


**To:** All Providers  
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VP of Network Management  
**Date:** January 28, 2022  
**Subject:** NC Medicaid Managed Care Provider Update

### SPECIAL BULLETIN MEDICAID TRANSFORMATION

## UPCOMING KEY MILESTONE DATES FOR NC MEDICAID MANAGED CARE



### [NC Medicaid Managed Care Provider Update Bulletin](#)

-  **March 15, 2022** - Healthy Opportunities Pilot food services launch
-  **May 1, 2022** - Healthy Opportunities Pilot housing and transportation services launch
-  **June 15, 2022** - Tailored Plan Member Services lines go-live
-  **June 15, 2022** - Enrollment Broker provider directory updated to include Tailored Plan providers
-  **June 15, 2022** - Healthy Opportunities Pilot toxic stress and cross-domain services launch
-  **August 1, 2022** - Beneficiaries will be assessed to confirm qualification for Tailored Plan. Beneficiaries that no longer qualify will receive a notice from the Enrollment Broker about their choices
-  **August 15, 2022** - Tailored Plan Auto-Enrollment begins. Enrollment Broker begins mailing Enrollment Packets to beneficiaries
-  **August 15, 2022** - Beneficiary Choice Period begins; Beneficiaries can choose a primary care provider (PCP) and Tailored Care Management provider by contacting their Tailored Plan
-  **October 14, 2022** - Last day for beneficiaries to choose a PCP and Tailored Care Management provider before auto-assignment
-  **October 15, 2022** - PCP and Tailored Care Management provider Auto-Assignment (by Tailored Plan) for beneficiaries who have not chosen a PCP or Tailored Care Management provider
-  **November 1, 2022** - Tailored Plan Pharmacy, Nurse, and Behavioral Health Crisis lines go live

 **December 1, 2022** - Behavioral Health and Intellectual/Developmental Disabilities (I/DD)  
Tailored Plans launch

## PROVIDER PLAYBOOK UPDATES

The [Provider Playbook](#) is a collection of information and tools specifically designed to assist providers transitioning to NC Medicaid Managed Care. The latest resources added to the [fact sheet page](#) are:






-  [What Providers Need to Know: Part 3 - Before Tailored Plan Launch](#), which provides an overview of Tailored Plan Launch with key dates, reminders and contact information.
-  [Children and Youth Transitioning to Foster Care for Providers](#), which provides information and guidance on the current foster care process for providers and includes contact information. In the [County Playbook](#), there is also a foster care fact sheet providers can refer members to for information on the transition. [English](#) | [Spanish](#)

## COVID-19 VACCINE INCENTIVE PROGRAM

A fact sheet covering the Vaccine Incentive Program has been posted to the NC Medicaid [COVID-19 Guidance and Resources Page](#). The fact sheet provides a summary of each Standard Plan COVID-19 Member Incentive Program and links to more detailed information on the Standard Plan member incentives.

## PROVIDER PRIOR AUTHORIZATIONS

If a provider needs to verify the status of a PA request, please contact the health plan provider relations team directly at:

-  **AmeriHealth Caritas:** Provider Services: 888-738-0004
-  **Carolina Complete:** Provider Services: 833-552-3876
-  **Healthy Blue:** Provider Services: 844-594-5072
-  **United Healthcare:** Provider Services: 800-638-3302
-  **WellCare:** Provider Services: 866-799-5318

For more information about PAs, see the Managed Care [Claims and Prior Authorization Submission](#) fact sheets under Programs and Services.

## PROVIDER OMBUDSMAN

Inquiries may be submitted to [Medicaid.ProviderOmbudsman@dhhs.nc.gov](mailto:Medicaid.ProviderOmbudsman@dhhs.nc.gov) or by calling the NC Medicaid Managed Care Provider Ombudsman at 866-304-7062.

The Provider Ombudsman service is separate from the Health Plans' Provider Grievances and Appeals process.

Each health plan has a grievance and appeal process for providers, separate from the process for beneficiaries, which can be found in each health plan's Provider Manual, linked on the [Health Plan Contacts and Resources Page](#).

## **ENSURE YOUR INFORMATION DISPLAYS CORRECTLY IN NORTH CAROLINA'S PROVIDER DIRECTORY – MEDICAID AND NC HEALTH CHOICE PROVIDER AND HEALTH PLAN LOOK-UP TOOL**

Reports are available on the [Managed Care Provider Playbook Resources page](#) to assist providers in verifying their records. The Provider Directory Listing Report, as well as the Provider Affiliation Report, is available to all actively enrolled Medicaid and NC Health Choice providers. In combination, these reports allow all providers to confirm the information visible to NC Medicaid beneficiaries on the "Medicaid and NC Health Choice Provider and Health Plan Look-up Tool."

For assistance with completing an NCTracks Manage Change Request, providers should reference the [NCTracks Provider User Guides and Training tools](#).

NC Medicaid's Managed Care Prepaid Health Plans (PHPs) created quick reference guides to include the most current and comprehensive information for providers.

The PHP quick reference guides are available on the [Provider Playbook Fact Sheet webpage](#) under the Health Plan Resources section. Links to the health plan training webpages have also been added to the [Provider Playbook Training Courses webpage](#).

## **HELP CENTER AVAILABLE FOR PROVIDERS TO FIND INFORMATION**

The [NC Medicaid Help Center](#) is an online source of information about Managed Care, COVID-19 and Medicaid and behavioral health services, and is also used to view answers to questions from the NC Medicaid Help Center mailbox, webinars and other sources. To use this new tool:

1. Go to [NC Medicaid Help Center](#)
2. Type a topic or key words into the search bar
3. Select a topic from the available list of categories

Detailed information about the NC Medicaid Help Center is available in a [Medicaid Bulletin](#) updated on June 17, 2021.

## **NC MEDICAID MANAGED CARE WEBINARS**

The latest schedule, registration and information on previous webinars, including the recording, slides, and transcript are available on the [AHEC Medicaid Managed Care website](#).

**NCTracks Call Center: 1-800-688-6696**

## UPDATED GUIDANCE ON TAILORED CARE MANAGEMENT PAYMENTS

This memorandum is an updated version of [previous guidance](#) released on May 14, 2021. Through this update, we provide the final Tailored Care Management rates for contract year 1 and provide additional detail on the development of the rates. Key updates to the previous guidance are in **red**.

- ♻️ [Updated Guidance on Tailored Care Management Payments](#) – January 19, 2022
  - [Guidance on the Use of Care Manager Extenders in Tailored Care Management](#)