NC Medicaid Enrollment Broker



About the Enrollment Broker

The Enrollment Broker is responsible for choice counseling for health plan and primary care provider (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.

Source: The Centers for Medicare & Medicaid Services (CMS) Code of Federal Regulations 42 CFR § 438.810 - Expenditures for enrollment broker services



Medicaid Expansion

North Carolina has expanded health care coverage to more people.

- Beginning December 1, 2023, NC Medicaid began covering people ages 19 through 64 years with higher incomes. You may be able to get health care coverage through Medicaid even if you didn't qualify before.
- Medicaid pays for doctor visits, yearly check-ups, emergency care, mental health and more – at little or no cost to you.
- Learn more at <u>medicaid.ncdhhs.gov</u> or by scanning the QR code below.



What does Medicaid cover?

Medicaid in North Carolina covers most health services, including, but not limited to:

- Primary care so you can go to a doctor for a check-up or when you are not feeling well
- Hospital services when you need to stay overnight (inpatient) or when you can go home the same day (outpatient)
- Maternity and postpartum care if you are pregnant and after giving birth
- Vision and hearing services
- Prescription drug benefits to pay for your medicines
- Behavioral health, mental health, and intellectual/developmental disabilities (I/DD)
- Preventive and wellness services
- Medical devices and other therapies
- Long Term Care Services
- Non-Emergency Medical Transportation (NEMT)
- Dental Services



How do I qualify?

Most people can get health care coverage through Medicaid if they meet the criteria below.

- You live in North Carolina.
- Age 19-64
- You are a citizen. Non-US citizens with a valid immigration status may be eligible.
- And if your household income before taxes fits within the chart below:

Household Size	Annual Income
Single Adults	\$20,120 or less
Family of 2	\$27,214 or less
Family of 3	\$34,307 or less
Family of 4	\$41,400 or less
Family of 5	\$48,493 or less
Family of 6	\$55,586 or less



Are immigrants now eligible for Medicaid?

Some non-US citizens can get health coverage through Medicaid.

To be eligible you must be:

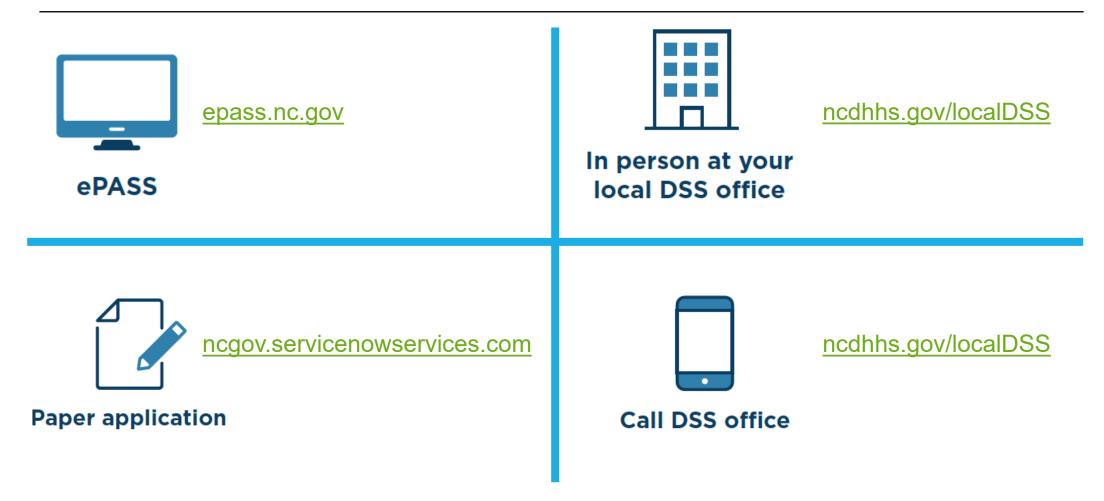
- A person living in North Carolina.
- A non-citizen with qualified immigration status. Most people must wait five years.
 Qualified immigration status includes:
 - Lawful Permanent Residents (LPR/Green Card Holder)
 - Asylees
 - Refugees
 - Cuban/Haitian entrants
 - Paroled into the U.S. for at least one year
 - Conditional entrant granted before 1980
 - Battered non-citizens, spouses, children, or parents

- Victims of trafficking and his or her spouse, child, sibling, or parent or individuals with a pending application for a victim of trafficking visa
- Granted withholding of deportation
- Member of a federally recognized Indian tribe or American Indian born in Canada
- Citizens of the Marshall Islands, Micronesia, and Palau who are living in one of the U.S. states or territories (referred to as Compact of Free Association or COFA migrants)

Non-citizens without documents who do not qualify for full health coverage under Medicaid may be able to get temporary coverage for emergency conditions that need to be treated in an emergency room.



How do I apply for Medicaid?



Learn more at medicaid.ncdhhs.gov/beneficiaries/how-apply-nc-Medicaid



What is NC Medicaid Managed Care?

NC Medicaid Managed Care has changed the way most people receive Medicaid services.

- Standard Plans and the EBCI Tribal Option launched on July 1, 2021.
- Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans implementation has been delayed.
- Some beneficiaries will stay in NC Medicaid Direct. They may transition to NC Medicaid Managed Care at a future date.





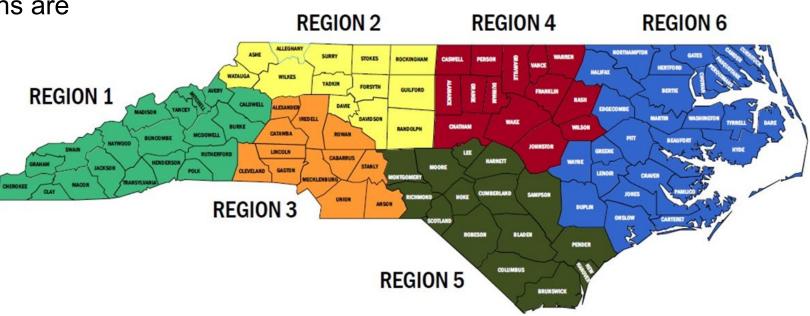
Standard Plans

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

- Added services are available and different for each Standard Plan.
- If you do not know which Standard Plan you are enrolled in or want to change your Standard Plan, contact the NC Medicaid Enrollment Broker.

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





EBCI Tribal Option

EBCI Tribal Option is the primary care case management entity (PCCMe) created by Cherokee Indian Hospital Authority (CIHA).

- Manages the primary care needs of federally recognized tribal members and others who qualify for services through Indian Health Service (IHS).
- Includes care coordination by Vaya Health (LME/MCO) for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).
- Available in these counties: Buncombe, Clay, Cherokee, Graham, Haywood, Henderson, Jackson, Macon, Madison, Swain, Transylvania



NC Medicaid Direct

NC Medicaid Direct is North Carolina's health care program for NC Medicaid beneficiaries who are not enrolled in Standard Plans, Tailored Plans or EBCI Tribal Option.

- NC Medicaid Direct includes:
 - Community Care of North Carolina (CCNC) provides care management for physical health services.



- Four Local Management Entity/Managed Care Organizations (LME/MCOs)
 coordinate services for a mental health disorder, substance use disorder,
 intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).
 - Alliance Health
 - Partners Health Management
 - Trillium Health Resources
 - Vaya Health





Tailored Plan



Tailored Plans

Tailored Plans are integrated health plans that will provide:

- Physical health, pharmacy and enhanced behavioral health services for beneficiaries who have:
 - Mental health needs
 - Severe substance use disorders
 - Intellectual/developmental disabilities (I/DDs)
 - 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
 - Physical health, behavioral health, LTSS, pharmacy and social (food, housing, transportation) supports

Note: Alliance Health is the only Tailored Plan that currently offers TBI Waiver services.



Tailored Care Management (TCM)

Tailored Plans will provide TCM to members. Tailored Care Management includes:

- Coordination for physical health, behavioral health, pharmacy, long term services and supports (LTSS), I/DDs, TBI needs and services.
- Addressing unmet health-related needs such as housing, food, transportation, personal safety, and employment by connecting members to local programs and services.
- Services for Innovations and TBI Waiver beneficiaries.

Beneficiaries should contact their Tailored Plan for questions about Tailored Care Management.



Tailored Plan Provider Networks

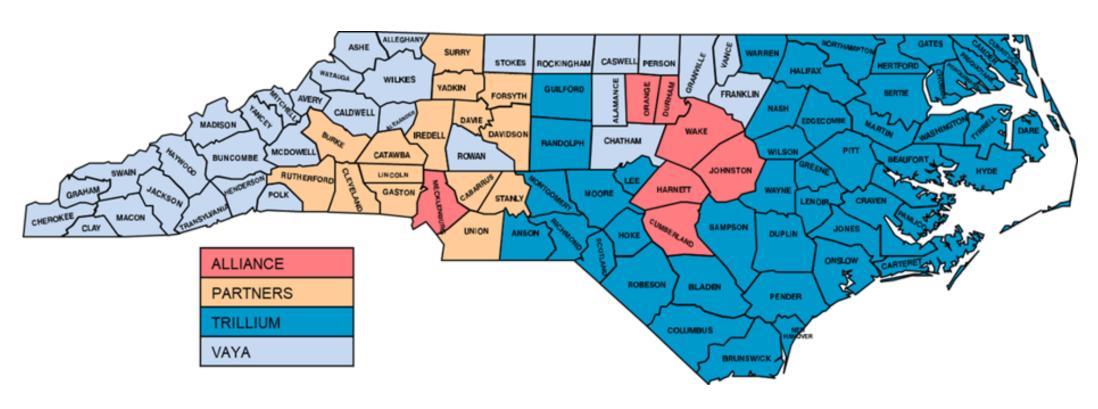
A provider network is a group of doctors, hospitals and other health care providers who contract with a health care option to provide physical and behavioral health care.

- Tailored Plans will have a network of providers for regular visits and specialists when you need certain services, like physical therapy.
- The Medicaid Provider and Health Plan Lookup Tool is an online resource for beneficiaries to search for providers.
 - Link to access: ncmedicaidplans.gov/enroll/online/find/find-provider



Tailored Plan Service Areas

- There are four Tailored Plans. Only one Tailored Plan serves each county.
- Tailored Plan service areas are based on the county that manages the beneficiary's Medicaid case (administrative county).





NC Medicaid Enrollment Broker Role

Roles and Process



DSS

Determine Medicaid Eligibility

Refer Beneficiaries to the Enrollment Broker



NC MEDICAID

Tailored Plan Enrollment Criteria

Auto-Enrollment

ENROLLMENT BROKER

Sends Notice and Enrollment Packet to Beneficiaries

ENROLLMENT BROKER

Choice Counseling and Enrollment

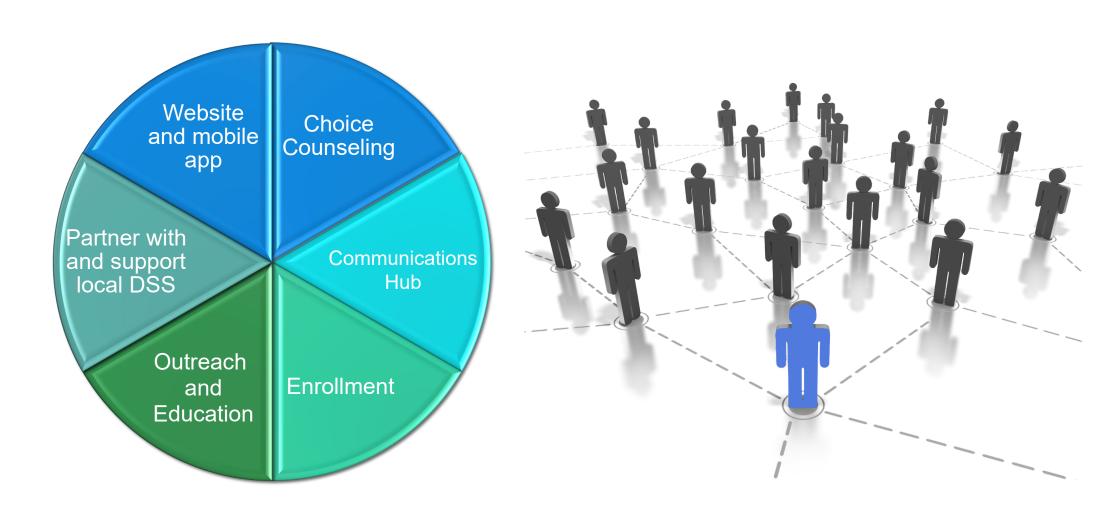
Outreach

TAILORED PLAN

PCP and TCM Provider Assignment

Sends Tailored Plan Information and Materials to Members

North Carolina Medicaid Enrollment Broker Services





Member Support

- 1. Go to <u>ncmedicaidplans.gov</u> to learn more.
- 2. Go to <u>ncmedicaidplans.gov</u> to chat with an Enrollment Specialist.
- Download and use the NC Medicaid Managed Care mobile app.
- 4. Call **1-833-870-5500** (TTY: 711 or RelayNC.com) to speak with an Enrollment Specialist. The call is toll free.

SUPPORT TOOLS









Web Chat

Website: ncmedicaidplans.gov



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 for questions about NC Medicaid Managed Care. The website includes the following tools and information:

- Questions and answers
- Health Care Option Guide
- Medicaid Provider and Health Plan Lookup Tool
- Forms and resources
- Outreach events
- Chat feature

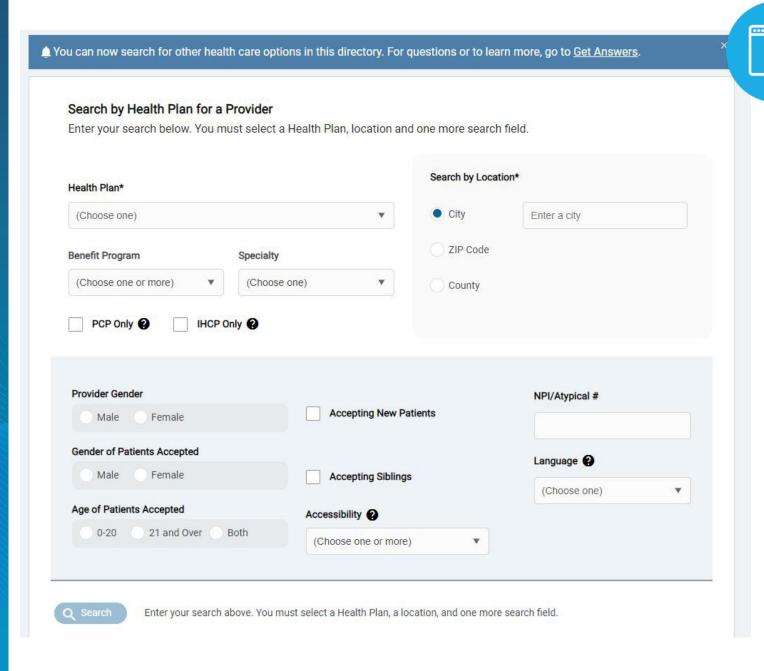


Available in English and Spanish



Medicaid Provider and Health Plan Lookup Tool

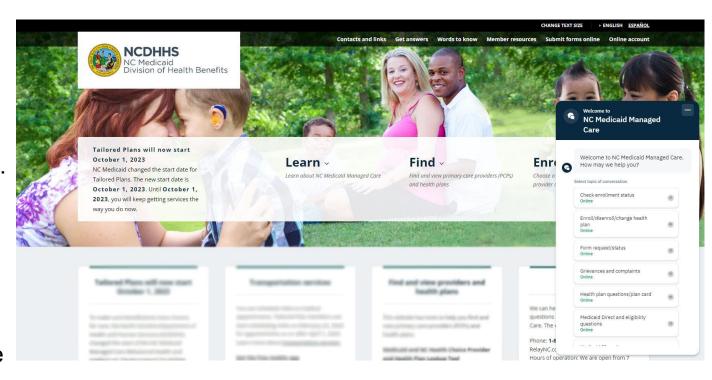
A comprehensive search capability supports members who wish to maintain their existing provider relationships by streamlining health plan selection.



Web Chat



- Web chat service is available via a secure web portal.
- Web chat adds an online alternative for real-time assistance for users.
- Beneficiaries 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, answer questions and direct beneficiaries to appropriate pages of the website to learn more.



NC Medicaid Managed Care Mobile App

Multilingual

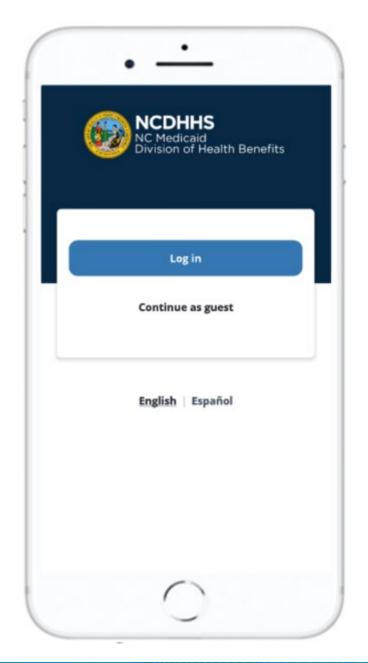
In English or Spanish, beneficiaries can authenticate, view their enrollment status, and choose a health care option and provider.

Real-time Data

The data-driven mobile app presents information and options specifically matched to each beneficiary. This allows beneficiaries to choose a health care option and provider that is right for them.

Health Care Option Guide

Beneficiaries can use the Health Care Option Guide to enable informed decisions. They can view health care option benefits and services in addition to contact information.



Public Access

Logged-in users can review and edit their profile information, helping to maintain accurate and up-todate 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 affiliate hospitals. Provider listings also include the health care options they are contracted with.





CALL CENTER HOURS:

7 a.m. – 5 p.m. Monday – Saturday

Call Center



Enrollment Specialists are available at the Call Center for support.

Beneficiaries can call toll free: **1-833-870-5500** (TTY: 711 or RelayNC.com).

Available to:

- Provide choice counseling
- Support provider search
- Discuss the services offered
- Enroll beneficiaries in a health care option
- Assist with some demographic changes
- Disenroll members as needed
- Process Enrollment Broker complaints and grievances
- Facilitate appeals process
- Provide support for the website and mobile app
- Aid with deaf and non-English speaking beneficiaries



Community Outreach

- Conduct outreach and education across the state of North Carolina to beneficiaries and community-based organizations.
- Provide materials that are understandable and accessible.

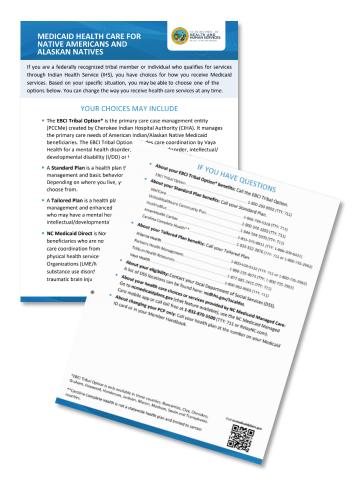


Outreach Materials

FACT SHEET – STANDARD PLAN AND TAILORED PLAN



TRIBAL HANDOUT



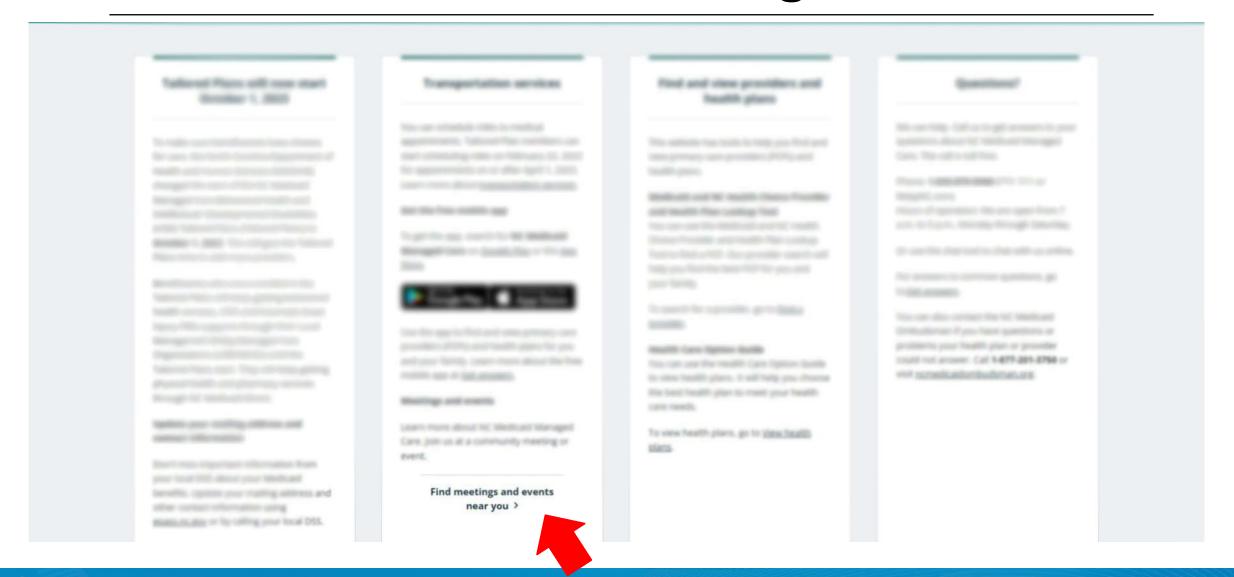
PALM CARD





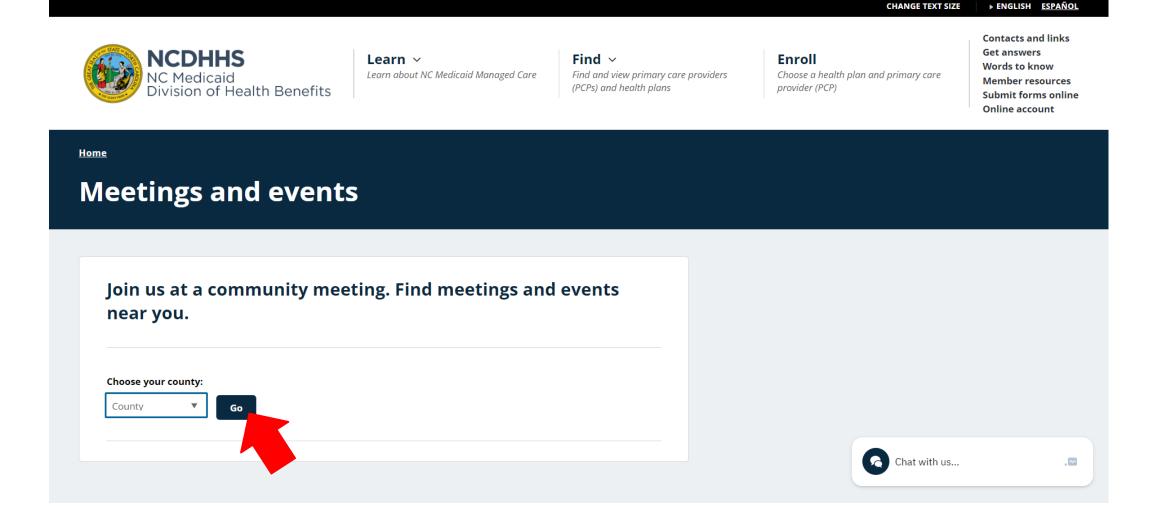


Outreach Events: Home Page





Outreach Events: Meetings – Select County





Outreach Events: Meetings – Results



Learn ∨

Learn about NC Medicaid Managed Care

Find ~

Find and view primary care providers (PCPs) and health plans

Enroll

Choose a health plan and primary care provider (PCP)

Contacts and links Get answers Words to know Member resources Submit forms online Online account

Home Meetings and events Join us at a community meeting. Find meetings and events near you. Choose your county: Anson Go There are no meetings or events for this county. Chat with us... ~



Key Takeaways



Answering Member Questions...

Who To Contact



ABOUT MEDICAID ELIGIBILITY

Contact your local DSS Find contact information at <u>ncdhhs.gov/localdss</u>



ABOUT NC MEDICAID DIRECT BENEFITS AND CLAIMS

Call the NC Medicaid Contact Center: 1-888-245-0179



ABOUT CHOOSING OR CHANGING A HEALTH PLAN

Go to
ncmedicaidplans.gov
Use the NC Medicaid
Managed Care mobile app
Call 1-833-870-5500 (TTY:
711 or RelayNC.com)
The call is toll free.



ABOUT HEALTH
PLAN BENEFITS,
REPLACEMENT
CARDS, OR CHANGE
IN PCP

*EBCI Tribal Option members will contact DSS for replacement cards and change in PCP

Questions?



Thank you!

