

Medicaid Transformation: What is it and how will it work for clients?

Most people will get the same Medicaid services in a new way – through health plans. Instead of one Medicaid program there will be many health plans to choose from. Medicaid Managed Care will coordinate these health plans. These health plans work with different groups of doctors and health care professionals to give clients the health care that focuses on wellbeing and the prevention of chronic illness. NC Medicaid Managed Care will help clients get the most out of their Medicaid benefits.

Buncombe County Health and Human Services (BCHHS) will continue to assist clients with determining their Medicaid eligibility. The eligibility rules are not changing and clients should not lose any services. If the public wants to apply or recertify for Medicaid benefits, BCHHS is here to help!

In fact, all health plans are required to have the same Medicaid services, such as office visits, blood tests and X-rays. Health plans may also offer added services such as smoking cessation classes, nutrition education and assistance, and preconception and inter-conception health education.

Many people will not be affected by the change for quite a while. Those who are impacted in the upcoming transition will be receiving a welcome packet from Medicaid Managed Care. The packet will describe the transition and different health plan options.

Come Out & Learn More:

Enrollment for the new health plans will run through Oct. 14, 2019 until Dec. 13, 2019. Buncombe County HHS will be hosting Medicaid Health Plan Information Sessions in late October through November. We invite individuals who have general questions, community partners, and family members to come by to learn more about the new health plans. These sessions will provide an opportunity to meet face to face with an enrollment broker (who can help connect you to a health plan) and representatives from the various health plans. The next Medicaid Health Plan Information Session will be on October 30, 2019 from 5-7 pm at 40 Coxe Avenue. If you park in Sears Alley Parking Garage, be sure to bring your parking garage ticket in with you for free parking during your visit. We invite individuals who have questions, have received their paper work in the mail, community partners, and family members to come by to learn more.

How to Choose a Health Plan and Medical Provider:

Most people receiving Medicaid must choose a health plan. To learn more, go to [Who Must Choose a Health Plan?](#) Everything will come from the same plan including physical health, mental health, and medicine. Plans can be compared here: [Compare Plans](#). This [Health Plan Comparison Chart](#) is also a helpful resource.

Clients will also choose a primary care provider (PCP). A PCP is your family doctor, clinic or health care provider. If a person or family would like to keep the same doctor, clinic or other provider, they will need to contact that provider to find out which plans they work with.

Your PCP will help you with your health care needs. They will also coordinate your care with other health providers.

A small number of people will not need to choose a health plan because of the type of health services they need. They will stay enrolled in NC Medicaid Direct. NC Medicaid Direct provides services that meet specific needs such as services currently covered for developmental disability, mental illness, traumatic brain injury and substance use disorder. To learn more about NC Medicaid Direct, call 1-888-245-0179. It is possible to stay in NC Medicaid Direct, including your Local Management Entity-Managed Care Organization ([LME-MCO](#)). Use the [Request to Stay in NC Medicaid Direct and LME-MCO: Beneficiary Form](#).

All health plans offer the same basic benefits and services.

- To learn about the basic benefits and services that all health plans offer, and services that are **not** covered, go to [Benefits and Services](#). Some services may only be available with prior authorization (pre-approval) or if medically necessary. For questions about benefits and services, contact the health plan. For health plan contact information, go to [Contacts and Links](#). If you have questions, call the enrollment broker at **1-833-870-5500** (TTY: 1-833-870-5588). The call is free.

Medical benefits and services include:

- Allergies
- Auditory implant external parts
- Certified pediatric and family nurse practitioner services
- Dietary evaluation and counseling and medical lactation services
- Family planning services
- Hearing aids
- Hospice
- Laboratory and X-ray services
- Non-emergent transportation to medical care
- Occupational therapy
- Other diagnostic, screening, preventive and rehabilitative services
- Pharmacy services
- Ambulance services
- Burn treatment and skin substitutes
- Chiropractic services
- Durable medical equipment
- Federally qualified health center services
- Home health services
- Inpatient hospital services
- Limited inpatient and outpatient behavioral health services defined in required clinical coverage policy
- Nursing facility services
- Ophthalmological services
- Outpatient hospital services
- Physical therapy
- Anesthesia
- Cardiac procedures
- Clinic services
- Early and periodic screening, diagnostic and treatment services (EPSDT)
- Maternal birth services
- Home infusion therapy
- Inpatient psychiatric services for individuals under age 21
- Freestanding birth center services (when licensed or recognized by the North Carolina Department of Health and Human Services)
- Obstetrics and gynecology
- Optometry services
- Personal care
- Physician services

- Podiatry services
- Prosthetics, orthotics and supplies
- Rural health clinic services
- Telemedicine
- Ventricular assist device
- Prescription drugs and medication management
- Reconstructive surgery
- Services for individuals age 65 or older in an institution for mental disease (IMD)
- Tobacco cessation counseling for pregnant women
- Vision services
- Private duty nursing services
- Respiratory care services
- Speech, hearing and language disorder services
- Transplants and related services

Behavioral health benefits and services include:

- Ambulatory detoxification services
- Early and periodic screening, diagnostic and treatment services (EPSDT) for members under age 20
- Inpatient behavioral health services
- Mobile crisis management services
- Outpatient behavioral health emergency room services
- Outpatient opioid treatment services
- Professional treatment services in a facility-based crisis program
- Diagnostic assessment services
- Facility-based crisis services for children and adolescents
- Medically supervised or alcohol and drug abuse treatment center detoxification crisis stabilization
- Non-hospital medical detoxification services
- Outpatient behavioral health services provided by direct-enrolled providers
- Partial hospitalization
- Research-based intensive behavioral health treatment

There are some services each plan does **not** provide. These services will need to come from a provider outside of the health plan's network, as long as the provider takes Medicaid:

- Dental services
- Services provided through the Program of All-Inclusive Care for the Elderly (PACE)
- Services provided by local education agencies
- Services provided by children's developmental agencies that are included in your child's Individualized Family Service Plan
- Fabrication of eyeglasses, including complete eyeglasses, eyeglass lenses and ophthalmic frames

There are many ways to apply for Medicaid:

- Mail a [paper application](#) or drop it off at the local Department of Social Services (DSS).
- Apply online at [ePass](#)
- In person: Apply in person at your local DSS. **Address: 40 Coxe Avenue, Asheville, NC 28802**
- Call your local DSS if you cannot apply one of these ways. **In Buncombe County, call 1-828-250-5500**
- To learn more about how to apply for NC Medicaid, go to <https://medicaid.ncdhhs.gov/medicaid/get-started/apply-for-medicaid-or-health-choice>.

Resources:

- **Health plan comparison chart:** All plans offer the same basic benefits and services. They may also offer added services. Compare plans with this [Health Plan Comparison Chart](#).
- **Health plan change request:** To request to change your health plan, use [Health Plan Change Request](#).
- **Information sheet:** In NC Medicaid Managed Care, you choose a primary care provider (PCP) and health plan. To help you choose, follow the steps in this [Information Sheet](#).
- **Member request to stay in NC Medicaid Direct and LME-MCO:** If you have behavioral health, substance use, intellectual and developmental disability (I/DD) or traumatic brain injury (TBI) support needs, you may ask to stay in NC Medicaid Direct, including your Local Management Entity-Managed Care Organization ([LME-MCO](#)). Form: [Request to Stay in NC Medicaid Direct and LME-MCO: Beneficiary Form](#).
- **Provider request to stay in NC Medicaid Direct and LME-MCO:** If you are a provider, you may ask for a person to stay in NC Medicaid Direct. Use the [Request to Stay in NC Medicaid Direct \(Fee for Service\) and LME-MCO: Provider Form](#).

Terms to know:

- **Behavioral health provider:** Professionals who diagnose mental health, substance use and intellectual and developmental disabilities conditions and provide treatment.
- **Health plan:** A group of doctors, hospitals and other health care professionals. They work together to give you the health care you need. To learn more, go to [Get Answers](#).
- **Network:** A group of doctors, hospitals and other health care providers who contract with a health plan to give members medical care.
- **Primary care provider (PCP):** Your PCP is your 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. To learn more, go to [Get Answers](#).