

MCAC BH/IDD Subcommittee Medicaid Managed Care Update

NC Medicaid

August 14, 2019

Medicaid Managed Care Status Report

1. Tailored Plan Update
2. Managed Care Timeline
3. Day 1 Priorities
4. Managed Care Status
5. Enrollment Metrics
6. Contact Center Metrics
7. Issues and Solutions Examples
8. Engagement Strategies
9. Questions

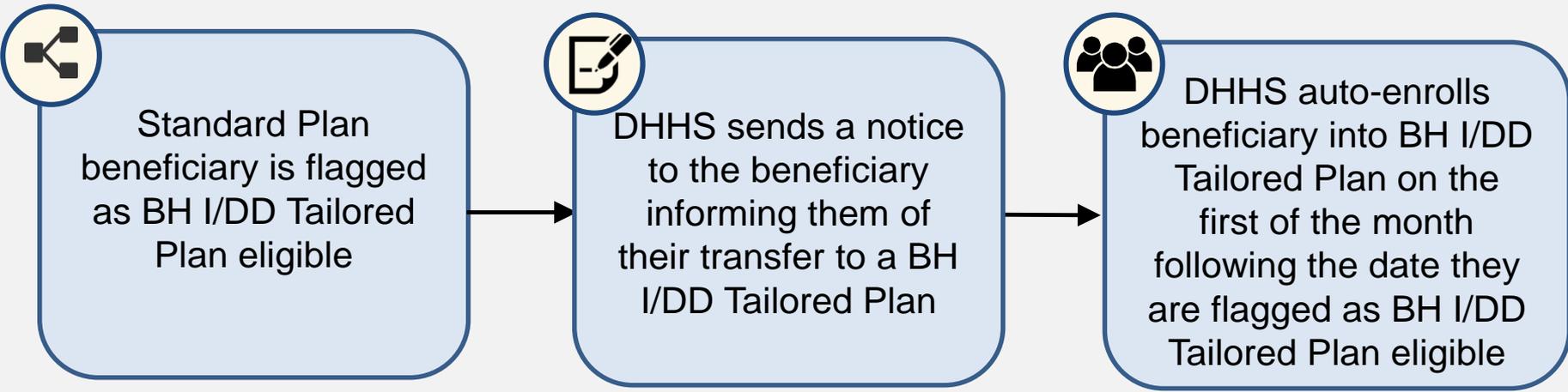
Tailored Plan Eligibility Update

Tailored Plan Implementation Update

- Eligibility Update/Revisions issued July 2019
 - Data criteria
 - Services available only in Tailored Plan
 - Meeting eligibility criteria when enrolled in a Standard Plan
 - Urgent Need for Services in a Tailored Plan
- Data Reconciliation Process

BH I/DD Tailored Plan Enrollment Process: Eligibility Identified Post-Standard Plan

On an ongoing basis, DHHS will review encounter, claims and other available data to identify Standard Plan beneficiaries who meet BH I/DD Tailored Plan eligibility criteria. Standard Plan beneficiaries who are identified as BH I/DD Tailored Plan eligible will be auto-enrolled into BH I/DD Tailored Plans.*



Beneficiaries can transfer back to any Standard Plan at any point during the coverage year. Changes are effective the first of the following month following the request unless there is a urgent need, in which case, changes are effective on the date of the request

*Prior to BH I/DD Tailored Plan launch, these beneficiaries will be auto-enrolled in FFS/LME-MCO. They will have the option to move to a Standard Plan.

Services only available in NC Medicaid Direct & LME/MCOs

Medicaid Services

- Residential treatment facility services for children and adolescents
- Child and adolescent day treatment services
- Intensive in-home services
- Multi-systemic therapy services (MST)
- Psychiatric residential treatment facilities (PRTF)
- Assertive community treatment (ACT)
- Community support team (CST)
- Psychosocial rehabilitation (PSR)
- Substance abuse non-medical community residential treatment
- Substance abuse medically monitored residential treatment
- Substance Abuse Intensive Outpatient (SAIOP)
- Substance Abuse Comprehensive Outpatient Treatment (SACOT)
- Intermediate care facilities for individuals with intellectual disabilities (ICF/IID)
- **Innovations Waiver services***
- **Traumatic Brain Injury Waiver services***
- State-Funded Behavioral Health and Intellectual and Developmental Disability Services

1915 (b)(3) Services

- Respite
- Supported Employment/Employment Specialist
- Individual Support
- One-time Transitional Costs
- NC Innovations Waiver Services (funded by (b)(3)) (Deinstitutionalization Services)
- Community Navigator
- In-home Skill Building
- Transitional Living Skills
- Intensive Recovery Support

NOTE:

***Waiver services are only available to individuals enrolled in the waiver.**

Exemption Forms

Beneficiary Form



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

Questions? Go to ncmedicaidplans.gov.
Or call us at **1-833-870-5500** (TTY: 1-833-870-5588),
7 a.m. to 5 p.m., Monday through Saturday.
We can speak with you in other languages.

Request to Stay in NC Medicaid Direct (Fee-for Service Medicaid) and LME-MCO: Beneficiary Form

1. Contact information for person enrolled in NC Medicaid

Fill out contact information for the person with NC Medicaid

Name (First, Middle, Last)	
Date of Birth (Month/Day/Year)	
NC Medicaid ID Number	
Phone number	

2. Check all the needs below that apply to you:

Check if the need is related to developmental disability, mental illness, traumatic brain injury, or substance use disorder. Please check all that apply. Tell us more about these needs. You may submit your most recent documents (such as psychological evaluations, hospital discharge summaries, or other assessments) to support this request. This will help us review your request quicker. If you do not have documentation, we will reach out to your provider.

- Intellectual/developmental disability (I/DD)
- Mental Illness
- Traumatic Brain Injury
- Substance Use Disorder

Provider Form



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

Questions? Go to ncmedicaidplans.gov.
Or call us at **1-833-870-5500** (TTY: 1-833-870-5588),
7 a.m. to 5 p.m., Monday through Saturday.
We can speak with you in other languages.

Request to Stay in NC Medicaid Direct (Fee for Service) and LME-MCO: Provider Form

1. Beneficiary Demographic Information

Fill out the beneficiary demographic information and guardian/legally responsible person contact information.

Beneficiary Name (Last, First, M.I.)	
Date of Birth	NC Medicaid ID Number
Guardian/Legally Responsible Person	Guardian/Legally Responsible Person Phone Number

2. Provider Submitting this Form

Fill out the provider information

Provider Name (Last, First, M.I.)	Telephone Number
Provider Agency (if Applicable)	NPI/Provider Identifier
Provider email	

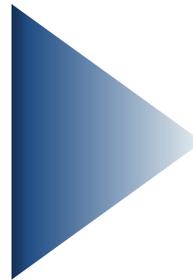
Tailored Plan Updates

- Discussion with Standard Plans
 - Crisis Services
 - Contracting
- Policy Papers – Care Management Data Strategy Paper
- Transitions in Medicaid Webinar
 - **8/20/19 1:15 -2:15pm**
 - Register: <https://manatt.webex.com/manatt/onstage/g.php?MTID=e1a8894aa92db9132064829a3b91f24a2>

Standard Plan Update

Important Questions

**Is 11/1/19 still the
“Go live” date?**



Yes

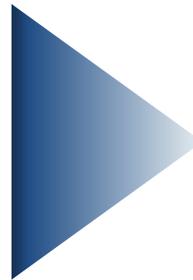
- Managed Care is still slated to go live Nov. 1st 2019
- Judge denied request for stay
- No legislation exists which delays implementation

Implementation Considerations

- State Budget
- PHP Readiness
- Network Adequacy
- DHHS Readiness

Important Questions

How is the transition going?



Success Measures

- Quantitative Measures
 - Member contacts
 - Provider engagement
 - Network Adequacy
- Qualitative Measures
 - Complaints
 - Adherence to scripting
 - Issues

Important Questions

How is the transition going?



- Enrollment Broker Call Center, Website, Chat Feature and App launched
- Mailed 300K+ letters
- Call abandonment rates low
- At least 1 EB staff onsite in each of Phase 1 DSS offices
- Health Plan Member Service Lines are open and accepting calls
- Members are enrolling



NC Medicaid Managed
Enrollments

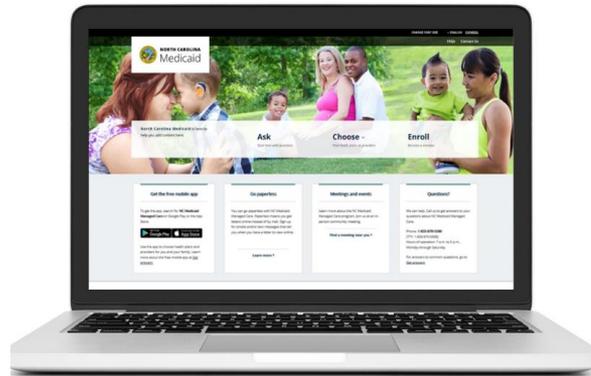
~11,000

As of August 7, 2019

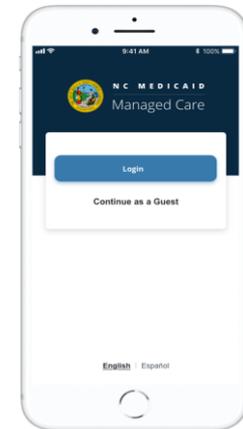
Quantitative Measures- Open Enrollment



Enrollment Broker
Call Center
16,000+ Calls
Handled



NCmedicaidplans.gov
20,552
Website Visits



NC Medicaid Managed
Care Mobile App
6,808 Sessions

All information for the period of August 7, 2019

Longer Term Success Measures

- Member Health Measures
- Member Satisfaction
- Call Center Responses
- Notices and Correspondence
- Voluntary Plan Selection Rates
- Provider Enrollment/Network Adequacy
- Provider Satisfaction

Important Questions

**Are providers
contracting?**



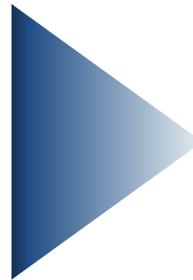
- All current providers are not yet contracted
- Provider contracting was on pace initially but has slowed
- Provider contracts are important for auto assignment

Provider Contracting Considerations

- **IMPORTANT** - PHP cannot list a provider in the directory until the provider can be paid
- PHP contract processing time (< 2 weeks)
- Auto Assignment algorithm considers patient/provider historical relationships
- Auto Assignment occurs 9-16-19
- Providers must contract to be listed in the directory
- DHHS will hold PHPs accountable to network adequacy standards

Important Questions

**Have there been
issues with managed
care implementation?**



Yes

- Transitioning to managed care is most significant change that NC Medicaid has ever undertaken.
- With any rollout of this magnitude, there have been issues and questions.
- We are committed to doing everything possible to resolve problems quickly and have identified some

Day 1 Priorities Remain Unchanged

- We are committed to making sure that when we go live with managed care
 - A person with a scheduled appointment is seen by provider
 - A person's prescription is filled by the pharmacist
 - A provider enrolled in Medicaid prior to Nov 1, is still enrolled
 - A provider is paid for care delivered to members

Beneficiary Related Issues/Solutions Examples

Issue

- A few individuals have received letters who should not have
- Beneficiaries initially not able to complete enrollment forms at DSS offices with EB Outreach Specialists (OS).
- Beneficiaries may not be able to find their Primary Care Provider of choice in the directory.

Solution

- Corrections have been made. New letters will go out to some individuals i.e. Dual Eligible
- Copies of forms distributed to OS, will now fax on behalf of beneficiary
- Beneficiaries do not have to choose now. A reminder card will be mailed in August. May be auto assigned and can change later.

Provider Directory Issues/Solutions Examples

Issues

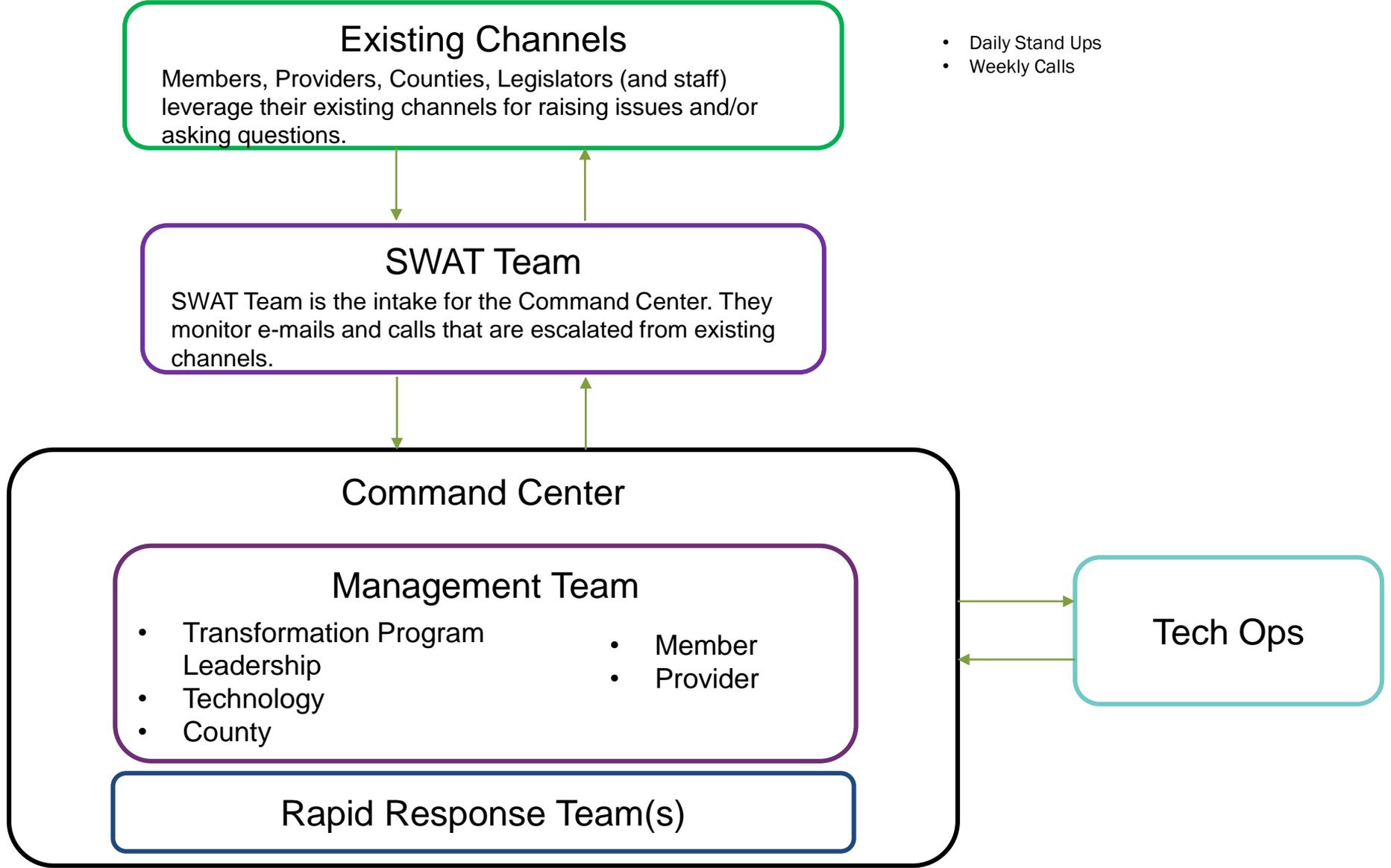
- Difficult to navigate
- Does not have current health plan enrollments
- Contains outdated provider data
- Mismatch on addresses
- Provider/PHP Affiliations

Solutions

- Some items have been resolved
- DHHS is working internally and with the EB to address remaining items
- Tracking Corrections through Use Cases

Responding to Issues

How does information flow to the Command Center?

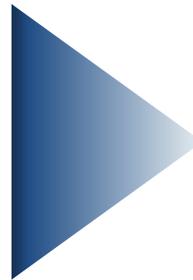


Responding to Issues

- Raising questions and issues is encouraged
 - Providers: NCTracks: 800-688-6696
 - Beneficiaries: Medicaid Contact Center: 833-870-5500
 - Counties: NC FAST: 919-813-5400
- When needed, issues can be escalated to our SWAT team by calling (919) 527-7460 or emailing MedicaidSWAT@dhhs.nc.gov

Important Questions

Additional Supports for Providers



- NC Medicaid Transformation Web based resources
<https://www.ncdhhs.gov/assistance/medicaid-transformation>
- PHP contact information
<https://medicaid.ncdhhs.gov/health-plan-contact-information>
- Provider Ombudsman in progress

Engagement Strategy Update

DHHS support to providers



Regular Status Calls/Webinars



Provider Playbook

<https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaid-managed-care>



Provider Training, Webinars, TA

<https://medicaid.ncdhhs.gov/provider-playbook-training-courses>



Provider Issues Communication

<https://files.nc.gov/ncdma/Provider-Issues-Resolutions-FINAL-20190807.pdf>

Upcoming DHHS-Sponsored Webinars on Crossover

- **For August 15, 2019: MCT 112**
 - **Supporting the LTSS Community through the Transition to Managed Care**
 - As NC transitions to managed care, North Carolina is establishing processes for ensuring providers and members have a smooth transition. This webinar will discuss activities related to Prior Authorization submissions and provider payment considerations at the time of transition.
- **For September 5, 2019: MCT 113**
 - **NC's Transition to Managed Care: The Crossover Series**
 - This session provides general crossover guidance, with a focus on identifying beneficiary managed care detail and guidance on submitting prior authorization requests during the crossover period.
- **For September 19, 2019: MCT 114**
 - **NC's Transition to Managed Care: The Crossover Series (Continued)**
 - This session is a continuation of the session on Sept. 5, 2019, providing a brief review of topics previously covered and additional guidance for supporting beneficiaries through the transition to Medicaid Managed Care.

Community Based Meetings

- **August 26, 2019: Greensboro Technical Community College, Jamestown**
 - Cosponsored with Senator Gladys Robinson
 - Two Sessions 7:30am Physicians, 10:30am General
- **August 26, 2019 Wake County Board of Commissioners**
- **August 27, 2019 Chatham County Stakeholders**
- **September 26, 2019 Representative Willingham Meeting**
- **Other Pending Engagement**
 - Hospitals
 - Region 2 Providers, LME-MCO

Foster Care Update

- Design in Progress
- Approach will address
 - Unique needs of children in foster care, adoptive placements and those formerly in foster care up to age 26
 - Plan Geographic Coverage
 - Specific PHP staffing
 - Transition of Care
- External feedback will be sought
- Timeline – 2021
- Until then- Foster Children remain in current system

Ombudsman Update

- Procurement Continues
- Silent Period in force
- <https://www.ncdhhs.gov/request-information>
- Numerous updates to RFP
- Most recent
 - <https://files.nc.gov/ncdhhs/20190724-Omb-RFP-30-190485-DHB-Addendum-5-Revisions-to-the-RFP.pdf>
 - Revisions to RFP
 - Extend opening

Upcoming Major Activities

- Summer
 - Phase 1 Open Enrollment (July 15-September 13)
 - Standard Plan/Tailored Plan Split- Data Validation
 - Health Plan/Provider contracting to build adequate networks
 - Foster Care Policy Recommendation
- Fall
 - Phase 1 Auto-Assignment (September 16)
 - Readiness Reviews – network, operations, IT
 - Phase 2 Open Enrollment (October 15-December 13)
 - Phase 1 Health Plan Effective (November 1)

Questions

Resources

Link To 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



<https://www.youtube.com/watch?v=9xJyeXkypl8&t>

Link To Beneficiary Outreach Materials

Download at medicaid.ncdhhs.gov/county-playbook-Medicaid-managed-care

POSTER

THERE IS A NEW WAY TO GET MEDICAID HEALTH CARE

Most people will get the same Medicaid services in a new way – through health plans. You will be able to choose the health plan that is best for you. You will also choose a primary care provider (PCP).

WHAT YOU NEED TO DO

- Choose a primary care provider (PCP):** To keep your doctor, clinic or other health care provider as your PCP, find out which health plans they work with. You can also choose a new PCP.
- Choose a health plan in NC Medicaid Managed Care:** A health plan is a group of doctors, hospitals and other providers. They work together to give you the health care you need. Learn more: ncmedicaidplans.gov/choose/comparplans
- Enroll in one of these ways:**
 - Go to ncmedicaidplans.gov
 - Use the NC Medicaid Managed Care mobile app
 - Call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
 - When you receive an enrollment form, fill it out and mail or fax it back

IF YOU HAVE MORE QUESTIONS

- About your eligibility: Contact your local Department of Social Services (DSS) office. Find contact information here: ncdhhs.gov/localdss
- About choosing or enrolling in a health plan: Go to ncmedicaidplans.gov (chat features available), use the NC Medicaid Managed Care mobile app or call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
- About your health plan or benefits: Call your health plan.

WellCare	1-866-799-5318	(TTY: 711)
UnitedHealthcare Community Plan	1-800-349-1855	(TTY: 711)
HealthyBlue	1-844-594-5070	(TTY: 711)
AmeriHealth Caritas	1-855-375-8811	(TTY: 1-866-299-4421)
Carolina Complete Health*	1-833-552-3876	(TTY: 711 or 1-800-735-2962)

*Only offered to people who live in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Catawba, Cleveland, Columbus, Cumberland, Gaston, Harnett, Halifax, Iredell, Lenoir, Lincoln, Macon, Madison, Mecklenburg, Moore, New Hanover, Perdue, Richmond, Robeson, Rowan, Sampson, Scotland, Surry, Union

FACT SHEETS

THERE IS A NEW WAY TO GET MEDICAID HEALTH CARE

Most people will get the same Medicaid services in a new way – through health plans. You will be able to choose the health plan that is best for you. A health plan is a group of doctors, hospitals and other providers. They work together to give you the health care you need. Everything – physical health, mental health and end-of-life – will cover from the same health plan.

You will also choose a primary care provider (PCP). A PCP could be your family doctor, clinic or other health care provider. They will go with you to your health care needs.

Most people receiving Medicaid must choose a health plan. 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.

WHAT YOU NEED TO DO

- Choose a primary care provider (PCP):** Health plans work with different PCPs. To keep your doctor, clinic or other health care provider as your PCP, find out which health plan they work with. You can also choose a new PCP for a list of doctors for each health plan, go to ncmedicaidplans.gov, use the NC Medicaid Managed Care mobile app or call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588). If you do not choose a PCP your health plan will choose one for you.
- Choose a health plan in NC Medicaid Managed Care:** Compare the health plans and choose the best one for you. These are the health plans available in NC Medicaid Managed Care:
 - WellCare
 - UnitedHealthcare Community Plan
 - HealthyBlue
 - AmeriHealth Caritas
 - Carolina Complete Health*

*Only offered to people who live in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Catawba, Cleveland, Columbus, Cumberland, Gaston, Harnett, Halifax, Iredell, Lenoir, Lincoln, Macon, Madison, Mecklenburg, Moore, New Hanover, Perdue, Richmond, Robeson, Rowan, Sampson, Scotland, Surry, Union
- Enroll in one of these ways:**
 - Go to ncmedicaidplans.gov
 - Use the NC Medicaid Managed Care mobile app
 - Call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
 - When you receive an enrollment form, fill it out and mail or fax it back
 - After you enroll, your health plan will send you a welcome packet and Medicaid card. You will use your Medicaid card to get your health services.

IF YOU LIVE IN ONE OF THESE COUNTIES:

Alexander	Catawba	Dare	Forsyth	Madison	Perdue	Swain
Anson	Cleveland	Davidson	Franklin	Macon	Richmond	Tyrone
Ashe	Columbus	DeWitt	Guilford	Madison	Rowan	Union
Avery	Cumberland	Edgecombe	Halifax	Mecklenburg	Scotland	Washington
Beaufort	Durham	Gaston	Haywood	Montgomery	Surry	Wayne
Bladen	Franklin	Granville	Lincoln	New Hanover	Tennessee	Yancey
Brunswick	Guilford	Greene	Lenoir	North Carolina	Virginia	
Cabarrus	Halifax	Guin	Northampton	Richmond	West Virginia	
Caldwell	Rockingham	Madison	Wayne	Southwest		
				York		

IF YOU HAVE MORE QUESTIONS

- About your eligibility: Contact your local Department of Social Services (DSS) office. Find contact information here: ncdhhs.gov/localdss
- About choosing or enrolling in a health plan: Go to ncmedicaidplans.gov or call us at 1-833-870-5500 (TTY: 1-833-870-5588). The chat is live. The website also has a chat feature where you can get answers to your questions.
- About your health plan or benefits: Call your health plan.

WellCare	1-866-799-5318	(TTY: 711)
UnitedHealthcare Community Plan	1-800-349-1855	(TTY: 711)
HealthyBlue	1-844-594-5070	(TTY: 711)
AmeriHealth Caritas	1-855-375-8811	(TTY: 1-866-299-4421)
Carolina Complete Health	1-833-552-3876	(TTY: 711 or 1-800-735-2962)

NC Medicaid is a program of the Department of Health and Human Services.

Q&A

GET ANSWERS

We're here to help you understand your primary care provider (PCP) and health plan choices. Here are answers to questions you may have.

If you have other questions, call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588). Or use the chat tool to chat with us online.

What is NC Medicaid Managed Care?
NC Medicaid Managed Care helps you get the most out of your Medicaid benefits. Instead of one Medicaid program there are many health plans to choose from. 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 additional services such as programs to help you quit smoking, eat healthier and have a healthy pregnancy. Health plans work with different doctors and health care providers. Each plan has its own network of qualified doctors and health care providers. To keep your doctor, clinic or other provider, find out which plans they work with. Then choose one of those plans.

What is NC Medicaid Direct?
Some people will be in NC Medicaid Direct because it provides services that most specific needs. For example, it provides the same 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.

Is Medicaid eligibility changing?
No. Medicaid eligibility rules are not changing. If you have questions about your eligibility, contact your local Department of Social Services (DSS) office. Find contact information at ncdhhs.gov/localdss.

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

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 care you need.

Do I have to choose a health plan?
It depends. Most people in NC Medicaid must choose a health plan. Some people can choose to stay in NC Medicaid Direct. They will not need to choose a plan.

To find out if you must enroll, go to Who must enroll in NC Medicaid Managed Care? at ncmedicaidplans.gov/choose/who-must-enroll-in-nc-medicaid-managed-care. If you still have questions, call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588). Or use the chat tool to chat with us online.

PALM CARD

NC MEDICAID IS CHANGING

You have a choice of health plans

WHAT YOU NEED TO DO

- Choose a primary care provider (PCP)
- Choose a health plan
- Enroll: Go to ncmedicaidplans.gov

QUESTIONS?

- About eligibility: Contact your local Department of Social Services (DSS) office: ncdhhs.gov/localdss
- About choosing or enrolling in a health plan: Go to ncmedicaidplans.gov or call 1-833-870-5500 (TTY: 1-833-870-5588). The call is free.
- About your benefits: Call your health plan. ncmedicaidplans.gov/choose/comparplans

WellCare	1-866-799-5318
UnitedHealthcare Community Plan	1-800-349-1855
HealthyBlue	1-844-594-5070
AmeriHealth Caritas	1-855-375-8811
Carolina Complete Health*	1-833-552-3876

*Not offered in all counties. MEDICAID IS TRANSFORMING

WHAT YOU NEED TO DO

Most people will get the same Medicaid services in a new way – through health plans. You will be able to choose the health plan that is best for you. You will also choose a primary care provider (PCP).

IF YOU HAVE MORE QUESTIONS

- About your eligibility: Contact your local Department of Social Services (DSS) office. Find contact information here: ncdhhs.gov/localdss
- About choosing or enrolling in a health plan: Go to ncmedicaidplans.gov (chat features available), use the NC Medicaid Managed Care mobile app or call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
- About your health plan or benefits: Call your health plan. Find contact information here: ncmedicaidplans.gov/choose/comparplans

FLYER

THERE IS A NEW WAY TO GET MEDICAID HEALTH CARE

Most people will get the same Medicaid services in a new way – through health plans. You will be able to choose the health plan that is best for you. You will also choose a primary care provider (PCP).

WHAT YOU NEED TO DO

- Choose a primary care provider (PCP): To keep your doctor, clinic or other health care provider as your PCP, find out which health plans they work with. You can also choose a new PCP for a list of doctors for each health plan, visit the website, use the mobile app or call us toll free.
- Choose a health plan in NC Medicaid Managed Care: Compare the health plans and choose the best one for you. These are the health plans available in NC Medicaid Managed Care:
 - WellCare
 - UnitedHealthcare Community Plan
 - HealthyBlue
 - AmeriHealth Caritas
 - Carolina Complete Health*

*Only offered to people who live in these counties: Alexander, Anson, Bladen, Brunswick, Cabarrus, Catawba, Cleveland, Columbus, Cumberland, Gaston, Harnett, Halifax, Iredell, Lenoir, Lincoln, Macon, Madison, Mecklenburg, Moore, New Hanover, Perdue, Richmond, Robeson, Rowan, Sampson, Scotland, Surry, Union
- Enroll in one of these ways:
 - Go to ncmedicaidplans.gov
 - Use the NC Medicaid Managed Care mobile app
 - Call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
 - When you receive an enrollment form, fill it out and mail or fax it back

IF YOU HAVE MORE QUESTIONS

- About your eligibility: Contact your local Department of Social Services (DSS) office. Find contact information here: ncdhhs.gov/localdss
- About choosing or enrolling in a health plan: Go to ncmedicaidplans.gov (chat features available), use the NC Medicaid Managed Care mobile app or call us toll free at 1-833-870-5500 (TTY: 1-833-870-5588)
- About your health plan or benefits: Call your health plan. Find contact information here: ncmedicaidplans.gov/choose/comparplans

Resources for Beneficiaries



ABOUT ELIGIBILITY

Continue to come to
local DSS

Find contact
information at
ncdhs.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
ncmedicaidplans.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

Questions/Discussion

Next Steps

- Next Meeting 9/13/19 10am
- Potential Meeting Dates for Remainder of Year
 - Oct. 11th
 - Nov. 8th
 - Dec. 13th
- Topics
 - Care Management Follow up on Feedback and Data Strategy (September)
 - Network Adequacy for Standard Plans
 - Telemedicine
 - Children in Foster Care
 - Report to MCAC