



**Questions and Answers
Medicaid Transformation 101 Webinar
April 13, 2021**

How do we find out if we can opt out?

You can contact the NC Medicaid Enrollment Broker at 833-870-5500.

Do we have to change if we are receiving the Innovations Waiver?

If you are currently receiving services through the Innovations Waiver, you do not have to make any changes right now. You will be automatically enrolled in the NC Medicaid Tailored Plan in July 2022.

My adult with IDD has Medicare/Medicaid? How does this change affect him?

You should contact the NC Medicaid Enrollment Broker at 833-870-5500.

Will this presentation be available after today?

The webinar is available on our YouTube channel: <https://www.youtube.com/watch?v=zpRVZ7Sa5zk>

When you talk about B3 and State funded, does this include MHSUD services too?

Yes, that is correct.

How does this integrate with Medicare for the tailored plan?

Great question for the NC Medicaid Enrollment Broker.

How do you determine if it is in your best interest to migrate to the Standard Plan or wait for the Tailored Plan?

You should contact your LME-MCO and the NC Medicaid Enrollment Broker and discuss your needs with them.

What should you do now if you need the Tailored Plan?

You do not need to do anything now if you need the Tailored Plan. You will be automatically enrolled in the Tailored Plan in July 2022.

How can you lose your Innovations Waiver spot again?

If you are currently receiving services through the Innovations Waiver and you choose to enroll in the Standard Plan, you will lose your Innovations Waiver slot. If the question is about a spot on the waiting list - if you move to a Standard Plan you will lose any services you might currently be receiving through the LME-MCO. If you are not receiving any services, you could move to the Standard Plan and keep your spot on the waiting list.

Is Vocational Rehab part of the Tailored plan?

No, Vocational Rehab services are NOT a part of the Tailored Plan (or the Standard Plan).

My son is on the waivers list, he is currently on our private insurance. Is Vocational Rehabilitation considered state funded services?

No. Vocational Rehab uses a mix of federal and state funds to provide employment services for people with disabilities. Those services will not be a part of Medicaid Transformation, the Standard Plans or the Tailored Plans.

The letters are not clear about the loss of services in the Standard Plan. How are individuals and families made aware of that?

The Arc of NC will send information, conduct webinars, and create blog posts with information about Medicaid Transformation.

Why would someone sign up for the Standard Plan and give up Innovations Waiver?

This is unlikely; however, everyone has different needs and someone may determine that they do not need the services they are receiving through the Innovations Waiver program.

I currently have Innovations Waiver services for my 2 adult children with developmental disabilities. I am a parent provider for my children. Does anything change for me until July 2022?

It should not change., however, we do not have details on what is included in the Tailored Plan. Once we get more details, we will be sure to share it out.

My daughter has the innovations waiver benefit. Her primary health coverage is via Medicare as I, her father, am retired and she receives the benefit as my disabled dependent . She has secondary coverage via Medicaid. Is that impacted by this transformation in any fashion?

She should not see any change in her services as a result of the Standard Plan launch. She will continue to receive her waiver services through your LME-MCO and receive her medical coverage through Medicaid Direct as she does now.

What about those who receive CAP-DA (not through the MCO)? What about dual-eligibles? Do you know when they will be added to managed care?

CAP-DA and CAP-C recipients are temporarily excluded from this change and will continue to receive services as is for now. Dual-eligibles depends on individuals' situations and we recommend you have a discussion with the Enrollment Broker.

My child has a b3, has in home support for 7 hour a week. no one can tell me if he is going to be on the standard or tailored plan. he receives both Medicaid and Medicare.

Based on the information given, it sounds like he will need the Tailored Plan. However, it is best to contact the Enrollment Broker at 833-870-5500 and speak with them.

Will the LME-MCOs be administering the physical health part of the tailored plan?

Yes, that is correct.

What do I do if I receive a letter to choose a plan (standard plan) but I want/need to be on a Tailored Plan? If I don't choose a plan, I'll be assigned the standard plan.

Contact your LME-MCO and the Enrollment Broker to let them know you will enroll in the Tailored Plan.

Under the Tailored Plan, will there be both a LME to manage the innovations waiver services and a MCO to manage the healthcare services. Will the MCO's be exclusive to certain providers?

We're not sure at this point. Once there are more details on the Tailored Plan, we will share them out.

My letter from DHHS states that my son will stay on NC Medicaid Direct. I don't know what that means?

This means that your son will be automatically enrolled in the Tailored Plan. NC Medicaid Direct is also known as the Tailored Plan. The new name for the "Division of Medical Assistance" - what we used to refer to as "DMA." Between now and July 2022 when the Tailored Plans launch, people with I/DD who are receiving services through the LME-MCO system will continue to have their medical services covered by Medicaid through "Medicaid Direct."

What happens to those using the Tailored plan between 2021 and 2022?

Your current care plan services will continue until you are automatically enrolled in the Tailored Plan.

Where can I find a more detailed breakdown of the Tailored Plan?

Unfortunately, there is not much information available on the Tailored Plan, but you can learn more here: <https://medicaid.ncdhhs.gov/providers/programs-and-services/behavioral-health-idd/behavioral-health-idd-tailored-plan>

Do the Standard Plan providers differ in terms of what they will cover or any auxiliary supports they provide?

Yes, there are some variations in coverage and auxiliary services, even though they are each required by the state to provide a standard set of services.

If you wait for the Tailored Plan, then you will be automatically signed up for it in 2022 - am I hearing correctly?

That is correct if you are currently receiving services through the LME-MCO. You will automatically be enrolled in the Tailored Plan in July 2022.

Do you have any fliers that can be posted for Medicaid recipients?

Please see our Medicaid Transformation page for information and resources: <https://arcnc.org/medicaid-transformation>

Will my son's medical doctor be on the tailored plan?

It's best to speak with your son's primary care provider. As far as we know at this time, your son can continue to see his doctor on the Tailored Plan.

How will this affect EOR management?

That is still in question, but the Community Navigation service providing training, education and mentoring for Employers of Record may undergo changes.

Is the Foster Child Care plan (rollout in 2023) part of the tailored plan?

No, at this time DHHS is developing a separate plan for foster care.

What will services and supports be like once the tailored plan begins? What changes will take place?

Unfortunately, there is not much information available on the Tailored Plan, but you can learn more here: <https://medicaid.ncdhhs.gov/providers/programs-and-services/behavioral-health-idd/behavioral-health-idd-tailored-plan>. One of the major changes will be the opportunity for people in the Tailored Plan to receive care management services from either the Tailored Plan, a community-based care management agency, or some medical groups.

If my son is on Innovations Waiver, and will need the tailored plan, will he be able to see all his current doctors?

It's best to speak with your son's primary care provider. As far as we know at this time, your son can continue to see his doctor on the Tailored Plan.

My son was placed on the waiver wait list probably 4 years ago. I have never heard anything else from it. How can I find out if he's still on the list?

Contact your LME-MCO to find out about his position on the wait list.

What if my child doesn't qualify for community services but is complex and has 14 providers, none in the same plan?

Contact your LME-MCO and the Enrollment Broker.

My son with IDD has private insurance, which is his primary insurance and Medicaid for secondary, at this time. He does not receive Innovations Waiver services, yet. Will we be impacted and how?

Not sure. Most likely, he will likely not yet be impacted by these changes. If he is receiving any other services through the LME-MCO, he will likely want to wait for the Tailored Plan rather than enroll in the Standard Plan.

I have an adult daughter who receives Medicaid innovations waiver. I understand to wait for the tailored plan for her. My 19-year-old son is on our private insurance and has Medicaid as secondary insurance. Do I need to enroll him in the standard plan? What is the deadline for the standard plan?

Contact the Enrollment Broker at 833-870-5500 to find out which plan will work best for him. The deadline to enroll in the Standard Plan is May 14, 2021. After the 14th, the state will automatically enroll those eligible in a Standard Plan provider.

For children with B3 services (Medicaid Direct) with siblings who don't have IDD, how could they all keep the same pediatrician?

Call the Enrollment Broker at 833-870-5500. They should all be able to keep their same pediatrician.

I thought Dual Eligibles (you have both Medicare & Medicaid) are not part of Medicaid Transformation.

We recommend you call the Enrollment Broker to be sure.

Do you foresee current providers (doctors) refusing to accept the new Medicaid Transformations plan?

Yes, but we are hopeful that most medical providers (doctors, hospitals, therapists, etc.) will partner with the Standard Plans and eventually the Tailored Plans.

How will the people at Innovations who are currently our supports under the Innovation Waiver i.e. Care Navigator, Service Consultant, etc. job roles change? Will we still have that support?

Some roles will change and some are already changing. In the Tailored Plan you will have the opportunity to receive care management. Care management is designed to help ensure you have the coordinated supports and services that you need.

Will speech and language therapy services also be amongst those than can sign up through the tailored plans?

Yes.

Is COVID-19 apt to push these start dates out further?

No. Planning for Medicaid Transformation has been ongoing since 2015 and the launch dates are mandated by the NC Legislature.

My 5-year-old son receives Medicaid due to a Congenital Heart Defect (Health only - no Community Based Services); would he fall under the Standard or Tailored plan? What if I have not received any letter as of yet, should I be contacting someone?

Sounds like he would fall under the Standard Plan, but it's best to contact the Enrollment Broker to ask that question.

You said Vocational Rehab will not be a part of the tailored plan, will there still be a mechanism for supported employment and or training for jobs? Will it be a referral from a Care Navigator? How would I access those services?

Yes, employment services will still be available. You can contact VR directly to request services or ask your current service provider or LME-MCO to help you with a referral for services.

What if a family does nothing - they do not enroll in Standard plan now but not eligible for Tailored plan next year?

If you or your family member is a Medicaid recipient, and you do nothing, you will either be automatically enrolled in the Standard Plan after May 14th, or temporarily excluded now and then enrolled in the Tailored Plan in 2022. It depends on whether or not you are currently receiving any community-based services through the LME-MCO.

Where can I find the Raise Your Hand form?

You can find the Raise Your Hand form here:

https://ncmedicaidplans.gov/sites/default/files/Documents/NC_Medicaid_Direct_Transition_Form_Beneficiary_ENG-WEB.pdf