Mental Health
 - Substance Use Disorder
 - Intellectual and/or Developmental Disabilities (I/DD)
 - Innovations and TBI Waivers* (only for Tribal members who opt out of Managed Care)
 - Tailored Care Management

**The Traumatic Brain Injury (TBI) Waiver has not yet been expanded to Vaya's region. Once that expansion occurs, Vaya will also manage TBI Waiver services.*

Vaya Health – How we work with DSS

Brian Shuping, BS, QMHP, VP of Community Relations and DSS Liaison

- Has a deep understanding of the scope of services/ programs coordinated through local DSS offices.
- Serves as the primary liaison for any issues or concerns around Vaya's engagement with local DSS offices in Vaya's service area.
- Oversees a team of Community Relations Directors embedded in our local communities to ensure timely response to DSS concerns.
- Regularly meets with DSS Directors and attends Vaya Regional Board meetings, County Commissioner, HHS, and Social Services Board meetings, as well as other community events.
- **Primary contact to triage and escalate member-specific or Behavioral Health /DD Tailored Plan questions.**
- Collaborates with Vaya's Care Management (CM) and Provider Network Operations (PNO) departments to ensure regular cross-functional huddles between Vaya, DSS, providers, and community stakeholders.
- Collaborates with CM to ensure ongoing connection to embedded care management and proactive case staffing model.
- Collaborates with PNO to identify and solution any gaps or barriers for DSS-involved population served by Vaya.



Brian Shuping

Vaya Health Behavioral Health /DD Tailored Plan



- **Member and Recipient Operations Integration**
 - Community Relations works with Vaya's Member and Recipient Outreach and Engagement Team and Office of Communications to coordinate outreach and distribution of materials
 - Communications and member education occur through informational webinars, community events, website, web-based portal, text/ mail campaigns, and distribution of printed materials (approved by NCDHHS or adapted from NCDHHS materials) through a variety of mechanisms, as well as in-person, telephonic, and electronic communication
 - Guided by a person-centered approach and recovery-oriented model that values the uniqueness of members and recipients and provides access to resources they can use to make decisions about their health care and wellness goals



Vaya Health Behavioral Health /DD Tailored Plan

Website Navigation

- **Main website:** www.vayahealth.com
- **Tailored Plan website:**
www.vayahealth.com (Same address)



Screenshot is subject to change

Key Features

- For Members – Learn More, Get Help, Get Involved
- For Providers – Learning Lab, Authorization and Billing, and Electronic Visit Verification
- Use the menu navigation at the top of the website to find important information and portals
- Use the search box when additional help is needed and to find specific information





AmeriHealth *Caritas*[™]

North Carolina

Standard Plan: AmeriHealth Caritas

DSS Liaison

Brenda Radford, Director Member Engagement

Bradford@amerihealthcaritasnc.com

Standard Plan: AmeriHealth Caritas North Carolina

Presenters/Key Personnel

Brenda Radford, Director Member Engagement, DSS Liaison,
Bradford@amerihealthcaritasnc.com

Francheska Elliott, Manager Community Outreach

Contact Information

- **Member Services:** 855-375-8811 (TTY: 866-209-6421)
- **24/7 Nurse Line:** 888-674-8710
- **Behavioral Mental Health Support and Crisis Line:** 833-712-2262
- **Website:** <https://amerihealthcaritasnc.com>

Statewide Service Area


North Carolina

Member name [John L Doe]	Primary doctor [PCP first name, PCP last name] [Group name]
AmeriHealth Caritas North Carolina ID [XXXXXXXXXX]	PCP/Group address [Street Address] [City, State ZIP]
State ID: [XXXXXXXXXXXXXX]	PCP/Group phone number [X-XXX-XXX-XXXX]
	Effective date [MM/DD/YYYY]

Limits may apply to some services. Not transferable


North Carolina

To access your member portal, visit
www.amerihealthcaritasnc.com

Always carry your AmeriHealth Caritas North Carolina card. You'll need it to get your benefits. Go to your AmeriHealth Caritas North Carolina primary care provider (PCP) for medical care.	Member Services: 1-855-375-8811 TTY: 1-866-209-6421
Emergency department: Go to an emergency department near you if you believe your medical condition may be an emergency. If you get emergency care, please notify your PCP.	Provider Services and prior authorization 1-888-738-0004
North Carolina Department of Justice Medicaid Investigation Division (MID): 1-919-881-2320 (If you suspect a doctor, clinic, hospital, home health service or any other kind of medical provider is committing Medicaid fraud, report it. Call 1-919-881-2320.)	To speak with a nurse anytime 1-888-674-8710
AmeriHealth Caritas North Carolina 8041 Arco Corporate Drive Raleigh, NC 27617	Behavioral Health Crisis Line 1-833-712-2262
For claims processing mail to: AmeriHealth Caritas North Carolina Claims Processing P.O. Box 7380, London, KY 40742-7380	Pharmacy Provider Services 1-866-885-1406
	Pharmacy RxBIN #019505 Pharmacy RxPCN #PRX00801
	For questions about services not covered by AmeriHealth Caritas North Carolina, please contact the NC Medicaid Call Center at 1-888-245-0179 or 1-919-813-5550.

All other insurance payers must be billed before AmeriHealth Caritas North Carolina, payer of last resort.

Standard Plan: AmeriHealth Caritas North Carolina

How we work together

DSS Liaison

- Brenda Radford, Director Member Engagement
 - Bradford@amerihealthcaritasnc.com | 984-245-3504
- Regional presence with Wellness & Opportunity Centers
- Meet and Greet for local DSS leadership – Summer 2022

Member Operations Integration

- Educational Opportunities in the Wellness & Opportunity Centers
- Member Advisory Committees



AmeriHealth Wellness & Opportunity Centers

Asheville, Greensboro, Charlotte,
Fayetteville & Greenville

Standard Plan: AmeriHealth Caritas North Carolina

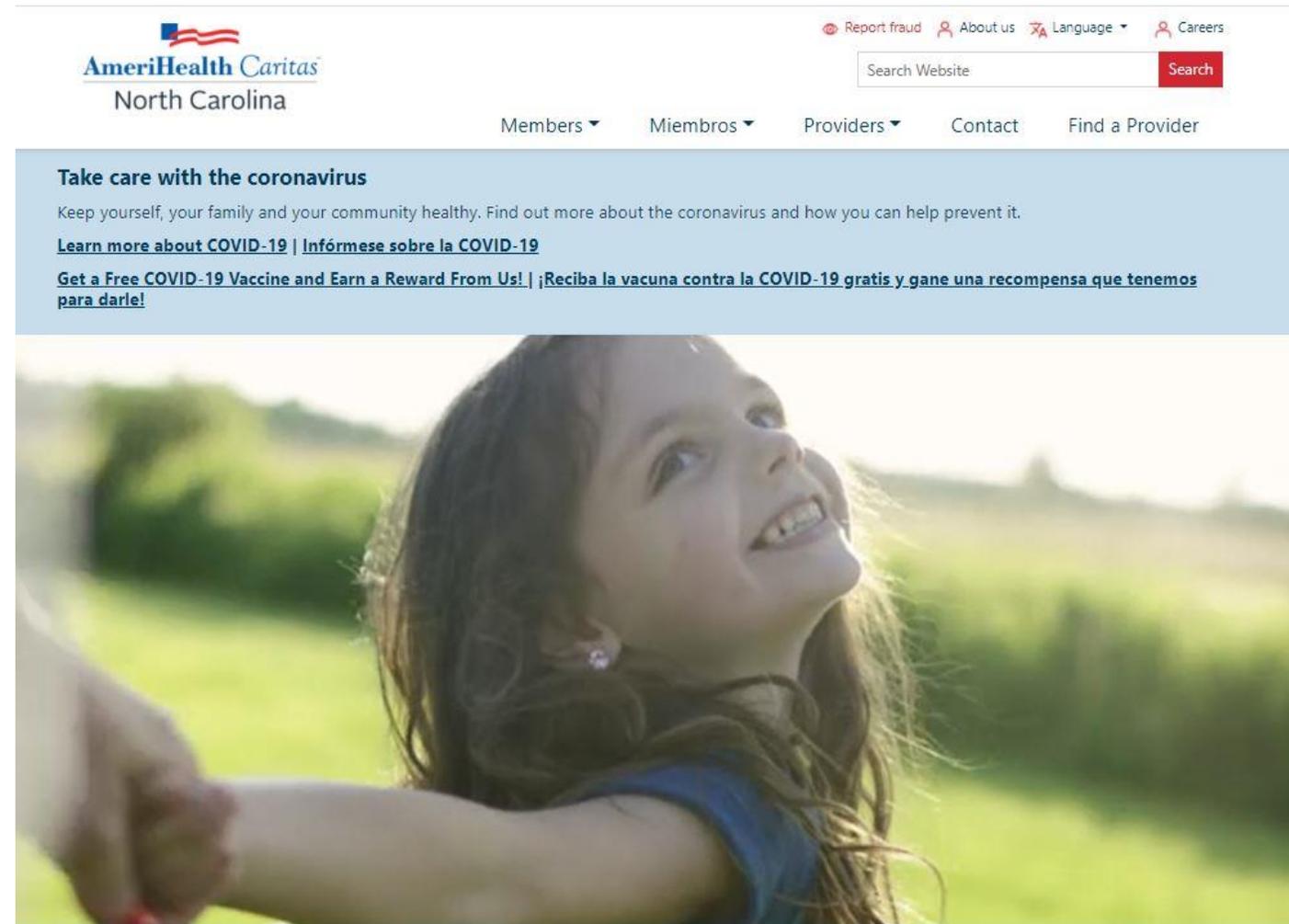
Website Navigation

- **Website:** <https://amerihealthcaritasnc.com>

Key Features

- Member website – handbook, benefits info, online provider directory, member newsletter
- Member portal
- Community pages under development – Member advisory councils, wellness & Opportunity Center locations, calendar of events

Social media – Facebook page
@amerihealthcaritasnorthcarolina





Standard Plan: Carolina Complete Health

DSS Liaison

Dr. Faith Samples

Director, Community Partnerships

Faith.L.Samples@carolinacompletehealth.com

Standard Plan: Carolina Complete Health

Presenters/Key Personnel

Dr. Faith Samples, Director, Community Partnerships | DSS Liaison

Ona George, Director, Customer Service

Lori Keane, Director, Marketing & Communications

Dr. Kim Purinton, Director, Medical Management Operations

Contact Information

- **Member Services:** 833-552-3876
- **Nurse Advice Line:** 833-552-3876
- **Behavioral Health Crisis:** 855-798-7093
- **Website:** carolinacompletehealth.com

Counties Served

- **Region 3:** Alexander, Anson, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Rowan, Stanly, and Union counties.
- **Region 4:** Alamance, Caswell, Chatham, Durham, Franklin, Granville, Johnston, Nash, Orange, Person, Vance, Wake, Warren, and Wilson counties.
- **Region 5:** Bladen, Brunswick, Columbus, Cumberland, Harnett, Hoke, Lee, Montgomery, Moore, New Hanover, Pender, Richmond, Robeson, Sampson, and Scotland counties.



carolina complete health. 10101 David Taylor Dr. Suite 300
Charlotte, NC 28262

Name/Nombre: LUKE S HARPER RX: Envolv Pharmacy Solutions
Member ID#: 951623929N RXBIN: 004336
Date of Birth/Fecha de Nacimiento: 09/23/2010 RXPCN: MCAIDA DV
 RXGRP: RX5480

Effective/Efectivo a partir de: 07/01/2021 MEMBER PORTAL/PORTAL PARA AFIADOS:
AMH/PCP Name/Nombre del AMH/PCP: Lumberton Childrens Clinic PA CarolinaCompleteHealth.com

AMH/PCP Address/Dirección del AMH/PCP: Medicaid
400 Liberty Hill Road
Lumberton NC 28358

AMH/PCP Phone Number/Número de teléfono del AMH/PCP: 910-739-3318



IMPORTANT CONTACT INFORMATION / INFORMACIÓN IMPORTANTE DE CONTACTO
Members/Afiados:
Call 1-833-552-3876 (TTY: 711) for **Member Services** / Servicios para afiliados and
24/7 Nurse Advice Line / Línea de consejo de enfermería que atiende 24/7
Call 1-855-798-7093 for **Behavioral Health Crisis Line** / Línea de crisis de salud mental

Providers: Call 1-833-552-3876 for
Provider Service Line - Prescriber Service Line - Prior Authorization
Pharmacy Help Desk: 1-833-992-2785 **Pharmacy Prior Authorization:** 1-833-585-4309
Pharmacy Paper Claims: P.O. Box 989000, West Sacramento CA 95798
All Medical Claims: Carolina Complete Health, PO Box 8040, Farmington, MO 63640-8040

If you suspect a doctor, clinic, hospital, home health service or any other kind of medical provider is committing Medicaid fraud, report it. Call 1-919-881-2320. Some services are carved out. A full list of benefits can be found in the Member Handbook at **CarolinaCompleteHealth.com**.

Si sospecha que un médico, clínica, hospital, servicio de atención médica en el hogar o cualquier otro tipo de proveedor médico está cometiendo fraude contra Medicaid, infórmelo. Llame al 1-919-881-2320. Algunos servicios están excluidos. Puede encontrar una lista completa de beneficios en el Manual para afiliados de **CarolinaCompleteHealth.com**.

NOTE: Carolina Complete Member ID Card as of 2/28/22. Card will be updated by 7/1/22 to reflect change in PBM.

Standard Plan: Carolina Complete Health

How we work together

DSS Liaison

- **Dr. Faith Samples | Faith.L.Samples@carolinacompletehealth.com**
- CCH works with local DSS offices to provide both in-person and virtual educational events on Medicaid Transformation for beneficiaries.
- Co-host events with community partners and DSS offices to highlight plan benefits, Value Added Services and resource supports to meet the needs of members.

Member Operations Integration

- CCH is the only Provider-Led Medicaid Managed Care Plan, established through a joint venture between the Centene Corporation, the North Carolina Medical Society (NCMS), and the North Carolina Community Health Center Association (NCCHCA). This represents a collaboration between the nation's largest Medicaid Managed Care Organization (Centene) and local doctors (NCMS and NCCHCA).
- Through a large network of doctors and other providers, CCH provides Standard Plan benefits, including primary care doctor visits, emergency/urgent care, and prescription drug coverage. In addition, CCH's provides Value-Added Services to support holistic health and include educational support for children with school supplies and online tutoring, youth development and afterschool programs, new mother support including education and tangible resources such as a car seat, breast pump or diaper bag.
- CCH's Community Health Workers support health equity and Social Determinants of Health by coordinating assistance and resources for members to find safe/affordable housing, address food insecurity, provide resources for social justice issues, and more.

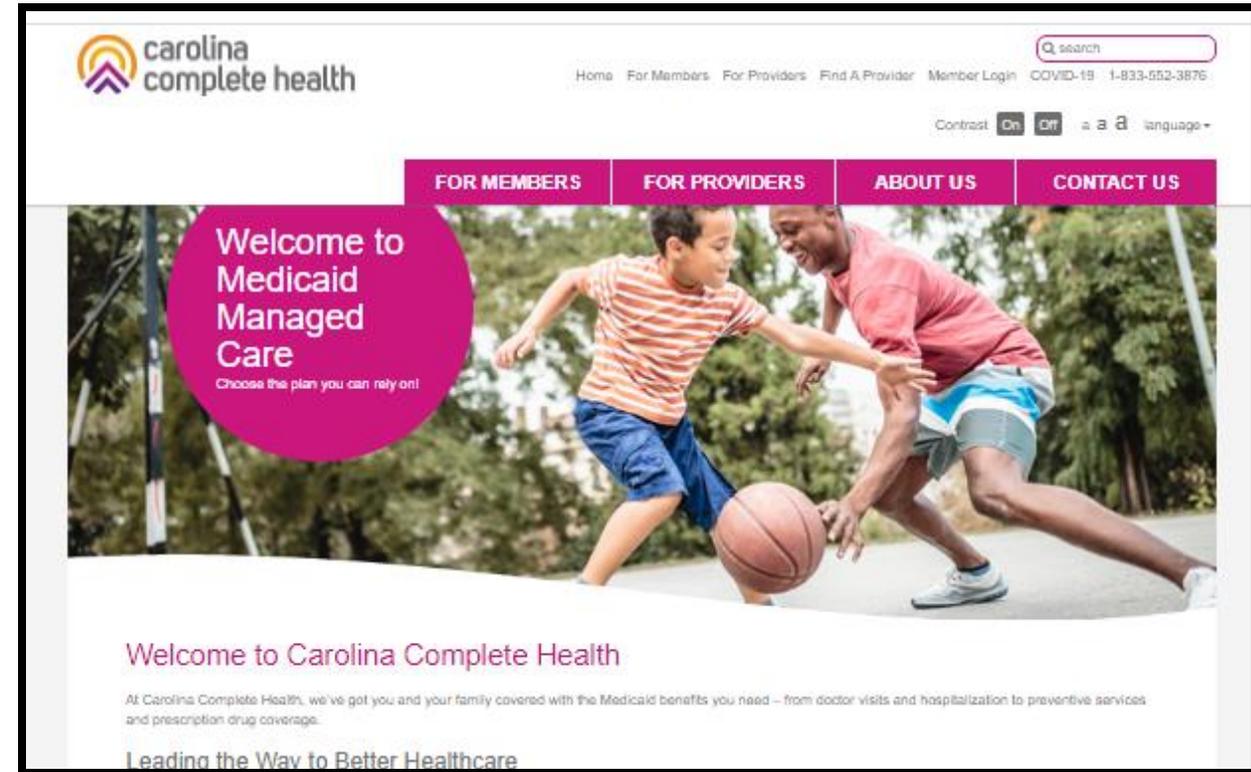
Standard Plan: Carolina Complete Health

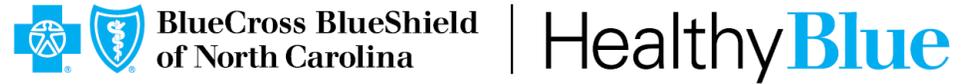
Website Navigation

- Website: www.carolinacompletehealth.com

Key Features

- 24/7 access
- View claims, change primary care provider, and request a new member ID card through secure member portal.
- Get up-to-date COVID-19 testing and vaccination information through the CDC and NC DHHS links.
- Access to plan benefit information and resources.
- Web forms to easily request Value-Added Services online.
- Find a Provider online search tool.
- Member Handbook and other materials.
- Plan contact information.





Standard Plan: Healthy Blue

DSS Liaison

Kristy Kent | Kristy.Kent@bcbsnc.com

Standard Plan: Healthy Blue

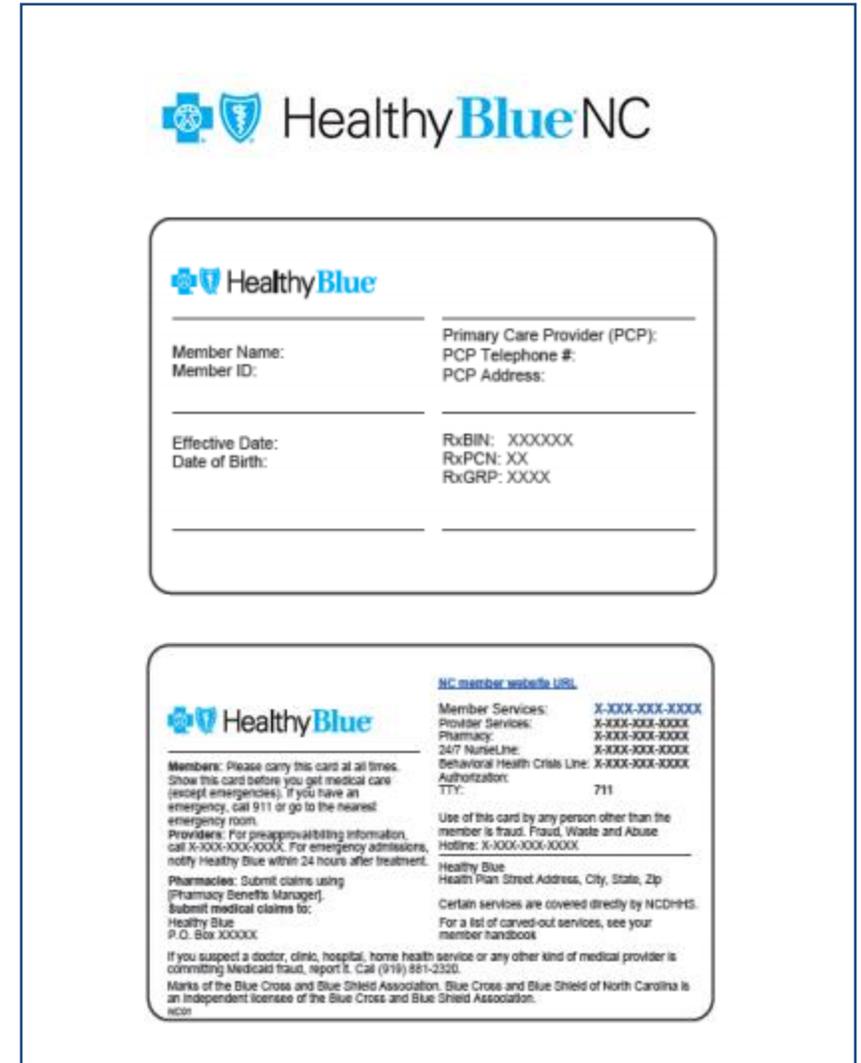
Presenters:

- María Franklin – Director of Behavioral Health Services
- Dr. Steven Bentsen – Behavioral Health Medical Director
- Andrea Smith-McAdoo – Manager, Behavioral Health Crisis Line

Contact Information:

- **Member Services**
(844) 594-5070 (TTY 711)
- **Nurse Line**
(844) 545-1427 (TTY 711)
- **Behavioral Health Crisis Line**
(844) 594-5076 (TTY 711)
- **Provider Services**
(844) 594-5072
- **Website**
www.healthybluenc.com

Serving Medicaid and NC Health Choice members in all 100 North Carolina counties.



Standard Plan: Healthy Blue

How we work together

DSS Liaison

- **Kristy Kent** | DSS Liaison
 - Kristy.Kent@bcbsnc.com
- In development:
 - Initiatives to support whole person health / whole family unit health
 - Initiatives to support suicidality trends among minors

Member Operations Integration

- Ongoing transition of care and warm handoff activities with LME/MCOs
- Discharge planning and transition from one level of care to next
- Engagement with all 100 Crisis Continuum and Collaborative for Children, Youth and Families forums
- Case Management services including coordination with Advanced Medical Homes when applicable
- Coordination with nurse case management to address medical needs

Standard Plan: Healthy Blue

Website Navigation

- **Website:** www.healthybluenc.com

Key Features

- **Benefits**
 - ✓ Healthy Blue Benefits
 - ✓ Pharmacy and Prescriptions
 - ✓ Member Materials
- **Care**
 - ✓ Find a Doctor
 - ✓ Get the Care You Need
- **Get Help**
 - ✓ Local resources (including Community Resource Link)
 - ✓ Health and Wellness resources
 - ✓ Useful apps



Medicaid and NC Health Choice in North Carolina



 FIND A DOCTOR

 CHANGE YOUR PCP

 HOW TO ENROLL

North Carolina launched Medicaid Managed Care July 1, 2021.

Don't wait to vaccinate



Standard Plan: UnitedHealthcare Community Plan of North Carolina

DSS Liaison

Keith Funderburk

keith_funderburk@uhc.com | 336-207-8603

Standard Plan: UnitedHealthcare Community Plan of North Carolina

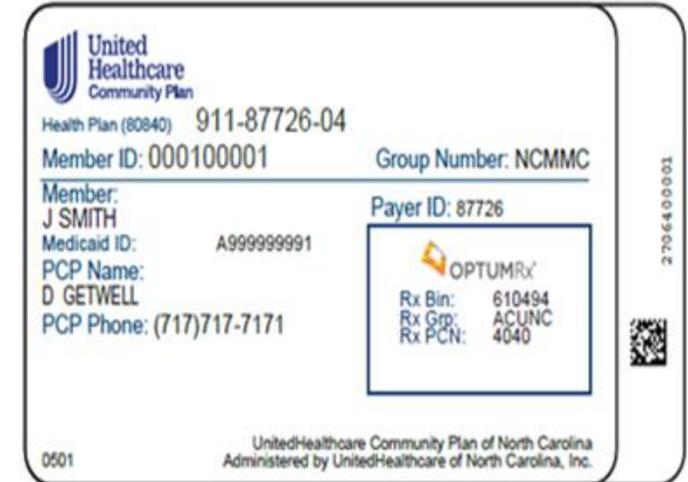
DSS Liaison Point of Contact:

Keith Funderburk	336-207-8603	Mon–Fri 8-5	Keith_Funderburk@uhc.com
------------------	--------------	-------------	--------------------------

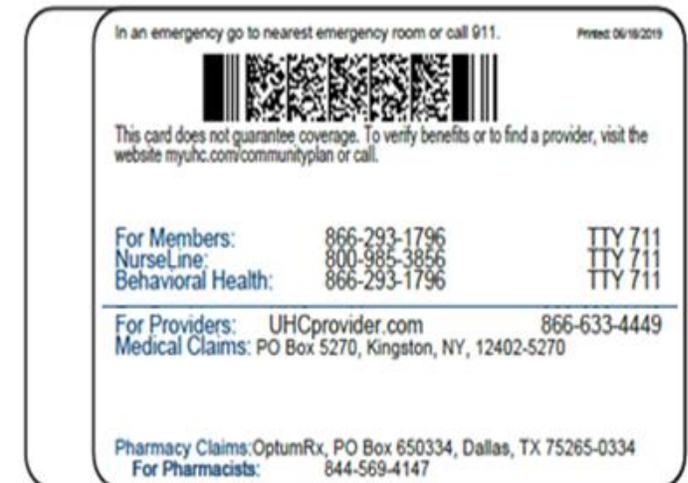
Service Line Information:

Member Service Line	800-349-1855, TTY 711	Mon-Sat 7-6; open Holidays	myuhc.com
Provider Service Line	800-638-3302	Mon-Sat 8-6	UHCprovider.com
Pharmacy Service Line	855-258-1593	Mon-Sat 7-6	
Behavioral Health Crisis Line	877-334-1141	24/7	
Nurse Line	855-202-0992	24/7	

Front of Card



Back of Card



Standard Plan: UnitedHealthcare Community Plan of North Carolina

How we work together to keep the Member in the center of all that we do

Mission: Helping people live healthier lives and building healthier communities.

Core Values that drive community engagement in North Carolina

- **Integrity:** We commit to the application of a health equity focused lens in all that we do and serve all North Carolina communities with integrity.
- **Compassion:** We seek and foster diversity in thought, voices and experiences to support statewide culturally competent care.
- **Performance:** We commit to the collection and use of disparities data to improve the health of our members and will allow that data to inform the development of strategy, programs, key initiatives and interventions for our local communities.
- **Innovation:** We will ensure strategic alignment with internal and external stakeholders to develop an innovative approach to addressing disparities.
- **Relationships:** We will engage with communities to understand unique needs that are contributing to disparities and poor health outcomes at the community level.

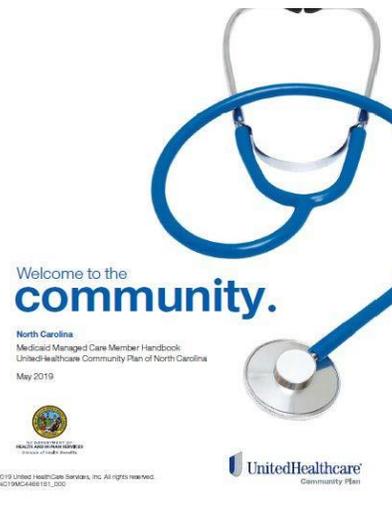
Standard Plan: UnitedHealthcare Community Plan of North Carolina

UnitedHealthcare is committed to focusing on whole-person centered, and a well-coordinated system of care for our members that address both medical and non-medical drivers of health. We engage with our members in a variety of ways, including but not limited to, Personalized New Member Outreach, Member Orientations, Community Events, Provider Collaborations.

New Member Welcome Kit



Handbook



Newsletter



Mobile Office



Care | Tailored Plan Cross-Functional Training



Standard Plan: UnitedHealthcare Community Plan of North Carolina

Website: <https://www.uhccommunityplan.com/nc/medicaid/medicaid-uhc-community-plan>

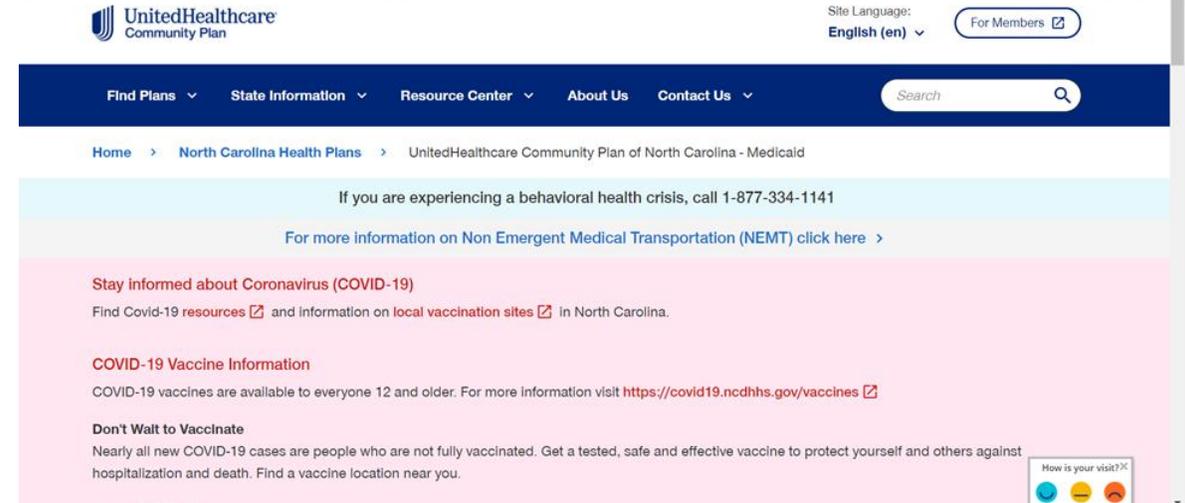
Member Portal

- View or print ID cards
- Search for in-network providers
- View benefits
- View claims
- View Health & Wellness content
- Change member communication delivery preferences
- View FAQs
- Contact member services

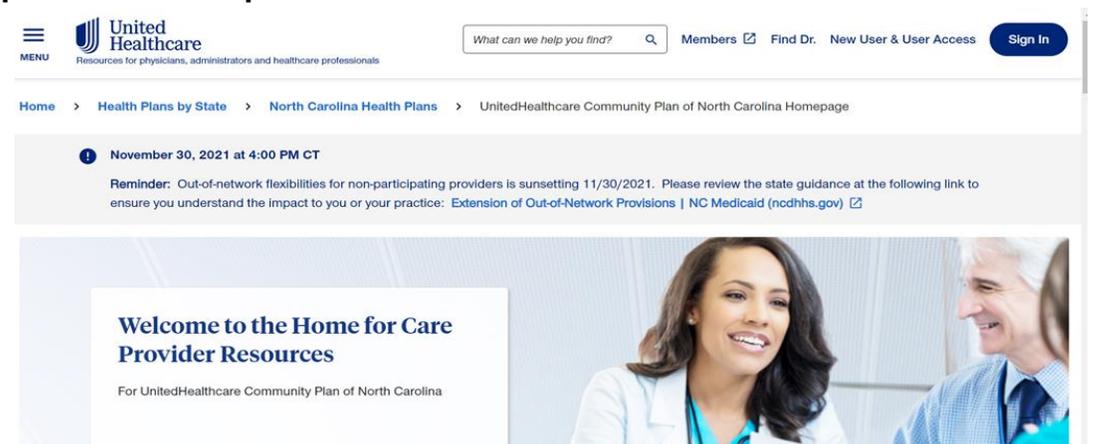
Provider Portal

- Prior authorization and notification resources
- Current policies and clinical guidelines
- Provider Administrative Manuals and Guides
- Claims and payments
- Pharmacy resources
- Provider forms and resources
- Bulletins and newsletters

<https://www.uhccommunityplan.com/nc/medicaid/medicaid-uhc-community-plan>



<https://www.uhcprovider.com/en/health-plans-by-state/north-carolina-health-plans/nc-comm-plan-home.html>





Standard Plan: WellCare of North Carolina, Inc.

DSS Liaison

Shaune Lancit

Shaune.Lancit@wellcare.com



DSS Liaison

- Shaune Lancit | Shaune.Lancit@wellcare.com
- Listening sessions with DSS quarterly for touch-base and to identify concerns and opportunities for seamless integration.
- Regular e-mails including updates and opportunities for collaboration

Member Operations Integration

- Community-based teams located regionally with one single point of contact for all agencies
- Rapid escalation process for immediate/urgent solutioning
- Regular meetings with agencies on monthly and/or quarterly basis to understand member issues and challenges, and incorporate feedback into member education and engagement strategy and materials.
- Ad-hoc meetings if/when needed to collaboratively address any process improvement needs and facilitate issue resolution



Member Contact Information

- **Service Lines Telephone Number: 1-866-799-5318**
 - Member Service, Provider Support, Pharmacy Service Line
 - Normal Hours: Monday – Saturday 7am-6pm EST, Open all State Holidays
 - Emergency Member Issues: 24 hours a day, seven days a week, 365 days per year
- **Nurse Line: 1-800-919-8807**
 - 24 hours a day, seven days a week, 365 days per year
- **Behavioral Health Crisis Line: 833-207-4240**
 - 24 hours a day, seven days a week, 365 days per year (24/7/365)
- *Note: All lines also accessible via Service Line Number*

Outreach Events

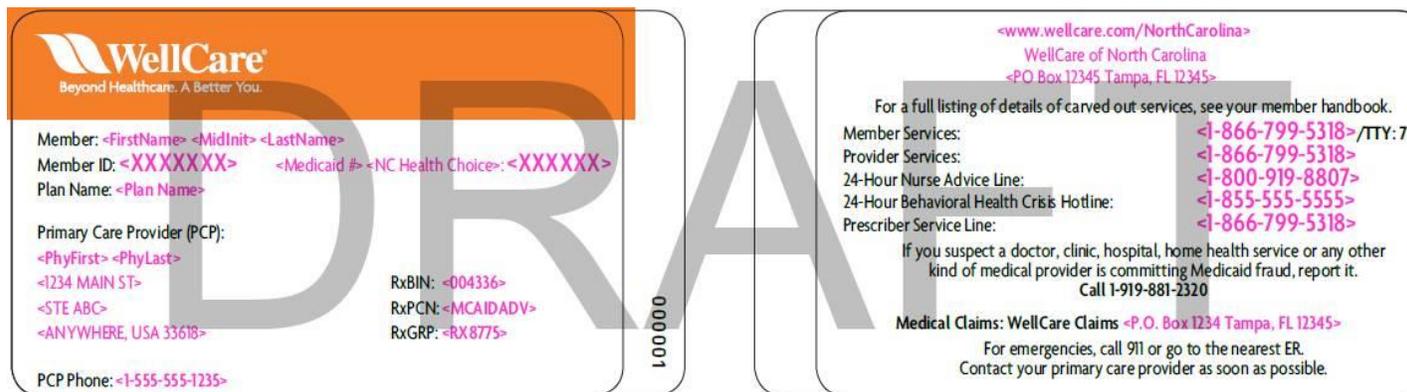
- Back to School Fairs, Faith-based Events, County Fairs, Local Festivals, Sports Leagues, and Large Community Events
- Pop-Up Welcome Rooms and collaboration and on the ground presence via statewide and local community partners: YMCA, Community Action Agencies, Urban Ministries, Head Start, Communities in Schools
- WellCare Signature Events and health-focused events to bring additional opportunities for health to the local community

WellCare of North Carolina, Inc.

Member Communications

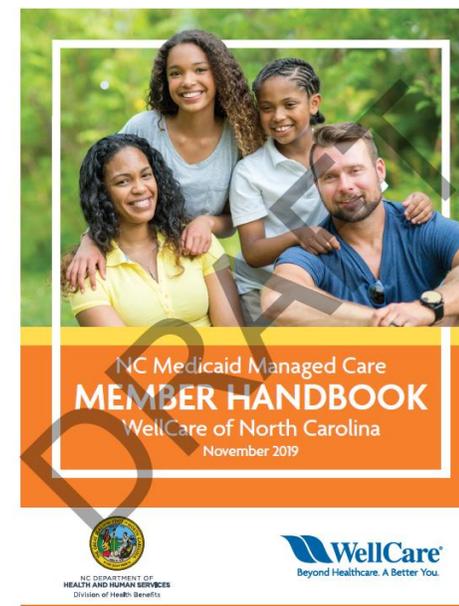


ID Cards



Member Handbook/ Welcome Packet

- Included in Welcome Packet: Welcome Letter, ID Card, and Member Handbook



WellCare of North Carolina, Inc.

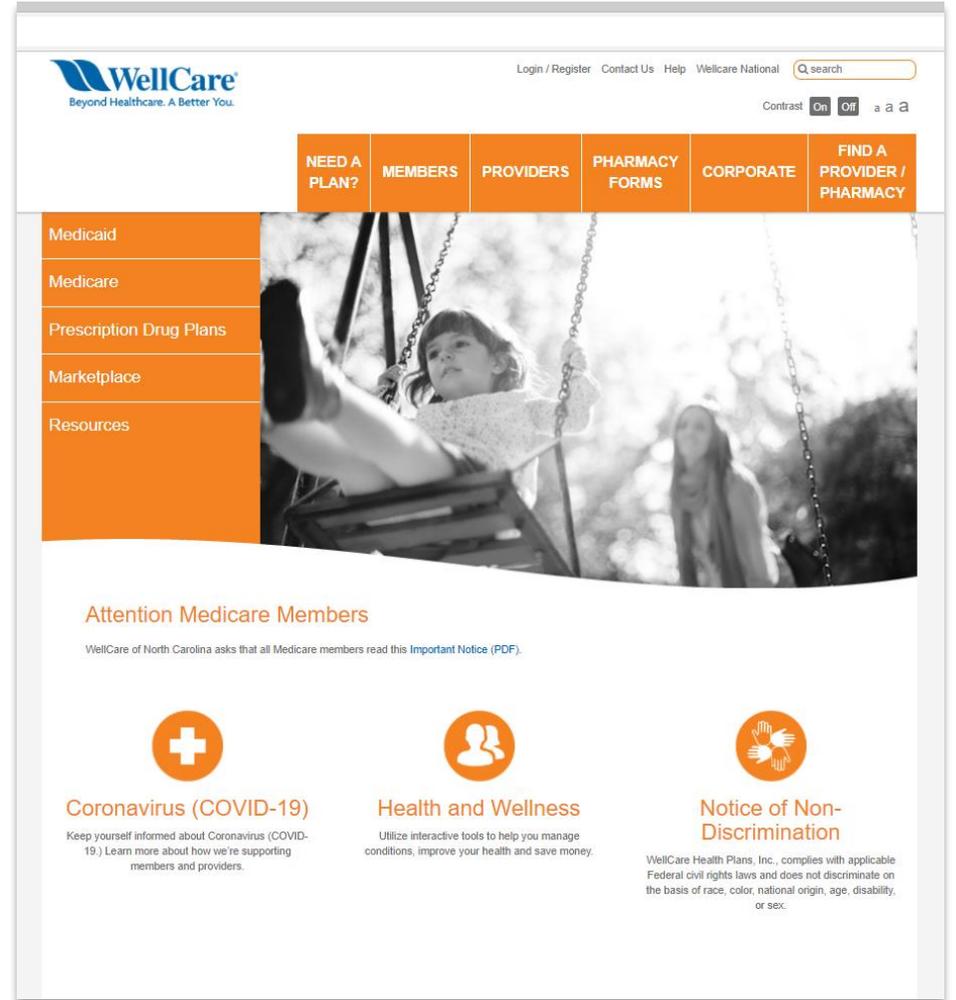
Website Navigation

Standard Plan Website Navigation

- Main Website: www.wellcare.com
- North Carolina Medicaid Website: www.wellcare.com/nc

Key Features

- Secure Member Provider and Secure Provider Portal
 - Access to Care Needs Screenings and ICPs
 - ID Card Requests and Images
 - Address changes, PCP Changes
- Landing pages for targeted marketing and text messaging campaigns
- Onboarding materials and training for members and providers





EBCI TRIBAL OPTION

EBCI Tribal Option

EBCI Tribal Option

- **Presenters:**

Karen Kennedy, EBCI Tribal Option Director

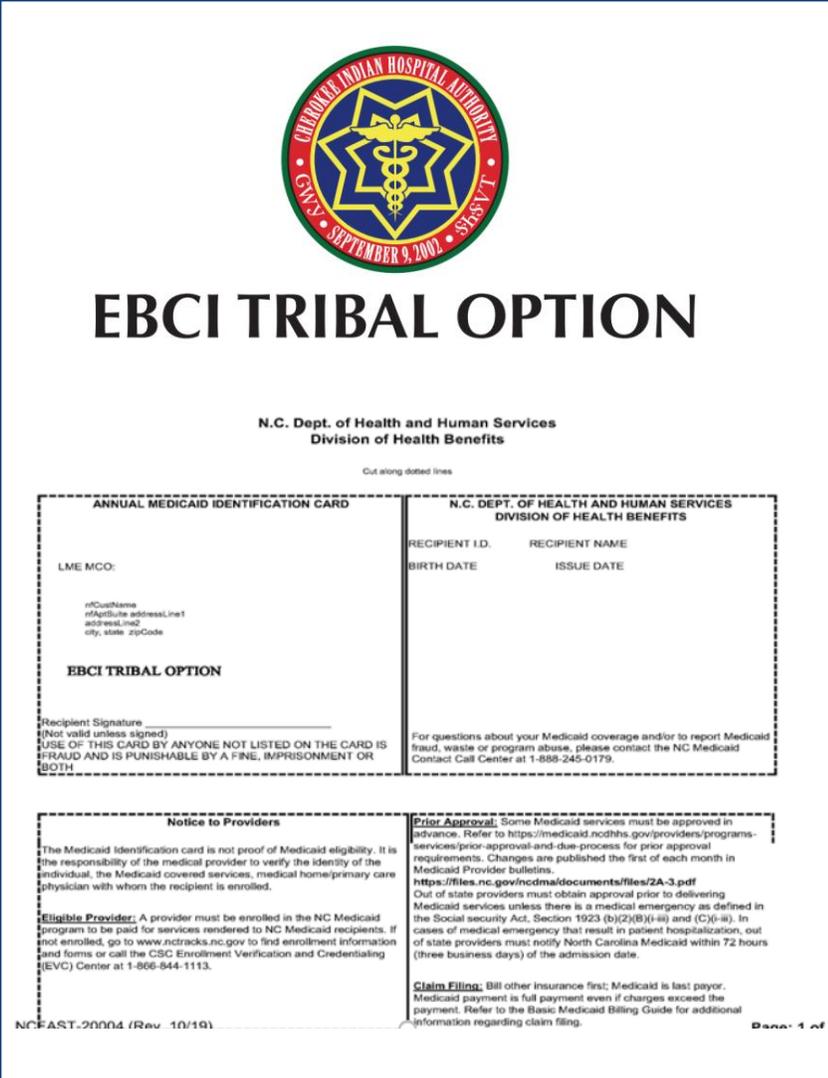
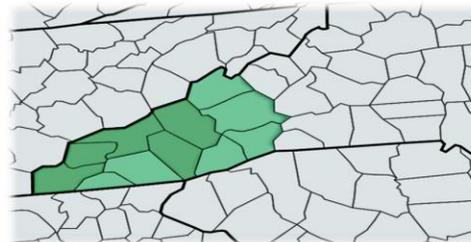
Gwynneth Wildcatt, EBCI Tribal Option Member Services Manager

- **241 Cherokee Hospital Loop, Cherokee, NC 28719**

- **Member Services Line: 1-800-260-9992 (TTY 711)**

- **Website:** www.EBCITribalOption.com

- The EBCI Tribal Option manages the health care for North Carolina's approximately 4,000 tribal-eligible Medicaid beneficiaries, primarily in Cherokee, Haywood, Swain, Jackson, and Graham counties. Eligibility extends to neighboring counties when applicable.



The image shows a Medicaid Identification Card for the EBCI Tribal Option. At the top center is the logo of the Cherokee Indian Hospital Authority, featuring a caduceus and the text "CHEROKEE INDIAN HOSPITAL AUTHORITY" and "SEPTEMBER 9, 2001". Below the logo is the title "EBCI TRIBAL OPTION" in large, bold, black letters. Underneath the title is the text "N.C. DEPT. OF HEALTH AND HUMAN SERVICES" and "Division of Health Benefits". A small note says "Cut along dotted lines". The card is divided into two main sections by a dotted line. The left section is titled "ANNUAL MEDICAID IDENTIFICATION CARD" and contains fields for "LME MCO:", "nClientId", "nAffiliate addressLine1", "addressLine2", "city, state zipCode", and "EBCI TRIBAL OPTION". Below these fields is a line for "Recipient Signature" with a note "(Not valid unless signed)". The right section is titled "N.C. DEPT. OF HEALTH AND HUMAN SERVICES" and "DIVISION OF HEALTH BENEFITS" and contains fields for "RECIPIENT I.D.", "RECIPIENT NAME", "BIRTH DATE", and "ISSUE DATE". Below these fields is a note: "For questions about your Medicaid coverage and/or to report Medicaid fraud, waste or program abuse, please contact the NC Medicaid Contact Call Center at 1-888-245-0179." At the bottom of the card, there are two sections: "Notice to Providers" and "Prior Approval". The "Notice to Providers" section states that the card is not proof of eligibility and that providers must verify the recipient's identity. The "Prior Approval" section states that some Medicaid services must be approved in advance and provides a link to the Medicaid website. At the very bottom, it says "NCEAST-20004 (Rev. 10/19)" and "Page 1 of 1".

EBCI Tribal Option

- **How we work together**

- **Who we are**

- The EBCI Tribal Option is a health care option managed by the Cherokee Indian Hospital Authority to meet the primary care management and coordination needs of federally recognized tribal members and others eligible for services through Indian Health Service (IHS).
- The EBCI Tribal Option, is founded on principles such as:
 - *U wa shv u da nv te lv* (The One Who Gives from Their Heart); *Di qwa ste li l yu n(i) s di* (Like My Own Family to Me); *To Hi* (A State of Peace and Balance); *Ni hu tsa tse li* (It Belongs to you)
- Providing care coordination services in a culturally congruent system that leverages the collective strengths of a fully integrated health system, Tribal community, and regional partners to ensure the health of the next seven generations of the Cherokee people.

- **Member Operations Integration**

- Member Engagement and Outreach Materials are placed on the website and sent to EBCI Tribal Option providers offices.
- EBCI Tribal Option participates in local community events to perform outreach to members.
- Member Services Team meets weekly with Tribal Public Health and Human Services, Resource Corporation of America, the Enrollment Broker, and others to collaborate on Member Education, Engagement, and Outreach Opportunities.

EBCI Tribal Option

Website Navigation

- Website: www.EBCITribalOption.com

Key Features

- The EBCI Tribal Option website is easy to navigate, with tabs at the top of the screen for About, Care Management, For Members, For Providers, News, and Contact.
- For Members includes Member Engagement & Outreach Materials, the Member Handbook, and the Provider Directory, among other member specific materials.
- For Providers includes the Provider Manual, Provider Grievances & Appeals processes, and Tribal Option Performance Measures, among other provider specific materials.

The image displays three screenshots of the EBCI Tribal Option website. Each screenshot shows the website's header with the EBCI logo, contact information (MEMBER/PROVIDER: 800.260.9992), a search bar, and navigation tabs (ABOUT, CARE MANAGEMENT, FOR MEMBERS, FOR PROVIDERS, NEWS, CONTACT). A language selection dropdown is also visible.

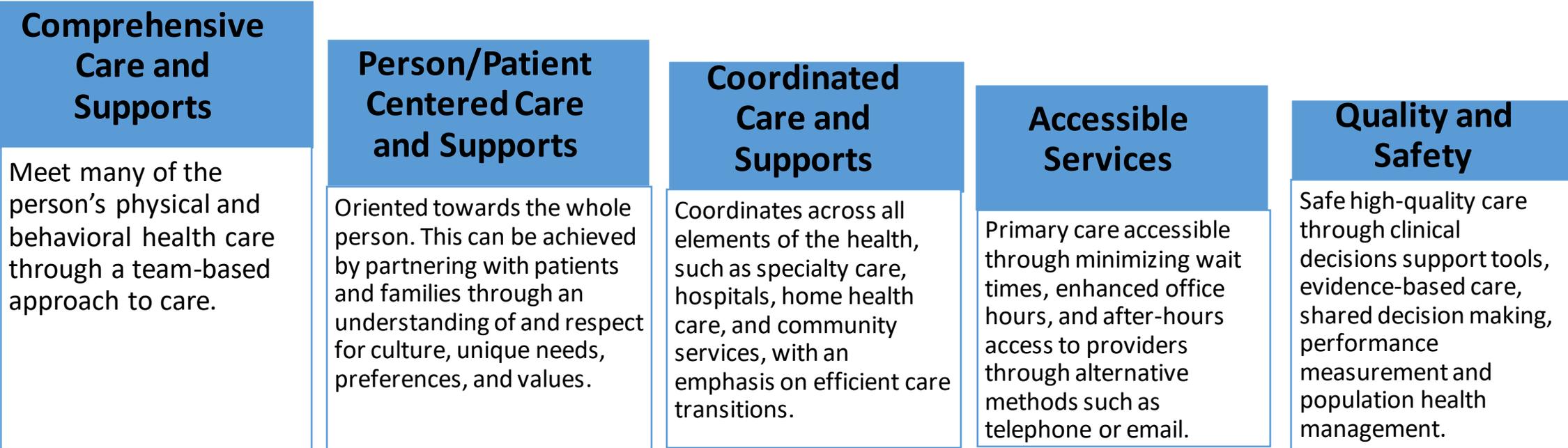
Top Screenshot: The main content area features an illustration of a doctor and a patient. The text reads: "With EBCI Tribal Option, you get your very own Care Manager." It explains that managing healthcare can be difficult and that EBCI Tribal Option provides a Care Manager to coordinate services. It also states that the Care Manager is a specially trained health professional who works with members, doctors, and other providers to ensure they get the right care and support.

Middle Screenshot: The "FOR MEMBERS" section is highlighted. It lists "Member Engagement & Outreach Materials", "Member Rights and Responsibilities", "Health Promotion and Education", and "Member Grievances and Appeals". To the right, there is an illustration of a doctor and a patient, and the Cherokee text "h̄əCVŋ (Ni hi tsa tse li) 'It belongs to you.'" followed by the text: "We believe our healthcare services belong to the people—a generational gift. EBCI Tribal Option is a steward of that inheritance, charged with safeguarding it and providing it to patients/members when and how they need it."

Bottom Screenshot: The "FOR PROVIDERS" section is highlighted, listing "Provider Grievances and Appeals" and "News". To the right, there is an illustration of a laptop, a smartphone, and a stethoscope. The text reads: "Evidence-based care is our standard." and "This assures the prosperity of the next seven generations of the Eastern Band of Cherokee Indians. We do this by working together to help each member achieve physical, mental, emotional, and spiritual wellness."

EBCI Tribal Option Care Management

- The Care Managers are responsible for care management for the Tribal Option members regardless of the location of the person’s primary care office. The primary care services can be provided by the providers in CIHA or those primary care offices located in the surrounding counties.
- Care Management models all have 5 key functions:





Community Care
OF NORTH CAROLINA

Community Care of North Carolina (CCNC)

Community Care of North Carolina (CCNC)

Presenters:

- **Anna Boone**, Executive Director, aboone@communitycarenc.org
- **Kimberly Deberry**, Director of Maternal and Child Health, kdeberry@communitycarenc.org

<https://www.communitycarenc.org/>

Role in NC Medicaid Direct

Care management services include:

- New enrollee education
- Inbound call center for member needs
- Care needs screening related to social determinants of health
- Care coordination and resource linkage
- Comprehensive assessment for complex patients
- Care planning
- ED follow-up and transitional care following hospital discharge
- Medication reconciliation
- Care gap closure
- Disease management and education
- Collaboration with stakeholders and community organizations
- Risk stratification



Community Care of North Carolina (CCNC)

How we work together

DSS Liaison

- **Foster Care Outreach Specialist:**

Susan Vaudreuil - Regions 1, 3, 5	Delvin Campbell - Regions 2, 4, 6
svaudreuil@communitycarenc.org	dmcampbell@communitycarenc.org

- DSS training on Care Management services
- DSS VirtualHealth HELIOS Provider Portal training
- Assist DSS with Resource Parent Night training on Care Management Services
- Assist DSS with Guardian Ad Litem training on Care Management Services
- County Stakeholder meetings to focus on improving process and collaboration

Member Operations Integration

- CCNC care managers may assist members or providers in working with DSS to identify and address enrollment issues
- CCNC care managers may refer or assist members in working with DSS to apply for additional benefits, such as WIC, SNAP, etc.
- Frequency of communication and outreach to DSS is dependent on the members needs, however DSS is notified when we are unable to reach the member/caregiver and when the member has met closure criteria. For members identified as high risk, CCNC offers an initial meeting with the DSS case worker within 7 days of identification.
- CCNC ensures the Primary Care Provider receives a copy of the Custody Status Notification when we receive it from DSS.
- CCNC provides education on Diagnosis, Medication, AAP recommended guidance and Best Practices.
- CCNC will collaborate with all necessary stakeholders to ensure the members receive appropriate care & services.

Website Navigation

- **Website:** <https://www.communitycarenc.org/>
- **Handbook:** <https://www.medicaid.ncdhhs.gov/aboutCCNC>

Member Call Center: 1-877-566-0943

Key Features

- [Foster Care Team](#)
- [Foster Care Provider Guidelines and Resources](#)
- **DSS agencies that have submitted a signed Participation Agreement can obtain access to VirtualHealth (VH) HELIOS Provider Portal. VH HELIOS provides access to visit history, medication fill history and care management documentation.**
- [Fostering Health NC](#)

The screenshot shows the 'FOSTER CARE' page on the Community Care of North Carolina website. The page has a navigation bar at the top with links for HOME, COVID-19, WHO WE ARE, WHAT WE DO, and STATEWIDE. Below the navigation bar is a breadcrumb trail: HOME / WHAT WE DO / CLINICAL PROGRAMS / CCNC PEDIATRICS / PROVIDER GUIDELINES AND RESOURCES / FOSTER CARE. The main content area starts with the question 'Did you know that children in foster care are children with special healthcare needs?' followed by the heading 'Children and youth in foster care should:'. There are three main sections: 'Be seen early', 'Be seen often upon entry to foster care', and 'Have an enhanced health care schedule'. Each section contains a list of bullet points detailing specific requirements. A 'Be seen often while they are in foster care' section is also present at the bottom. On the right side, there is a sidebar with 'Related Downloads' including 'Pediatric Essentials', 'Pediatric Provider Tools', 'Pediatric Webinar Trainings', 'Pediatric Electronic Health Records', and 'Medicaid Tools And Information'. A 'Download the information on page' button is also visible.

HOME COVID-19 WHO WE ARE WHAT WE DO STATEWIDE

FOSTER CARE

HOME / WHAT WE DO / CLINICAL PROGRAMS / CCNC PEDIATRICS / PROVIDER GUIDELINES AND RESOURCES / FOSTER CARE

Did you know that children in foster care are children with special healthcare needs?

Children and youth in foster care should:

Be seen early

- To assess for signs and symptoms of child abuse and neglect
- To assess for presence of acute and chronic illness
- To assess for signs of acute or severe mental health problems
- To monitor adjustment to foster care
- To ensure a child or youth has all necessary medical equipment and medications
- To support and educate parents (foster and birth) and kin

Be seen often upon entry to foster care

- Health screening visit within 72 hours of placement
- Comprehensive health admission visit within 30 days of placement
- Follow-up health visit within 60 to 90 days of placement

Have an enhanced health care schedule

- To monitor for signs and symptoms of abuse or neglect
- To monitor a child's or youth's adjustment to foster care and visitation
- To ensure a child or youth has all necessary referrals, medical equipment, and medications
- To support and educate parents (foster and birth) and kin

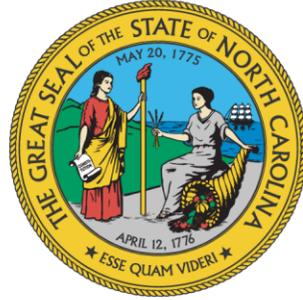
Be seen often while they are in foster care

- **Monthly** for infants from **birth to age 6 months**
- **Every 3 months** for children age **6 to 24 months**

Related Downloads

- Pediatric Essentials
- Pediatric Provider Tools
- Pediatric Webinar Trainings
- Pediatric Electronic Health Records
- Medicaid Tools And Information

Download the information on page



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

NC Medicaid Enrollment Broker

DSS Liaison:

Brittany Bulluck

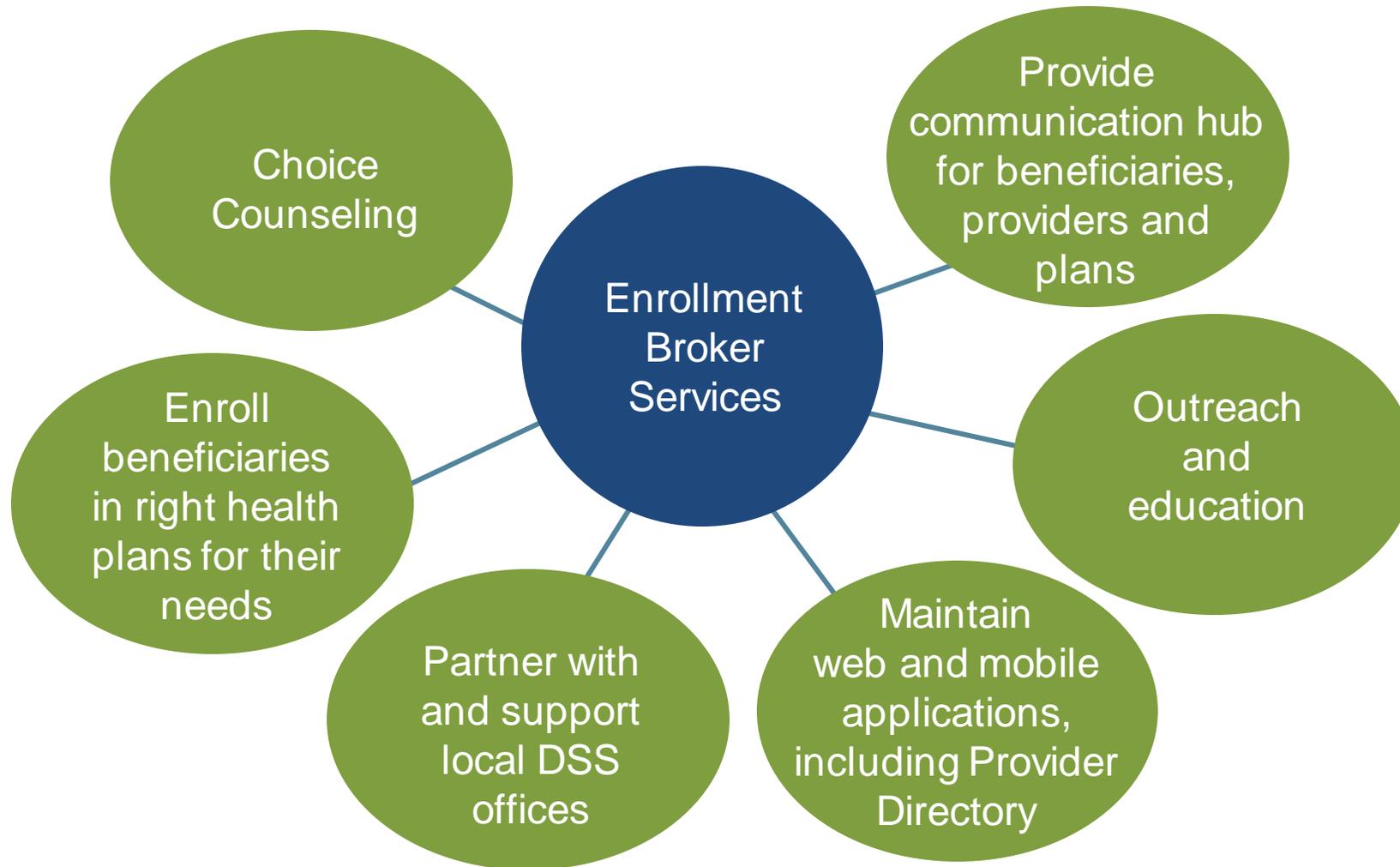
brittanybulluck@maximus.com | 646-488-2823

NC Medicaid Enrollment Broker

- The Enrollment Broker is responsible for performing choice counseling or enrollment activities, or both. Eligibility services are completed by NC Medicaid, not by the Enrollment Broker. The Enrollment Broker 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**
- **Enrollment Broker Website:** ncmedicaidplans.gov
- **Enrollment Broker Call Center Information:**
 - **Phone Number:**
 - 833-870-5500 (toll free)
 - **Hours of Operation:**
 - Monday to Saturday
 - 7:00am to 5pm



Unbiased enrollment broker services can ensure program integrity while helping beneficiaries select the best health coverage for them and their family.



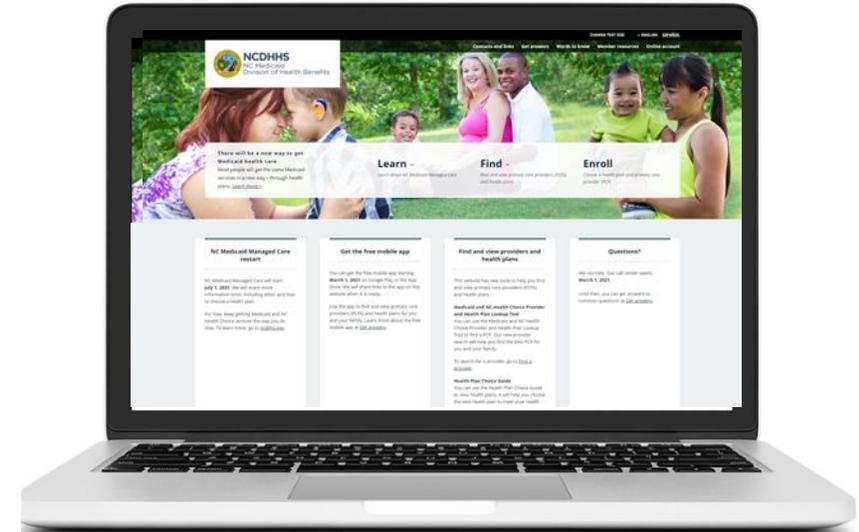
NC Medicaid Enrollment Broker

Website: ncmedicaidplans.gov

The NC Medicaid Managed Care website provides an integrated experience for members to manage their health plan choice needs. This is a great resource to direct members for questions about the health plans. The website includes the following tools and information:

- Questions and answers
- Health Care Option Guide
- Medicaid and NC Health Choice Provider and Health Plan Lookup Tool
- Meetings and Events

Enrollment Specialists are available via a chat tool to answer questions.



NC Medicaid Enrollment Broker

NC Enrollment Broker Contacts:

Martina Jones
Project Director
919-270-9451
martinajones@maximus.com

Renee L Moore
Deputy Director
919-922-8663
Reneelmoore@maximus.com

Carter Wade
Outreach & Education Manager
423-646-4333
cartermwade@maximus.com

Brittany Bulluck
DSS Liaison
646-488-2823
brittanybulluck@maximus.com

Gina Padilla
Vice President, Health Services
720.987.8733
ginampadilla@maximus.com



NC MEDICAID
OMBUDSMAN

NC Medicaid Ombudsman

NC Medicaid Ombudsman

- The NC Medicaid Ombudsman provides free, confidential support and education about the rights and responsibilities people have under NC Medicaid. Additionally, the Ombudsman connects people to resources like legal aid, social services, housing resources, food assistance and other programs.
- We are here to:
 - Educate, advocate, refer and connect
 - Communicate with NCDHHS and partners

Contact Information

- **NC Medicaid Ombudsman website:** www.ncmedicaidombudsman.org
- **Help Line:** 877-201-3750, Monday through Friday 8 am – 5 pm, except for state holidays
- **Email:** info@ncmedicaidombudsman.org
 - **Program Director** – Angeleigh Dorsey
 - **Program Managers** – Katelyn Millette, Dylan Simosko, Sarah McIntyre

NC Medicaid Ombudsman

Role in NC Medicaid Managed Care

Information and Education

- **The Ombudsman's primary responsibilities are to educate, inform and assist Medicaid beneficiaries about:**
 - The transformation to NC Medicaid Managed Care
 - How to navigate the managed care system
 - Beneficiary's rights and responsibilities under managed care

Issue Resolution

- Ombudsman staff currently provide informal issue resolution to NC Medicaid beneficiaries with Medicaid Managed Care standard plans to resolve issues members experience with NC Medicaid Managed Care health plans.
- After Tailored Plan launch, the Ombudsman will also provide informal issue resolution to NC Medicaid Beneficiaries enrolled in Tailored Plans with issues they are experiencing with their Tailored Plan or Standard Plan.
- Ombudsman staff are advocates, seeking the best and most efficient outcome for the beneficiary.
- **We work closely to assist health plans resolve issues for members.**
- **We monitor and report issue trends to the Department of Health and Human Services.**

NC Medicaid Ombudsman

Website Navigation

- Website: www.ncmedicaidombudsman.org

Key Features

- Get Help and Call
- About Us
- FAQ page
- Resources
- For Community Partners

Language and Accessibility accommodations:

- Toggle between English and Spanish
- Web Accessibility through accessiBe



Your Advocate for Quality Care

Starting July 2021, there is a new way to get health care for beneficiaries receiving Medicaid in North Carolina. Most people will receive the same NC Medicaid services in a new way – through health plans. You can contact the NC Medicaid Ombudsman with any questions or issues you have been unable to resolve working with your health plan or provider during this transition.

NC Medicaid Ombudsman has launched!

Below you can find helpful information on upcoming changes to North Carolina's Medicaid Program, including how to enroll, health plan information, other places you can call for help and important dates you should know.

What is the Ombudsman Program?

Our program helps North Carolina Medicaid and NC Health Choice beneficiaries understand the Medicaid program and changes happening as the State moves to NC Medicaid Managed Care. We offer help if people with Medicaid have trouble getting access to health care, and we connect people to resources like legal aid, social services, housing resources, food assistance



Questions?

Appendix

Quick Reference: DSS Liaison Contacts

Tailored Plan

NC Medicaid Entity	DSS Liaison	Contact Information
Alliance Health	TBD	TBD
Eastpointe	Maria McCrimmon	mccimmon@eastpointe.net 1-910-298-7068
Partners Health Management	Tara Conrad	tconrad@partnersbhm.org 828-323-8093
Sandhills Center	Heather Renshaw	heatherr@sandhillscenter.org 336-389-6424
Trillium Health Resources	Sean Kenny	sean.kenny@trilliumnc.org
Vaya Health	Brian Shuping	brian.shuping@vayahealth.com 828-506-5759 DHHS@vayahealth.com
AmeriHealth Caritas	Brenda Radford	bradford@amerihealthcaritasnc.com
Carolina Complete Health	Dr. Faith Samples	faith.l.samples@carolinacompletehealth.com
Healthy Blue	Kristy Kent	kristy.kent@bcbsnc.com
UnitedHealthCare Community Plan	Keith Funderburk	keith_funderburk@uhc.com 336-207-8603
WellCare	Shaune Lancit	shaune.lancit@wellcare.com
NC Medicaid Enrollment Broker	Brittany Bulluck	brittanybulluck@maximus.com 646-488-2823

Standard Plan