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.”

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 will launch on December 1, 2022.

• Some beneficiaries will stay in NC Medicaid Direct (fee-for-service). 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.
  • **Six 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
    • Eastpointe
    • Partners Health Management
    • Sandhills Center
    • Trillium Health Resources
    • Vaya Health
What’s Happening Now?
Tailored Plans

Tailored Plans are integrated health plans that 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/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 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 and NC Health Choice 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](http://ncmedicaidplans.gov/enroll/online/find/find-provider)
Tailored Plan Service Areas

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

- **Tailored Plan**
  - **Auto-Enrollment & Mailings Start**: August 15, 2022

- **Begin Choice Period**: August 15, 2022

- **End Choice Period**: October 14, 2022

- **PCP and TCM Auto-Assignment**: October 15, 2022

- **Tailored Plan Services Start**: December 1, 2022

  - Members can begin requesting NEMT services for appointments on or after December 1.
What is auto-enrollment?

Tailored Plan Auto-Enrollment

<table>
<thead>
<tr>
<th>Begins</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 15, 2022</td>
</tr>
</tbody>
</table>

- Beneficiaries who qualify for Tailored Plan will be auto-enrolled in Tailored Plans.
- Beneficiaries will receive a notice from the Enrollment Broker with their enrollment and choices.
What is the choice period?

Tailored Plan Choice Period

<table>
<thead>
<tr>
<th>Takes Place</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 15, 2022 – October 14, 2022</td>
</tr>
</tbody>
</table>

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

- Beneficiaries should contact their **Tailored Plan** to choose a PCP and Tailored Care Management provider.

- Beneficiaries should contact the **Enrollment Broker** for choice counseling and enrollment assistance.
Auto-Assignment

Begins

October 15, 2022

• Beneficiaries who do not choose a PCP or Tailored Care Management provider with their Tailored Plan will be auto-assigned to one.

• Tailored Plans will begin mailing Welcome Packets and Medicaid ID cards to their members.
NEMT Appointments

When can you begin requesting NEMT services?

• Beneficiaries may begin requesting NEMT services for appointments on or after December 1, 2022.

• Beneficiaries should contact their Tailored Plan to request NEMT services.

Begin Requesting Services

October 17, 2022
Tailored Plan Launch

When do Tailored Plans launch?

<table>
<thead>
<tr>
<th>Begins</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 1, 2022</td>
</tr>
</tbody>
</table>

- Tailored Plans begin providing health care services on December 1, 2022.

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 due to Tailored Plan launch.

What’s changing?

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

Tailored Plan members must have a PCP and a Tailored Care Management provider in the Tailored Plan’s network.
NC Medicaid Enrollment Broker Role
Roles and Process

1. **DSS**
   - Determine Medicaid Eligibility
   - Refer Beneficiaries to the Enrollment Broker

2. **NC MEDICAID**
   - Tailored Plan Enrollment Criteria
   - Auto-Enrollment

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

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

5. **TAILORED PLAN**
   - PCP and TCM Provider Assignment
   - Sends Tailored Plan Information and Materials to Members
North Carolina Medicaid Enrollment Broker Services

- Website and mobile app
- Choice Counseling
- Partner with and support local DSS offices
- Communications Hub
- Outreach and Education
- Enrollment
Member Support

1. Go to ncmedicaidplans.gov to learn more.

2. Go to ncmedicaidplans.gov to chat with an Enrollment Specialist.

3. 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.
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 and NC Health Choice Provider and Health Plan Lookup Tool
- Forms and resources
- Outreach events
- Chat feature

Available in English and Spanish
Medicaid and NC Health Choice 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.
Beneficiaries can authenticate, view their enrollment status, and choose a health care option and provider. 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. 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.

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

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 & TAILORED PLAN

TRIBAL HANDOUT

PALM CARD
Outreach Events: Meetings – Select County
Outreach Events: Meetings – Results
Key Takeaways
ABOUT ELIGIBILITY
Contact your local DSS
Find contact information at ncdhhs.gov/localdss

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
Call your health plan
*EBCI Tribal Option members will contact DSS for replacement cards and change in PCP
Questions?
Thank you!