Webinar Summary

• **Webinar Summary**
  o The NC Medicaid Managed Care transition and its impact on beneficiaries
  o The timeline for open enrollment and what to expect in terms of communication to beneficiaries
  o And how you can partner with the Enrollment Broker to educate beneficiaries

• **Webinar Speakers**
  o Dave Richard, Deputy Secretary, Medicaid
  o Sandy Terrell, Director Benefits and Services, Medicaid
  o Eric Rubin, Division President for Health Services at MAXIMUS

Medicaid Transformation page: [https://www.ncdhhs.gov/assistance/medicaid-transformation](https://www.ncdhhs.gov/assistance/medicaid-transformation)
County playbook page: [https://medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care](https://medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care)
NC Medicaid Managed Care Transition
Improving the health and well-being of North Carolinians through an innovative, whole-person centered and well-coordinated system of care that addresses both medical and non-medical drivers of health."
Common Terminology

- **NC MEDICAID DIRECT**: the current fee-for-service model where the Department of Health and Human Services reimburses physicians and healthcare providers based on the number of services they provide, or the number of procedures they order.

- **NC MEDICAID MANAGED CARE**: State will contract with insurance companies, called Prepaid Health Plans or PHPs (Health Plans). These insurance companies will be paid a pre-determined set rate per person to provide all services, known as a capitated rate.

- **ELIGIBILITY**: refers to whether a person qualifies for Medicaid or NC Health Choice (NCHC). Eligible individuals may need to enroll in a Health Plan.

- **ENROLLMENT**: the process of joining a Health Plan that is responsible for that person’s Medicaid health coverage.

- **BENEFICIARY**: a person who is eligible for Medicaid or NCHC.

- **MEMBER**: once a beneficiary enrolls in a Health Plan.

- **STANDARD PLAN**: integrated physical & behavioral health services under NC Medicaid Managed Care.

- **TAILORED PLANS**: specialized plans for members with significant behavioral health needs and intellectual/developmental disabilities. Tailored plans will be coming in 2021.
What is Medicaid Transformation?

**Most people will get the same Medicaid services in a new way – through Health Plans**

What is NC Medicaid Managed Care?
Under NC Medicaid Managed Care, the insurance companies assume all of the risk for the individuals they cover, rather than the state. This also means that beneficiaries can choose a Health Plan.

Who is Impacted?
Approximately 1.6 million of the current 2.1 million NC Medicaid beneficiaries will transition to NC Medicaid Managed Care. These beneficiaries are referred to as the “crossover population.”
Medicaid Transformation Focus

The Department’s focus for Medicaid Transformation is that on Day 1:

- A person with a scheduled appointment will be seen by their provider
- A person’s prescription will be filled by the pharmacist
- A provider enrolled in Medicaid prior to Nov. 1, 2019 will still be enrolled
- A provider is paid for care delivered to members
Who is Enrolled in NC Medicaid Managed Care?

NC Medicaid will determine which population beneficiaries fall into and if it is mandatory, exempt or excluded. This determination if beneficiaries must enroll in NC Medicaid Managed Care, should stay in NC Medicaid Direct or can choose.

NC Medicaid will also be responsible for auto-assignment.

**MANDATORY**
A majority of beneficiaries will be considered mandatory and must enroll in NC Medicaid Managed Care.

**EXEMPT**
Those who have the option to remain in NC Medicaid Direct or transition to NC Managed Care.

**EXCLUDED**
Some will remain in NC Medicaid Direct because of the type of medical services they need. This small number will be excluded from obtaining a Health Plan through NC Medicaid Managed Care.
The Impact of Managed Care on Beneficiaries

**What’s new?**

- Can choose a Health Plan
- Most will be enrolled in NC Medicaid Managed Care

**What’s staying the same?**

- Eligibility rules
- Services covered
- Co-pays (if any)
- Report changes to local DSS
Health Plan Benefits

- Network of providers
- See the doctor as often as needed
- No monthly premiums
- 24-hour nurse line
- Help with referrals
The Impact of Managed Care on Beneficiaries with Behavioral Health Needs

Individuals will receive fully integrated whole person care in both standard and tailored plans.

- Both plans will:
  - Cover physical, behavioral health and pharmacy services
  - Contract with behavioral health providers
  - Have behavioral health crisis lines

- Standard plans
  - Most Medicaid population including individuals with mild to moderate behavioral health needs

- Tailored plans
  - Targeted to populations with significant behavioral health conditions
  - Additional services available and only plan to offer current 1915(b)(3), 1915(c) Innovations and traumatic brain injury (TBI) waiver and state-funded services
  - Health home care management model

- LME-MCOs will continue to exist until becoming tailored plans in 2021
Roles and Responsibilities

1. **DSS**
   - Determine Eligibility

2. **NC MEDICAID**
   - Define Population as Mandatory, Exempt or Excluded
   - Auto-assignment

3. **ENROLLMENT BROKER**
   - Mails Notice and Enrollment Packet to Beneficiaries

4. **ENROLLMENT BROKER**
   - Choice Counseling and Enrollment Outreach

5. **HEALTH PLAN**
   - Sends Members Health Plan Information
   - Answers plan and benefits questions
Key Partners and Their Roles

- **Beneficiaries**: are at the center of this process. Partners need to work together to support beneficiaries through this transformation and ongoing.
- **NC Medicaid**: provide Medicaid supervision, oversight of Health Plans and other partners
- **Local DSS**: determine Medicaid eligibility, update beneficiary information, Medicaid case management
- **NC FAST & NCTracks**: these systems will continue to transmit beneficiary information; NC FAST will remain the system of record.
- **Providers**: will contract with the Health Plans; must continue to enroll as an NC Medicaid or NC Health Choice provider
- **Ombudsman**: (*this program is pending) group that provides information and education for beneficiaries; assist with issue resolution and referrals
- **Enrollment Broker**: unbiased, third party entity to provide enrollment assistance and help choosing a Health Plan; outreach & education to beneficiaries.
- **Community-based Agencies**: disseminate information to help educate the public on changes to Medicaid; provide feedback to DHHS from clients they serve
- **Health Plans**: provide health care and related services to their members
Health Plan Responsibilities

Health Plans will:

• Ensure their Members receive the same services as they did under NC Medicaid Direct
• Provide Non-Emergent Medical Transportation (NEMT) Services for Managed Care Members
• Assist Members with primary care provider (PCP) information and complete PCP Auto-Assignment if no PCP is selected
• Supply NC Medicaid Managed Care Medicaid Card/Replacement Cards
• Conduct Care Needs Screening for Members
• Operate a Call Center/Member Service Lines
• Facilitate Appeals and Grievances
• Provide Health Plan Welcome Packets, including Welcome Letter, Medicaid Card and Member Handbook
NC Medicaid Managed Care Timeline
Phase 1 Counties

Region 2
Allegany
Ashe
Davidson
Davie
Forsyth
Guilford
Randolph
Rockingham
Stokes
Surry
Watauga
Wilkes
Yadkin

Region 4
Alamance
Caswell
Chatham
Durham
Franklin
Granville
Johnston
Nash
Orange
Person
Vance
Wake
Warren
Wilson
Phase 1 Timing – Regions 2 and 4

- **JUNE 28, 2019**: Mailings Start
- **AUG. 13, 2019**: Reminder Postcard
- **SEPT. 16, 2019**: Auto-Assignment
- **NOV. 1, 2019**: Health Plan Coverage Starts
- **NOV. 1, 2019 – JAN. 31, 2020**: 90 Day Choice Period
- **FEB. 1, 2020**: Lock-in Period Starts

- **JULY 15 – SEPT. 13, 2019**: Open Enrollment
Phase 2 Counties

Region 1
- Avery
- Buncombe
- Burke
- Caldwell
- Cherokee
- Clay
- Graham
- Haywood
- Henderson
- Jackson
- Macon
- Madison
- McDowell
- Mitchell
- Polk
- Rutherford
- Swain
- Transylvania
- Yancey

Region 3
- Alexander
- Anson
- Cabarrus
- Catawba
- Cleveland
- Gaston
- Iredell
- Lincoln
- Mecklenburg
- Rowan
- Stanly
- Union

Region 5
- Bladen
- Brunswick
- Columbus
- Cumberland
- Harnett
- Hoke
- Lee
- Montgomery
- Moore
- New Hanover
- Pender
- Richmond
- Robeson
- Sampson
- Scotland

Region 6
- Beaufort
- Bertie
- Camden
- Carteret
- Chowan
- Craven
- Currituck
- Dare
- Duplin
- Edgecombe
- Gates
- Greene
- Halifax
- Hertford
- Hyde
- Jones
- Lenoir
- Martin
- Northampton
- Onslow
- Pamlico
- Pasquotank
- Perquimans
- Pitt
- Tyrrell
- Washington
- Wayne
Phase 2 Timing: Regions 1, 3, 5 and 6

- **SEPT. 2, 2019**: Mailings Start
- **OCT. 14 – DEC. 13, 2019**: Open Enrollment
- **NOV. 13, 2019**: Reminder Postcard
- **DEC. 16, 2019**: Auto-Assignment
- **FEB. 1, 2020 – APRIL 30, 2020**: 90 Day Choice Period
- **MAY 1, 2020**: Lock-in Period Starts
- **FEB. 1, 2020**: Health Plan Coverage Starts
Working with the Enrollment Broker
About the Enrollment Broker

The Enrollment Broker is responsible for choice counseling for Health Plan and PCP selection; as part of this, the Enrollment Broker is also responsible for mailing all notices and handling enrollment.

"An Enrollment Broker is an entity that performs choice counseling or enrollment activities, or both. Eligibility services are completed by NC Medicaid, not by the Enrollment Broker. Enrollment Brokers 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."

The Largest Medicaid Administrative Services Provider

70% market share of Medicaid managed care
Enrollment Broker Services in North Carolina

- Communications hub
- Outreach and education
- Website and mobile app
- Partnering with DSS and local organizations
- Choice counseling
- Enrollment
Choice Counseling

Delivering information and assistance effectively to consumers

- Provide unbiased, culturally competent choice counseling services to beneficiaries
- Simplify the application and enrollment process so it’s easy for consumers to understand, and satisfy program requirements
- Achieve improved voluntary choice rates for better health outcomes

Trained customer service team

Responsive and empathetic

6th grade level of health literacy
Enrollment Assistance

Streamlining the decision making and enrollment process
- Communicate with consumers on their preferred channels – whether by web, phone, email, text and mobile app
- Proactively engage beneficiaries at critical points to ensure they enroll as necessary

- Multichannel including mobile
- Self-service
- 60% of consumers don’t understand their benefits
Options for Beneficiaries

1. Direct them to ncmedicaidplans.gov to learn more
2. Direct them to ncmedicaidplans.gov to chat with an Enrollment Specialist
3. Direct them to download and use the NC Medicaid Managed Care mobile app
4. Tell them to call 1-833-870-5500 to speak with an Enrollment Specialist. The call is free.
5. Individuals with hearing impairments may contact an Enrollment Specialist via the TTY line 1-833-870-5588.
6. Beneficiaries can also enroll by mailing or faxing their completed enrollment form
The NC Medicaid Managed Care website provides an integrated experience for beneficiaries to manage their enrollment needs. This is a great resource to direct beneficiaries to for questions about enrollment. The website includes the following tools and information:

- Health plan comparison charts and lists of benefits
- Provider network search capability
- Program information, brochures and enrollment forms (as downloadable PDFs)
- Questions and answers
- List of events in their county

Available in English and Spanish, it can be accessed at [ncmedicaidplans.gov](http://ncmedicaidplans.gov).

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

- Web chat service is available via a secure web portal
- Web chat adds an online alternative for real-time assistance for users
- Members can begin a web chat conversation from any page on the website via the “Chat with Us!” button
- Web chat is also compatible with iOS and Android operating systems for mobile users
- Enrollment Specialists will provide chat assistance, answering questions and directing members to appropriate pages of the website to learn more
NC Medicaid Managed Care Mobile App

**Multilingual**
In English or Spanish, beneficiaries can authenticate, view their enrollment status and enroll by choosing a Medicaid provider and health plan.

**Realtime Data**
The data-driven mobile app presents information and options specifically matched to each beneficiary's Medicaid case. This allows individuals to quickly enroll with the same provider and health plan or to choose providers and health plans that are right for their different needs.

**Plan Comparison**
Beneficiaries can easily compare health plans to enable informed coverage decisions. They can view health plan descriptions, ratings by independent reviewers and accreditations.

**Profile Access**
Logged-in users can review and edit their profile information, helping to maintain accurate and up-to-date beneficiary information.

**FAQs / Help**
Beneficiaries can access built-in help features, frequently asked questions and tutorial screens for ease of use. For additional assistance, contact information is provided for the call center, including easy to tap buttons to call instantly.

**Provider Search**
Beneficiaries can easily search providers by name, city, county, zip code, provider languages, provider gender, clinic name, specialty or affiliated hospital. Provider listings also include the plans they support.
The mobile app allows for seamless connection and interaction with beneficiaries.

With the app, the Head of Household can:
- View all case contact information
- Alter some case contact information
- View all member enrollment information
- Alter all member enrollment information
Enrollment Call Center

Enrollment Specialists are available at the call center for support. Beneficiaries can call toll free: 1-833-870-5500.

We are available to:
- Provide choice counseling
- Support search for preferred PCP
- Compare Health Plan services
- Enroll members in selected Health Plan
- Assist with some demographic changes
- Disenroll members as needed
- Process Enrollment Broker complaints and grievances
- Facilitate appeals process
- Receive warm transfers
- Provide support for the website and mobile app
- Provide assistance for deaf, blind and non-English speaking beneficiaries

EXTENDED HOURS DURING OPEN ENROLLMENT:
7 a.m. – 8 p.m.
7 days a week

ALL OTHER TIMES:
Monday – Saturday,
7 a.m. – 5 p.m.
Outreach and Education

Ensuring a seamless and streamlined beneficiary experience, the Enrollment Broker will:

- Partner with North Carolina’s county DSS offices and community organizations to provide managed care training
- Provide member materials that are understandable and accessible
- Conduct outreach services that meet consumer’s cultural and behavioral expectations

In-person services, group presentations, enrollment events and health fairs

Distribution of information and educational materials

Training
### Partner Engagement Events

**Types of Events:**
- Onboarding sessions
- Cross-functional trainings
- Monthly webinars
- Readiness

**Types of Materials:**
- Managed care toolkit
- Presentations
- Recordings
- Systems training

### Member Outreach Events

**Types of Events:**
- Member education:
  - Enrollment events
  - Community events
  - Meet & greet
  - Informational booth

**Types of Materials:**
- Media campaigns
- Marketing materials
- Flyers, fact sheets, etc.
Outreach Materials

POSTER

THERE IS A NEW WAY TO GET MEDICAID HEALTH CARE

Most people will get new Medicaid services through health care plans. You will be able to choose from a number of health plans, and you’ll get a health plan card that works just like your debit card. You’ll use it to access health care services and buy prescription drugs. The plan you choose will be based on the closest plan to your location that you choose.

WHAT YOU NEED TO DO
1. Choose a primary care provider (PCP).
2. Choose a health plan.
3. Enroll.

WHAT ELSE TO KNOW

IF YOU HAVE MORE QUESTIONS
- About your eligibility: Call your local Department of Social Services office. Call 1-800-680-9020 (TTY: 1-800-680-9021)
- About how to change plans: Call your local Department of Social Services office. Call 1-800-680-9020 (TTY: 1-800-680-9021)
- About your health plan benefits: Call your health plan.

FACT SHEET

THERE IS A NEW WAY TO GET MEDICAID HEALTH CARE

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- About your health plan benefits: Call your health plan.

Q&A

GET ANSWERS

We’ve tried to help you understand your primary care provider (PCP) and health plan at home. Have a question? Please ask us!

We’re here to help. If you need help with your health plan or primary care provider (PCP), call the number on your card.

IF YOU HAVE MORE QUESTIONS
- Call or text 281-400-7850 for a free health insurance counselor.
- Call 1-800-680-9020 (TTY: 1-800-680-9021)
- Visit medicare.gov to find a Medicare provider who can help you.

FLYER

NC MEDICAID IS CHANGING

WHAT YOU NEED TO DO
1. Choose a primary care provider (PCP).
2. Choose a health plan.
3. Enroll.

WHAT ELSE TO KNOW

IF YOU HAVE MORE QUESTIONS
- Call or text 281-400-7850 for a free health insurance counselor.
- Call 1-800-680-9020 (TTY: 1-800-680-9021)
- Visit medicare.gov to find a Medicare provider who can help you.

PALM CARD

NC MEDICAID IS CHANGING

WHAT YOU NEED TO DO
1. Choose a primary care provider (PCP).
2. Choose a health plan.
3. Enroll.

WHAT ELSE TO KNOW

IF YOU HAVE MORE QUESTIONS
- Call or text 281-400-7850 for a free health insurance counselor.
- Call 1-800-680-9020 (TTY: 1-800-680-9021)
- Visit medicare.gov to find a Medicare provider who can help you.

Download at: medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care
Introductory Video

The NC Medicaid Managed Care Introductory Video addresses:

• What is a primary care provider (PCP)
• What is a Health Plan
• The Health Plans available
• What beneficiaries need to do
• What happens after beneficiaries enroll
• The phases for enrollment and key dates
• How to get answers to additional questions
Enrollment Packet: Sample Transition Notice

There are 3 steps to enroll:

1. Choose a primary care provider (PCP) for these members
   - Your PCP could be your family doctor, clinic or other health care provider. Your PCP will help you with your health care needs. You can choose a new PCP.
   - You can choose a different PCP for each member.
   - Remember, health plans work with different PCPs. To keep your doctor, clinic or other provider as your PCP, find out which plans they work with. Then choose one of those plans.
   - You can ask your provider which plans they work with. Or you can call us at 1-833-870-5500 (TTY: 1-833-870-5588).
   - You can also find a list of doctors and other specialists for each plan at medicaid.ncdhhs.gov.

2. Choose a health plan in NC Medicaid Managed Care
   - If you want to keep your provider as your PCP, choose a health plan your primary care provider works with.
   - Review the Health Plan Comparison Chart that came with this letter. It tells you about the plans and added services they offer.
   - Compare the plans and choose the best one for you.

3. Enroll in one of these ways
   - Go to medicaid.ncdhhs.gov.
   - Use the NC Medicaid Managed Care app. To get the free app, search for NC Medicaid Managed Care on Apple Play or the Free Store.
   - Call us at 1-833-870-5500 (TTY: 1-833-870-5588).
   - Mail the enrollment form in the envelope that came with this letter. Or fax it to 5-833-896-5555.

We will choose a health plan for you if you don’t choose by September 13, 2019.

It’s best if you choose because you know your health care needs best.

If you decide later that you want to change your health plan

You will be able to change your health plan until January 31, 2020.

After that, unless you have a special reason, you cannot change your health plan until your MedRecodivation date.

If you think you should not be enrolled in a health plan because you need certain services to address needs related to developmental disability, mental illness, traumatic brain injury, or substance use disorder, you can request a reconsideration. This is a review of the decision. To ask for a reconsideration call us at 1-833-870-5500 (TTY: 1-833-870-5588).

What happens next

After you enroll, your health plan will send you information and a new ID card. You will need your ID card to get health care services. If you have questions, call your health plan’s member services number on your ID card.

You can start using your new health plan on November 1, 2019. Until then, get care and services the way you do now.

Questions?

We can help. Go to medicaid.ncdhhs.gov. You can also use the “chat” tool on the website. Or call us at 1-833-870-5500 (TTY: 1-833-870-5588), 7 a.m. to 8 p.m., 7 days a week. After September 13, 2019 we are open from 7 a.m. to 5 p.m., Monday through Thursday. The call is free. You may need your Medicaid ID number when you call us or go to the website.

Thank you,
NC Medicaid Team

To get this information in other languages or formats such as large print or audio, call 1-833-870-5500.
Sample Mandatory Notice

To change your plan, go to ncmdmedicaid.gov or use the NC Medicaid mobile app. Or call us at 1-833-870-5500 (TTY: 1-833-870-5588).

If you change your health plan before October 31, 2019, the new plan will start on November 1, 2019. After you enroll, your health plan will send you information and a new ID card. You will use your ID card to get health care services. If you have questions, call your health plan at the number listed on your ID card.

If you don’t change your health plan by January 31, 2020, you will stay in your health plan until your Medicaid verification date, unless you have a special reason. Reasons are listed on the Health Plan Change Request form. For a copy of the form, go to www.ncmedicaid.gov.

We will send you another letter telling you when you can choose a new health plan without a special reason.

Choose your primary care provider

You need to choose a primary care provider (PCP). Your PCP is your family doctor, clinic or other health care provider. To choose the PCP you want, call your health plan at the number on your ID card. If you don’t choose a PCP, your health plan will choose one for you.

If you need certain services to address needs related to developmental disability, mental illness, traumatic brain injury, or substance use disorder, you may have more choices. To learn more about your choices, call us at 1-833-870-5500 (TTY: 1-833-870-5588).

Questions?

We can help. Go to ncmdmedicaid.gov or call us at 1-833-870-5500 (TTY: 1-833-870-5588). Our extended hours are from 7 a.m. to 8 p.m., 7 days a week. The call is free. You may need your Medicaid ID number when you call or go to the website.

Thank you.

NC Medicaid Team

ncmedicaid.gov 1-833-870-5500 (TTY: 1-833-870-5588)
June 25, 2019 / NC Medicaid Managed Care

Sample Excluded Notice

Patrick A. Jones
17 Main Street
Raleigh, NC 27600

Dear Patrick A. Jones:

You are now in NC Medicaid Direct

The people below will get health care services through NC Medicaid Direct starting on the date listed. The change is because Patrick A. Jones is in the Family

Income Program.

Name | ID Number | Health Care Services / Start Date
--- | --- | ---
Patrick A. Jones | 123-45-6789 | NC Medicaid Direct / December 1, 2019

Due to this change, you cannot choose a health plan through NC Medicaid Managed Care.

What happens next?
You will get a new ID card and details in the mail. Use the plan you are in now until your NC Medicaid Direct starts. If you need to see a doctor before you get your new ID card, bring this letter with you to your visit.

What may change?
You will get your same Medicaid services through NC Medicaid Direct. But, you

cannot choose on NC Medicaid Managed Care plan. To learn more, call 1-800-244-

8178. We can also tell you about community services you may be able to get.

Questions?
We can help. Go to medicaid.ncdhhs.gov. You can also use the “chat” tool on the

website. Or call us at 1-833-870-5500 (TTY: 1-833-870-5588), 7 a.m. to 9 p.m.,

Monday through Saturday. The call is free. You may need your Medicaid ID number

when you call or go to the website.

Thank you,

NC Medicaid Team

To get this information in other languages or formats such as large print or audio, call 1-833-870-5500.

Download at: medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care
Sample Exempt Notice

June 25, 2019 / NC Medicaid Managed Care

Over Patricia A. Jones

You now have more choices

The people below are in the NC Medicaid Managed Care health plans listed. You can choose a new plan at any time. If you choose a new managed care provider (PCP), your PCP is listed below.

There are more choices for Patricia A. Jones because of the services they need.

<table>
<thead>
<tr>
<th>Name / ID Number</th>
<th>Plan / Start Date / Phone</th>
<th>PCP / Address / Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patricia A. Jones</td>
<td>Medicare November 1, 2019 1-800-779-5218</td>
<td>Dr. Betty Phillips 101 Main Street Raleigh NC 27609 919-658-6200</td>
</tr>
</tbody>
</table>

Do you want to change to NC Medicaid Direct?

- If you need certain services to address needs related to developmental disability, mental health, traumatic brain injury, or substance use disorder you may want to change to NC Medicaid Direct.
- To learn more or to change to NC Medicaid Direct, call us at 1-833-870-6500 (TTY: 1-833-870-5589). You do not need to send an enrollment form.

ncmedicaidplans.gov | 1-833-870-5589 (TTY: 1-833-870-5589)

If you want to keep your NC Medicaid Managed Care health plan

You do not have to do anything if you want to keep the health plan listed above.

If you want to stay in NC Medicaid Managed Care, but want to change your health plan:

- You can choose a new plan at any time. To learn about the plans and the services they offer:
  - Go to medicaid.ncdhhs.gov
  - Use the NC Medicaid Managed Care mobile app. To get the app, search for NC Medicaid Managed Care in the Apple App Store or in the Google Play.
  - Call us at 1-833-870-6500 (TTY: 1-833-870-5589)
  - Read the Health Plan Comparison Chart in the welcome packet mailed to you.
  - To change your plan, go to medicaid.ncdhhs.gov or use the NC Medicaid Managed Care mobile app. Or call us at 1-833-870-6500 (TTY: 1-833-870-5589). You can change your plan at any time.

If you change your health plan before October 31, 2019, the new plan will start on November 1, 2019.

After you submit your health plan change request, your health plan will send your information and a new ID card. You will use your new ID card to get health care services. If you have questions, call your health plan at the number listed on your ID card.

Questions?

We can help. Go to medicaid.ncdhhs.gov. You can also use the ‘chat’ tool on the website. Or call us at 1-833-870-6500 (TTY: 1-833-870-5589). Our call center hours are from 7 a.m. to 8 p.m., 7 days a week. The call is free. You may need your Medicaid ID number when you call or go to the website.

Thank you.

NC Medicaid Team

ncmedicaidplans.gov | 1-833-870-5589 (TTY: 1-833-870-5589)

Download at: medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care
Enrollment Packet: Informational Flyer

In NC Medicaid Managed Care, you choose a doctor for most of your Medicaid-covered services. You also choose a health plan that is right for you. All plans offer the same Medicaid services you have today. Each plan offers added services.

Step 1: Choose a primary care provider (PCP)
Health plans work with different PCPs. To keep your family doctor, clinic or other health care provider as your PCP, find out which plans they work with. Then choose one of those plans.

Here are three ways you can find out which plans your PCP works with:
- Ask your PCP
  - Call us at 1-833-870-5500 (TTY: 1-833-870-5550)
  - Find a list of doctors and other specialists for each plan at ncdmedicaidplans.gov or on the mobile app. Go to the free app, search for NC Medicaid Managed Care on Google Play or the App Store.

To help you choose a new PCP, print out your answers to these questions:
- Is there a doctor you already know?
- How far are you willing to travel to see a doctor?
- Find providers near you, go to ncdmedicaidplans.gov or use the mobile app.
- Do you need a PCP who speaks a certain language?
- Find PCPs who speak languages other than English, go to ncdmedicaidplans.gov or use the mobile app.

Step 2: Choose a health plan in NC Medicaid Managed Care
Choose a plan your PCP is in. Use these questions to help you choose the best plan for you:
- Do you want to keep your current doctor or clinic? Or do you want a new one?
- Does the health plan have the doctors, hospitals and specialists you need?
- Find out, go to ncdmedicaidplans.gov or use the mobile app.
- Does anyone in your family have special health needs?
- What added services does the plan offer? To see each plan’s added services, go to ncdmedicaidplans.gov or use the mobile app. Or read the Health Plan Comparison Chart that came with this welcome packet.

Step 3: Enroll in one of these ways
- Go to ncdmedicaidplans.gov
- Use the NC Medicaid Managed Care mobile app
- Call us at 1-833-870-5500 (TTY: 1-833-870-5550)
- Fill out the enrollment form and mail it in the envelope that came with this welcome packet. Or fax it to 1-833-870-5555.

Questions and answers
Who must choose a health plan?
Most people in NC Medicaid must choose a health plan in the NC Medicaid Managed Care program. Some people can choose to stay in NC Medicaid Direct. They will not need to choose a plan. Find out which group you are in, read the letter that came with this welcome packet. To learn more about NC Medicaid Direct, go to ncdmedicaidplans.gov/plans/ncmedicaiddirect.

What is a health plan?
A health plan is a group of doctors, hospitals and other providers. They work together to give you the health services you need.

All health plans are required to have the same Medicaid services, such as office visits, blood tests and lab work. To see the full list of NC Medicaid covered services for each plan, go to ncdmedicaidplans.gov.

Health plans also have added services such as programs to help you control smoking, eat healthier and have a healthy pregnancy.

What is a primary care provider (PCP)?
Your PCP is the family doctor, clinic or other health care provider. Your PCP will help you with your health care needs. They will also coordinate your care with other health providers.

Can I keep my doctor as my PCP?
Yes, if your doctor is in the health plan you choose. Ask your doctor what health plans they are in. Go to ncdmedicaidplans.gov or use the mobile app.

Will I lose any services?
No. You will not lose any services. Some plans have added services.

To get this information in other languages or formats such as large print or audio call 1-833-870-5500.

ATTENTION: For free Interpretive services, call 1-833-870-5500 (TTY: 1-833-870-5550).
Español (Spanish)

June 25, 2019 / NC Medicaid Managed Care

Download at: medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care
Enrollment Packet: Comparison Chart

Health Plan Comparison Chart
All plans are required to have the same type of Medicaid services you get now. These include:

- Doctor visits
- Hospital visits
- Behavioral health care
- Prescriptions
- Eye care
- Medical supplies
- Lab tests and X-rays
- Therapies
- Hospice

To see the full list of NC Medicaid covered services provided by the plans, go to ncmedicaidplans.gov. Use this chart to learn more about your plan choices.

Questions? Go to ncmedicaidplans.gov. Or call us at 1-833-870-5500 (TTY: 1-833-870-5588). We can speak with you in other languages. You can get this information in other languages or formats, such as large print or audio.

Download at: medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care
# Enrollment Packet: Comparison Chart

## Health Plan Comparison Chart (Phase 2)

All plans are required to have the same type of Medicaid services you get now. These include:
- Doctor visits
- Hospital visits
- Behavioral health care
- Prescriptions
- Eye care
- Medical supplies
- Lab tests and X-rays
- Therapies
- Hospice

To see the full list of NC Medicaid covered services provided by the health plans, go to ncmedicaidplans.gov. Use this chart to learn more about your health plan choices.

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Contact Information</th>
<th>Service Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>WellCare</td>
<td>1-866-795-5318 TTY 711 wellcare.com/nc</td>
<td>Statewide (all 100 counties)</td>
</tr>
<tr>
<td></td>
<td>7 a.m. to 6 p.m., Monday through Saturday</td>
<td></td>
</tr>
<tr>
<td>UnitedHealthCare</td>
<td>1-800-349-8855 TTY 711 uhcommunityplan.com/nc</td>
<td>Statewide (all 100 counties)</td>
</tr>
<tr>
<td></td>
<td>7 a.m. to 6 p.m., Monday through Saturday</td>
<td></td>
</tr>
<tr>
<td>HealthyBlue</td>
<td>1-844-594-5070 TTY 711 healthnc.com</td>
<td>Statewide (all 100 counties)</td>
</tr>
<tr>
<td></td>
<td>7 a.m. to 6 p.m., Monday through Saturday</td>
<td></td>
</tr>
<tr>
<td>AmeriHealth Carolina North Carolina</td>
<td>1-855-375-8811 TTY 711 or 1-800-205-8421</td>
<td>Statewide (all 100 counties)</td>
</tr>
<tr>
<td></td>
<td>24 hours a day, 7 days a week</td>
<td></td>
</tr>
<tr>
<td>Carolina complete health</td>
<td>1-833-552-3876 TTY 711 or 1-800-735-2962</td>
<td>Only available in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Cleveland, Gaston, Catawba, Cumberland, Gaston, Iredell, Iredell, Lincoln, Mecklenburg, Montgomery, Moore, New Hanover, Pender, Richmond, Robeson, Rowan, Sampson, Scotland, Stanly, Union</td>
</tr>
</tbody>
</table>

Questions? Go to ncmedicaidplans.gov. Or call us at 1-833-870-5500 (TTY: 1-833-870-9588). The call is free. We can speak with you in other languages.

You can get this information in other languages or formats, such as large print or audio.

Download at: [medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care](http://medicaid.ncdhhs.gov/county-playbook-medicaid-managed-care)
Enrollment Packet: Additional Information

Notice of Non-Discrimination
NC Medicaid complies with applicable federal civil rights laws and does not discriminate based on race, color, national origin, age, disability, creed, religion, affiliation, ancestry, sex, gender identity or expression, or sexual orientation. NC Medicaid does not exclude people or treat them differently because of race, color, national origin, age, disability, creed, religion, affiliation, ancestry, sex, gender identity or expression, or sexual orientation.

NC Medicaid provides free aids and services to people with disabilities to communicate effectively with us, such as:
- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

NC Medicaid provides free language services to people whose primary language is not English, such as:
- Qualified interpreters
- Information written in other languages

If you need these services, contact NC Medicaid at 1-833-870-5500 (TTY: 1-833-870-5588). If you believe that NC Medicaid has failed to provide these services or discriminated in another way based on race, color, national origin, age, disability, creed, religion, affiliation, ancestry, sex, or sex, you can file a grievance with:

DHHS ADA/RRA Complaints
Office of Legal Affairs
2001 Mail Service Center
Raleigh, NC 27699-2001

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Office of Legal Affairs is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services. Office for Civil Rights:
- electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf
- by mail at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 5300, HHH Building, Washington, DC 20201
- by phone at 1-800-877-8392 (TDD: 1-800-877-8399)

Complaint forms are available at www.hhs.gov/ocr/office/filereq/index.html.

Help in Other Languages
ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-833-870-5500 (TTY: 1-833-870-5588).


简体中文：SIMPLIFIED CHINESE 注意：如果您不讲英语，可免费获得语言协助服务。

繁体中文：TRADITIONAL CHINESE 注意：如果您不讲英语，可免费获得语言协助服务。


عربي عربية أنت في حاجة إلى تغطية لللغة العربية، يمكنك الحصول على خدمات المساعدة اللغوية باللسان: العربية

ARABIC (1-833-870-5500) (لللسان من 8:00م إلى 8:00م)


Hindi (GUJRATI) MUKHYA: आपको भी यह सेवाएं मिलेंगी, जिनसे आपको यह सहायता की जरूरत हो। जानिए मुख्य नंबर 1-833-870-5500 (TTY: 1-833-870-5588).


JOBS (314) 599-4848: 1-833-870-5500 (TTY: 1-833-870-5588), करोड़ घर कर्मी।
It's time to choose a health plan!

Choose a health plan by [Date]

In the new way to get Medicaid, you need to choose a health plan. We sent you a packet in the mail. If you don’t choose a plan, we will choose one for you.

Choose a plan in one of these ways:
1. Online at ncmedicaidplans.gov
2. Use the NC Medicaid Managed Care mobile app
3. Call us at 1-833-870-5500 (TTY: 1-833-870-5588)
4. Mail the Enrollment Form we sent you

Questions?
Call us at 1-833-870-5500 (TTY: 1-833-870-5588).
Key Takeaways
How Members Enroll

There are several ways that members can enroll. Online and mobile app are recommended.

**ONLINE**
Enroll using a computer by going to ncmedicaidplans.gov, where they can also chat with an Enrollment Specialist

**MOBILE APP**
Available on Android or iPhone
To get the free app, members should search for NC Medicaid Managed Care in Google Play or the App Store

**CALL**
Enroll by speaking with an Enrollment Specialist via phone at 1-833-870-5500 (the call is free)
Language lines are available.
TTY 1-833-870-5588

**MAIL**
Mail completed form to NC Medicaid Enrollment Broker P.O. Box 613 Morrisville, NC 27560 Or fax the completed form to 1-833-898-9655
For More Information

ABOUT ELIGIBILITY
Contact their local DSS
Find contact information at ncdhhs.gov/localdss

ABOUT NC MEDICAID DIRECT BENEFITS AND CLAIMS
Call the Medicaid Contact Center toll free:
1-888-245-0179

ABOUT CHOOSING A PLAN OR PCP AND ENROLLING
Go to ncmедicaidplans.gov (chat available)
Use the NC Medicaid Managed Care mobile app
Call 1-833-870-5500 (the call is free)
(TTY: 1-833-870-5588)

ABOUT NC MEDICAID MANAGED CARE PLAN OR BENEFITS
Call their Health Plan
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<td>1-844-594-5070 (TTY: 711)</td>
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</table>

Carolina Complete Health will be available in Phase 2 starting on October 14, 2019. It will only be offered to people who live in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Catawba, Cleveland, Columbus, Cumberland, Gaston, Harnett, Hoke, Iredell, Lee, Lincoln, Mecklenburg, Montgomery, Moore, New Hanover, Pender, Richmond, Robeson, Rowan, Sampson, Scotland, Stanly, Union.
Questions?
Thank you!
Thank you for attending today’s webinar.

As a reminder, we will email a link to the webinar slides and recording to all attendees.

You can also find the webinar posted online on the Medicaid Transformation page: https://www.ncdhhs.gov/assistance/medicaid-transformation