

CHANGE NOTICE FOR MANUAL NO. 15-09, COMMUNITY CARE OF NORTH CAROLINA/CAROLINA ACCESS

DATE: OCTOBER 26, 2009

Manual: Aged, Blind, and Disabled Medicaid
Change No: 15-09
To: County Directors of Social Services
Effective: 11/01/09

I. BACKGROUND

The managed care system has proven to improve access to primary care and improve the quality of care and utilization of services for Medicaid recipients. Focus is on the enrollment and education of the Medicaid ABD and FC applicants and recipients. The two Medicaid managed care programs, Community Care of North Carolina (CCNC) and Carolina ACCESS (CA) are combined into one name, CCNC/CA. The goal is to enroll as many ABD and FC Medicaid applicants and recipients as possible into managed care.

The state legislature mandates that all Medicaid caseworkers explain the managed care program to every mandatory and optional applicant and recipient (a/r) and encourage them to enroll. The mandatory and optional groups of Medicaid applicants/recipients must have "The Benefits of Being a Member" explained to them, and they must be allowed to enroll with a provider of their choice if the provider is in the CCNC/CA network.

Caseworkers are *required* to use all resources available to identify and enroll the ABD and FC Medicaid recipients who are not enrolled, into a managed care program. Training on the advantages of the managed care system has been provided to the counties.

CCNC/CA offers enhanced services that basic Medicaid may not offer. Carolina ACCESS provides the Medicaid and North Carolina Health Choice (NCHC) enrollee with a primary care doctor whose practice serves as the enrollee's medical home, who manages care for continuity, and ensures services are provided that are medically necessary. In addition to the services being offered by CA, CCNC provides primary care management, disease management, prevention, and medical coordination of treatment for all enrollees.

CCNC/CA are the two Medicaid managed care programs. For purposes of this policy, Medicaid managed care will be identified as CCNC/CA.

II. CONTENT OF CHANGE

A. MA-2425, Community Care of North Carolina/Carolina ACCESS (CCNC/CA)

1. All references to Carolina ACCESS are changed to CCNC/CA in both policy and attachments where applicable. All attachments are changed to “figures” and renumbered.
2. Carolina ACCESS *brochure* is renamed CCNC/CA *handbook* and must be given to all mandatory and optional Medicaid applicants/recipients. Do not automatically exempt from CCNC/CA applicants and recipients who are optional.

B. The following sections have been updated

1. MA-2320 XII., Redetermination of Eligibility, has been updated to include the changes that are made in MA-2425, Community Care of North Carolina/Carolina ACCESS.
2. MA-2425 I. - Defines the two distinct managed care entities as CCNC and CA.
3. MA-2425 II. - Explains the difference between the two entities and what each has to offer the Medicaid recipient. The primary focus is to enroll every recipient into managed care unless ineligible or exempt.
4. MA-2425 III.B. - Explains the DMA Managed Care responsibilities.
5. MA-2425 IV.C and D. – Instructs caseworkers to explain CCNC/CA and give the CCNC/CA handbook to all mandatory and optional applicants/recipients of Medicaid.
6. MA-2425 IV. I. - Providers may begin the enrollment process for CCNC/CA by having the recipient complete a CCNC/CA Enrollment Form for Medicaid Recipients while at the provider’s office.
7. MA-2425 V.B.4. - The new phone number for Managed Care is added.
8. MA-2425 VII. A. - “The Benefits of CCNC/CA” (Figure 12a) has been revised and must be explained to all recipients who are mandatory or optional and enrollment must be offered. Do not automatically exempt optional groups.
9. MA-2425 VII.A.4. and MA-2425 VIII.A.4. – Instructions on how to auto assign a CCNC/CA provider have been revised.

10. MA-2425 VII.A. 8. and MA-2425 VIII D.2.c. and VIII.D.3.c. Reference to a system cutoff date for an SSI case is removed.
11. MA-2425 X. C. The contact for Provider Enrollment and Changes in PCP Agreement is CSC (Computer Sciences Corporation); phone number is 866-844-1113.
12. MA-2425 X.F.4. - The Managed Care Section mailing address has changed to:

Managed Care Section
Division of Medical Assistance
2501 Mail Service Center
Raleigh, NC 27699-2501

13. MA-2425, The DMA Managed Care Consultants, Attachment 12, is removed from policy.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective 11/01/2009. Apply this change to applications taken and redeterminations started on or after 11/01/09, as well as to those presently in process.

IV. MAINTENANCE OF MANUAL

- A. Remove: MA-2320, Redetermination of Eligibility, pages, 7 and 8.**
- B. Insert: [MA-2320](#), Redetermination of Eligibility, pages, 7 and 8.**
- C. Remove: MA-2425, Community Care of North Carolina/Carolina ACCESS, pages, 1-23 and attachments 1-13 and Figure 1.**
- D Insert: [MA-2425](#), Community Care of North Carolina/Carolina ACCESS, pages, 1-27 and Figures [1](#), [2](#), [3](#), [4](#), [5](#), [6](#), [7](#), [8](#), [9](#), [10](#), [11a](#), [11b](#), [12a](#), [12b](#), [13](#) .**

If you have any questions regarding this information, please contact your Medicaid Program Representative.

Craig L. Gray, MD, MBA, JD,
Director

(This material was researched and written by Betty West, Customer Service Manager, Managed Care Unit and Sandi Morrow, Medicaid Program Consultant, Medicaid Eligibility Unit)