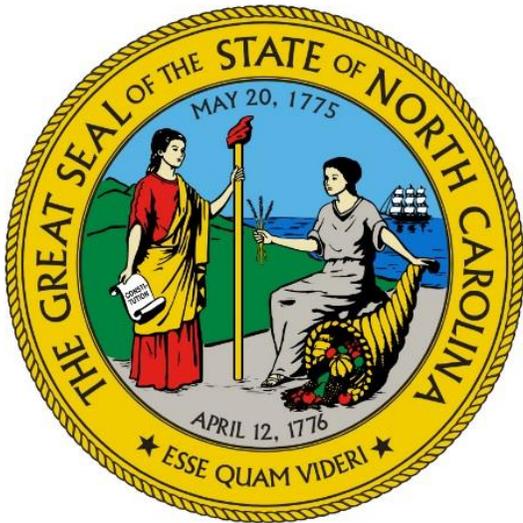


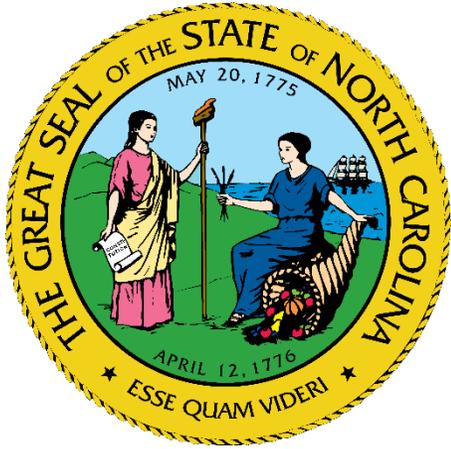


**NC Department of Health and Human Services**

**Joint DMH/DD/SUS & DHB (NC Medicaid)  
Consumer Webinar**

**March 27, 2023**





**NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES**

## **NC Medicaid Updates**

**Eva Fulcher**

**Deputy Director, Member Operations**

**NC Medicaid**

**March 27, 2023**

# COVID-19 Federal Public Health Emergency (PHE) Update

## 2023 Consolidated Appropriations Act (Omnibus Bill)

Signed into law Dec. 29, 2022

Decouples the continuous coverage requirement from the COVID-19 PHE

- Effective April 1, 2023, state Medicaid programs are no longer required to maintain continuous coverage for beneficiaries

Includes a new requirement to contact individuals using more than one modality prior to termination

- A beneficiary's Medicaid cannot be terminated due to mail being returned as undeliverable. State Medicaid programs are required to make a good-faith effort to find the person.

Requires one year of continuous coverage for kids on Medicaid and NC Health Choice (no change from NC Medicaid's current policy)

Permanently extended the 12-month postpartum coverage option.

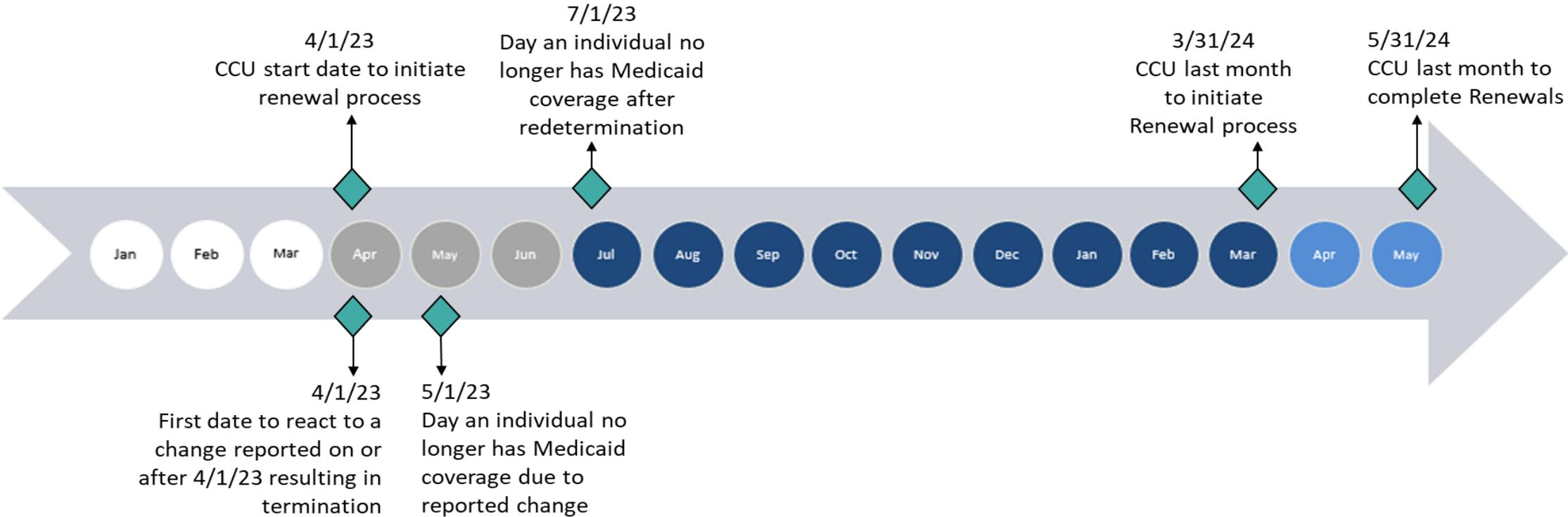
# NC Medicaid's Continuous Coverage Unwinding

**NC Medicaid will begin the renewal (recertification) process for Medicaid beneficiaries April 1, 2023.**

- **Redeterminations will be completed over the next 12 months, as beneficiaries are up for renewal**
  - **During renewal, the beneficiary's local Department of Social Services (DSS) will use information they have on file to decide if they or their family member(s) still qualify for NC Medicaid**
  - **If the local DSS needs more information from a beneficiary to decide on coverage, they will send the beneficiary a renewal letter in the mail**
- **If a beneficiary is found ineligible for Medicaid, they will receive a letter with the following information:**
  - **The program being terminated or reduced**
  - **The decision made by DSS**
  - **Deadlines for responding**
  - **How to appeal the decision**

# Continuous Coverage Unwinding Timeline

Local Departments of Social Services have been completing recertifications throughout the PHE, however, coverage has not been terminated or reduced. North Carolina is using an age-based approach for recertifications during the unwinding period.



# If a Beneficiary is Redetermined Ineligible

If a beneficiary loses their NC Medicaid eligibility during recertification their Medicaid coverage will end.

- Beneficiaries have the right to:
  - Appeal the decision. Beneficiaries have 60 days from the date of the termination letter to appeal.
  - Continue to receive benefits pending the fair hearing decision.\*
- If a beneficiary no longer qualifies for Medicaid:
  - They may be able to buy a health plan through the federal Healthcare Marketplace and get help paying for it. [healthcare.gov](https://www.healthcare.gov)
  - Four out of five enrollees can find plans that cost less than \$10 a month
  - Plans cover things like prescription drugs, doctor visits, urgent care, hospital visits and more

\* If the resolution upholds the beneficiary's termination; the beneficiary may be required to pay for medical services received while the appeal was pending.

# What Beneficiaries Can Do to Get Ready for Recertification

- **Update their contact information**

- Beneficiaries should make sure their local DSS has their current mailing address, phone number, email or other contact information.
- With an enhanced [ePASS](#) account, beneficiaries can update their address and other information for Medicaid online without having to call or visit their local DSS.

- **Check their mail**

Local DSS will mail beneficiaries a letter if they need to complete a renewal form to see if they still qualify for Medicaid.

- **Complete the renewal form (if they get one)**

If a beneficiary receives a renewal form, they should fill out the form and return it to their local DSS right away to help avoid a gap in their Medicaid coverage.

# Omnibus Bill Requirements: Returned Mail Condition

- The “returned mail condition” requires that states make a “good-faith effort” to contact an individual using “more than one modality” when returned mail is received in response to a request for information to complete a redetermination. Meeting the returned mail condition is a two-part requirement:
- Requirement 1: States must attempt to obtain up-to-date mailing addresses and additional contact information (e.g., phone number, email address) for ALL beneficiaries.
- Requirement 2: During the continuous coverage unwinding period, beneficiaries must be contacted through more than one modality prior to being terminated if returned mail is received. These modalities include:
  - Forwarding address on returned mail
  - Phone call
  - Email
  - SMS text message
- Medicaid will complete targeted outreach to beneficiaries during the unwinding period to meet these requirements.

# Targeted Outreach Efforts

**Requirement 1: Attempt to obtain up-to-date contact information for ALL beneficiaries.**

Contact Modality	Description	Dates	Timing
Mass Text Messages	Update your contact information so you don't miss important updates from Medicaid.	March 2023 – February 2024	Monthly; based on when the beneficiary is due for Medicaid recertification.
Robo Calls from EB	Use ePASS or contact your local DSS.	Completed in batches based on the beneficiary's renewal due date.	
Mass Emails			

**This outreach is in addition to direct mailings from Health Plans and the Enrollment Broker, social media, website, press releases and community presentations and webinars.**

## Targeted Outreach Efforts (cont.)

**Requirement 2:** Prior to termination of coverage, contact beneficiaries through more than one modality if returned mail is received.

Contact Modality	Description	Dates	Timing
<b>Texts, Emails, and Robo Calls</b> in Response to a Renewal Form or Request for Information being sent	Your DSS needs information; Check your mail; Link to provide details on how to complete the recertification	April 2023 – March 2024	Weekly (upon generation of the Renewal form or Request for Information)
<b>Mail</b> returned Renewal Notice or Request for Information to Forwarding Address	Re-send Renewal Notice or Request for Information that is returned to the DSS and has a forwarding address	April 2023 – May 2024	As returned mail is received

# Example Beneficiary Scenario



## Scenario: MAGI Beneficiary

Barbara is a beneficiary receiving MAGI coverage. Her certification period ends on June 30, 2023. She has a cell phone number and email address on file.

Certification  
Period

Month 9

March 2023

Barbara gets a **robo call, text message and an email** to remind her to update her contact information with DSS. She has a new address and calls DSS to make sure it is added to her record.

Month 10

April 2023

Barbara receives a notice from the Enrollment Broker telling her that her Medicaid will soon be recertified. Barbara's case is picked up by the straight-through recert process in NC FAST on April 3 but falls out due to an income discrepancy.

Month 11

May 2023

Barbara's caseworker picks up her case on May 2 and is unable to complete the ex parte renewal. He sends her an NCF-20020 Renewal Form. Barbara gets a **robo call, text and email** in the following week to let her know DSS needs information to complete her recertification, and to check her mail.

Month 12

June 2023

Barbara mails the completed NCF-20020 Renewal Form back to her local DSS. Her caseworker completes the recertification, her benefits are continued, and she gets a DSS-8110 Notice of Continued Benefits in the mail.

Requirement 1

Requirement 2

# Flexibilities and Other Efforts to Increase Automation/Save Time

Flexibility / Change	Description	Goal	Implementation Date
Change Reasonable Compatibility threshold from 10% to 20%	Attested income that is within 20% of electronic source income is Reasonably Compatible	Improve STP rates; Increase ex parte rates	January 2023
Straight-through MAGI Recertification Processing Statewide	System processes, approves, and sends renewal notices for some MAGI cases	Reduce caseworker touch on recertifications	January 2023
Update beneficiary address using NCOA or USPS info	Accept updates to beneficiary address from NCOA database and USPS in-state forwarding address without additional confirmation	Change of address from USPS forwarding address label or Enrollment Broker or Health Plan RM reports does not need further confirmation from beneficiary	March 2023
Renewal for individuals with no AVS data returned	Assume no change in resources at renewal when no data returned from AVS within 7 days	Expedite processing when there is no response from AVS	March 2023
Updates to Case Selection Criteria for Straight-through MAGI Recertification Processing	Some case types that were not being selected for STP are now included	Increase automation	March 2023

# Flexibilities and Other Efforts to Increase Automation/Save Time (cont.)

Flexibility / Change	Description	Goal	Implementation Date
Renewal for individuals based on SNAP income	Auto-renew Medicaid benefits for someone with SNAP benefit started/renewed within the past 5 months	Increase automation during unwinding period	April 2023
Straight-through MAGI Application Processing	System processes, approves, and sends approval notice for some MAGI applications	Reduce caseworker touch on applications	April 2023

# Resources

- Medicaid recertification video [English](#) | [Spanish](#)
- Medicaid End of the PHE/CCU website [medicaid.ncdhhs.gov/End-of-PHE](https://www.ncdhhs.gov/End-of-PHE)

With pages for:

- Beneficiaries
  - Providers
  - Community partners
  - Continuous coverage unwinding toolkit
  - Local DSS
  - End of the COVID-19 Federal PHE
- Medicaid recertification fact sheet [English](#) | [Spanish](#)

# NC Health Choice move to NC Medicaid

Approximately 55,000 NC Health Choice beneficiaries will move to NC Medicaid on April 1, 2023.

A provision in the North Carolina state budget, approved in July 2022, directed NCDHHS to move NC Health Choice beneficiaries from the NC Health Choice program to the Medicaid program.

- **Benefits of the change**

With NC Medicaid beneficiaries will:

- Be eligible for Early & Periodic Screening, Diagnosis and Treatment (EPSDT), a benefit designed to discover and treat health conditions before they become serious
- No longer have enrollment fees or copays
- Be eligible for Non-Emergency Medical Transportation (NEMT) for Medicaid-covered services

# NC Health Choice move to NC Medicaid

## What to expect

- NC Health Choice beneficiaries will automatically be transferred to the Medicaid program. No action on their own is needed for the change to take effect.
- A letter was mailed to beneficiaries (their legal guardians) the last week explaining the move.
- NC Health Choice beneficiaries will keep their Medicaid ID number and should keep using their current ID card until they get their new Medicaid ID card in the mail.
- Beneficiaries in the NC Health Choice program cannot opt out of moving to Medicaid. NC Health Choice will no longer be an offered program, beginning April 1, 2022.
- For more information visit our webpage [medicaid.ncdhhs.gov/nc-health-choice-move-medicaid](https://medicaid.ncdhhs.gov/nc-health-choice-move-medicaid)

# NC Health Choice move to NC Medicaid

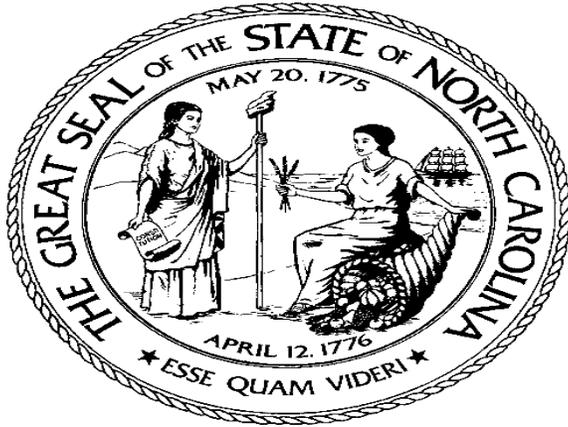
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# Services and Supports for the NC TBI Community

March 27, 2023

Scott Pokorny, Division of MH/DD/SUS

Michelle Merritt, Division of Health Benefits (NC Medicaid)

# TBI Program Components

- TBI State Funds Program
- TBI Grant
- TBI Training
- TBI Screening/Data Initiatives
- Brain Injury Advisory Council
- TBI Waiver
- Brain Injury Resources

# TBI State Funds Program

- The TBI program operates on approximately \$3.9 million dollar legislative appropriation for the purposes of services, supports, education and awareness.
  - \$3,413,868 for the LME-MCO's
    - services and supports
  - \$559,218 for the Brain Injury Association of NC (BIANC)
    - education and awareness
- Some of the services that are commonly provided through the LME-MCO's include:
  - Residential Support
  - Home Modifications
  - Transportation
  - Respite
  - Day Programs
  - Employment

# TBI Grant

- TBI grant has been approved and funded by the federal Administration for Community Living (ACL).
- NC TBI Grant is for \$200,179 per year. This is a five-year grant cycle.
- DHHS contracts with Brain Injury Association of NC (BIANC) to implement most grant objectives and deliverables.
- Grant Goal- To facilitate the continued development and expansion of a comprehensive, multi-disciplinary, and easily accessible system of care for individuals with lived experience and their families.

# TBI Grant Products

- A new Symptoms Questionnaire (SQ) database for professionals and others
- The addition of at least one active online support group
- Updated Salesforce database
- Training curriculum for individuals with TBI
- Training plan for behavioral health providers with emphasis on TBI Waiver, SUD Waiver and MCOs
- TBI screening and referral
- Implementation of Employment and SUD training modules
- Feasibility review of potential Peer Support pilot program
- Updated TBI Needs Assessment (Bi-annually)
- Updated TBI state plan (Annually)

# TBI Training

- **Statewide Training (in-person and webinars)**
  - A variety of training topics are available such as Brain Injury Foundations, Brain Injury Continuum of Care, Behavioral and Crisis De-Escalation after Brain Injury, Concussion: Awareness, Prevention & Return to Learn among many others.
- **Online NC Training Modules**
  - Crisis Intervention Training for Law Enforcement and other First Responders
  - Cognitive and Behavioral Consequences of TBI in Adults
  - Pediatric TBI
  - Primary Care and TBI
  - Public Services and TBI in NC
  - Substance Use and TBI
  - Steps to Successful Employment after Brain Injury
- **Trainings are primarily produced by BIANC and funded by DMH/DD/SAS and the federal Administration for Community Living (ACL). Trainings can be accessed at [www.bianc.net](http://www.bianc.net)**

# TBI Data Initiatives

- DHHS has one set of ICD-10 codes used for all TBI data queries
- NC Tracks Claims Data Reviews

**Table: People with TBI Diagnosis on Innovations Waiver**

Fiscal Year	Count of Clients with TBI on Innovations Waiver	Percent of Clients with TBI on Innovations Waiver	Total Number of Clients on Innovations Waiver
FY2020	560	4.17%	13,434
FY 2021	562	4.15%	13,535

# TBI Data Initiatives

- TBI screening occurs at 5 LME-MCO's.
- Acquired Brain Injury (ABI) screening occurs with one Domestic/Intimate Partner Violence program pilot site with plans to expand to two additional pilot sites.
- TBI SPP Public Health Workforce Grant
  - Greater understanding of the type and extent of TBI beneficiary service usage
  - Identification of potential gaps in services to inform future service program update(s)
  - Identification of potential health disparities for the TBI population
  - Inform potential future focus on the improvement of health outcomes
  - Improvement in workforce competency in the field of TBI
  - Identification of culturally responsive TBI promising and best practices

# Brain Injury Advisory Council

The purpose of the Brain Injury Advisory Council (BIAC) is:

- To review the nature and cause of traumatic and other acquired brain injuries in North Carolina.
- Make recommendations to the Governor, the General Assembly, and the Secretary of Health and Human Services regarding the planning, development, funding, and implementation of a comprehensive statewide service delivery system to address the needs of brain injury survivors.
- There are 33 Council members.
- Council Meets Quarterly.
- Council Standing Committees—Children and Youth, Public Policy, Service Delivery System, Prevention, TBI Grant Steering Committee, TBI State Action Plan Committee and Orientation & Council Logistics Committee.
- DMH/DD/SAS provides administrative support to the Council.

# NC TBI Waiver

- The NC TBI Waiver serves individuals who have sustained a Traumatic Brain Injury on or after their 18th Birthday who have ongoing support needs
- Individuals must be Medicaid eligible
- Individuals must meet one of the two levels of Care included in the TBI Waiver
  - Skilled Nursing Facility
  - Neurobehavioral

# NC TBI Waiver

- The initial TBI Waiver serves individuals in Alliance's Four County Area which includes:
  - Wake County
  - Durham County
  - Johnston County
  - Cumberland County
- As a Model Waiver; the goal of the initial TBI Waiver has been to operationalize a new waiver; serving a new population and to learn from the Pilot
- Implementation continues with collaboration between NC Medicaid, DMH/DD/SAS, Alliance Health, DSS, BIAC, BIANC, & Other Stakeholders

# Goals of the NC TBI Waiver:

- (1) Value and support waiver beneficiaries to be fully functioning members of their community.**
- (2) Promote rehabilitation; evidence based practices, and promising practices that result in real life outcomes for beneficiaries.**
- (3) Offer person centered service options that will facilitate each beneficiary's ability to live in homes of their choice, have employment or engage in a purposeful day of their choice and achieve their life goals.**
- (4) Provide the opportunity for all beneficiaries to contribute to the development of their services.**
- (5) Provide training and support to foster the development of strong natural support networks that enable beneficiaries to be less reliant on formal support systems.**
- (6) Ensure the well-being and safety of the people served.**
- (7) Maximize the beneficiary's self-determination, self-advocacy and self-sufficiency.**
- (8) Increase opportunities for community integration through work, life-long learning, recreation and socialization.**
- (9) Provide quality services and improve outcomes.**

# **Objectives of the NC TBI Waiver Include:**

- 1) Enhancing the focus on Person Centered Planning and aligning services and supports with Person Centered Plans**
- 2) Reforming residential service to facilitate smaller community congregate living situations**
- 3) Facilitating living and working in the most integrated setting**
- 4) Improving outcome-based quality assurance systems**

# NC TBI Waiver

Some examples of Services included in the NC TBI Waiver:

- Cognitive Rehabilitation
- Life Skills Training
- Extended State Plan Allied Health Services
- Personal Care
- Residential Supports
- Supported Employment
- Community Networking
- Day Supports
- Resource Facilitation
- Specialized Consultative Services

# NC TBI Waiver

It has been important for the NC TBI Waiver to:

- Share the word about the Waiver to TBI Survivors & their families and providers serving individuals who have experienced TBIs
- Alliance had to build a Provider Network for the TBI Waiver Beneficiaries and ensure the providers in that network are well trained.
- Like many waiver populations, the needs of individuals who have experienced a TBI often have some similarities, but needs can also vary widely. Learning what is working is key.

# NC TBI Waiver

Implement all aspects of the waiver and review how the tools are working including:

- Health and Risk Assessments
- Waiver Eligibility Processes
- Level of Care Tool
- Waiver Definitions
- Provider Network Development and Training
- Utilization of Services
- Unique needs of the TBI Waiver Population including need for services to address Mental Health and/or Substance Use Needs

# Approved Changes to the TBI Pilot Waiver

- Lower age of Date of Traumatic Brain Injury down from 22 to 18
  - Beneficiaries at age 18 often have needs that are more similar to the Adult TBI population than the Innovations population
  - Innovations Waitlist
  - CAP DA Waitlist (only applicable to some counties)
- Change the eligibility requirement to 300% Federal Poverty Line
  - Working age adults and resources

# **Approved Changes to the TBI Pilot Waiver**

**Add Supported Living as service definition for the TBI Pilot Waiver**

- This service is available through the NC Innovations Waiver**
- Allows individuals to live in their own home and receive supports**
- Promotes Community Inclusion**

**A Remote Supports Pilot was initiated in the TBI Waiver in February 2023.**

# **GOAL: Statewide Rollout**

**❖ The goal is to go statewide (all regions) within 5 years**

- Work will be done to determine the most appropriate process for statewide roll
  - This expansion does not have to be one LME/MCO at a time

# NC Traumatic Brain Injury Services

- If you or your loved one has a Brain Injury and have long term support needs it is important that you know about the LME/MCO system
- There are currently 6 LME/MCOs in North Carolina
  - The LME/MCOs will transition to Tailored Plans on October 1, 2023
- This website has a directory that lists all the LME/MCOs, their contact information and the counties they serve

<https://www.ncdhhs.gov/providers/lmemco-directory>

## Accessing Traumatic Brain Injury Services in NC

### What do I need to know?

- You **MUST** have established residency in NC
- Documentation regarding TBI diagnosis is **REQUIRED** (i.e., medical records)
  - Individuals diagnosed with a brain injury by the age of 21 may be eligible for I/DD services
- NC has a Registry of Unmet Needs for the **Innovations Waiver**

### Who do I contact?

- To check for TBI services available in your area, **find and contact your respective LME-MCO**
- For Disability Benefits (i.e. SSI), find and contact your **county's Social Security Administration** and/or **Apply for Disability Benefits through SSA online**
- For other benefits (NC Medicaid, assistance programs, etc.) find and contact your **county's Department of Social Services** or **Apply Online**

### Where can I find more information?

- Ages 0-5 **Children's Developmental Services Agencies**
- Ages 0-20 **Children and Youth with Special Health Care Needs** or 1-800-737-3028
- Ages 0-21 with Medicaid **Early Periodic Screening Diagnostic and Treatment (EPSDT)**
- **Medicaid Programs and Services**
- **Services for People who do not have Medicaid**

### What do I do if I have more questions?

- **Contact your respective LME-MCO** for questions about TBI Services
- For **State Operated Healthcare Facilities** contact [monica.harrelson@dhhs.nc.gov](mailto:monica.harrelson@dhhs.nc.gov)
- For all other community services and/or trouble contacting an LME-MCO, contact the Customer Service and Community Rights Team at 984-236-5300 or email [dmh.advocacy@dhhs.nc.gov](mailto:d mh.advocacy@dhhs.nc.gov).

<https://www.ncdhhs.gov/media/13325/download?attachment>

# Additional Resources

## Ages 0-21 with Medicaid

- **Early Periodic Screening Diagnostic and Treatment (EPSDT)**
  - **Personal Care Services** can be requested under EPSDT for those with Medicaid aged 21 and under with a physician's referral
- **Community Alternatives Program for Children (CAP/C)**
  - Ages 0-20
- For Research Based-Behavioral Health Treatment eligibility, **Contact your respective Local Management Entity-Managed Care Organization (LME-MCO)**

## Additional Medicaid Programs and Services

- **Behavioral Health Services**
- **Community Alternatives Program for Disabled Adults (CAP/DA)**
- **Home Health Services**
- **Personal Care Services (PCS)**
- **Private Duty Nursing**
- For additional Medicaid services eligibility (B3 Services, In Lieu of Services, ICF-IID), **Contact your respective LME-MCO**

## Additional Resources

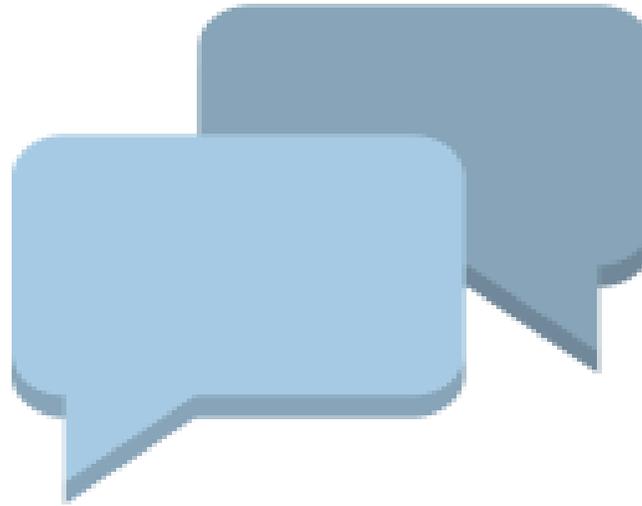
- **Contact your respective LME-MCO** for services available in you area
- **First in Families of North Carolina**
- **Brain Injury Association of North Carolina**
- **Disability Rights North Carolina**
- **Community Empowerment and Engagement**
- Contact **Hope4NC** for emotional support and additional community resources.

<https://www.ncdhhs.gov/media/13325/download?attachment>

# **Questions or Comments?**

**Please reach out to  
[TBIContact@dhhs.nc.gov](mailto:TBIContact@dhhs.nc.gov)**

# Questions and Answers



Comments, questions and feedback are welcome at:

- [BHIDD.HelpCenter@dhhs.nc.gov](mailto:BHIDD.HelpCenter@dhhs.nc.gov)
- [Medicaid.Transformation@dhhs.nc.gov](mailto:Medicaid.Transformation@dhhs.nc.gov)

Previous recordings and presentation slides for this webinar series can be found on the Community Engagement and Training webpage: <https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/councils-and-committees/community-engagement-and-training>

# Brain Injury Resources

**Brain Injury Association of NC (BIANC)**

[www.bianc.net](http://www.bianc.net)

**North Carolina Department of Health and Human Services (NC DHHS) - TBI Program**

<https://www.ncdhhs.gov/assistance/disability-services/traumatic-brain-injury>

**Administration for Community Living (ACL)**

<https://acl.gov/programs/post-injury-support/traumatic-brain-injury-tbi>

**Alliance –TBI Waiver**

[Traumatic Brain Injury \(TBI\) - Alliance Health \(alliancehealthplan.org\)](http://alliancehealthplan.org)

**Center for Disease Control and Prevention (CDC)**

<https://www.cdc.gov/traumaticbraininjury/index.html>

**National Association of State Head Injury Administrators (NASHIA)**

[www.nashia.org](http://www.nashia.org)

# Member Resources

- NC Medicaid Enrollment Broker
  - Website [ncmedicaidplans.gov](https://ncmedicaidplans.gov)
  - Call Center 1-833-870-5500 TTY: 711 or [RelayNC.com](https://RelayNC.com)  
(Monday–Friday, 7 a.m. to 8 p.m., Saturday, 7 a.m. to 5 p.m.)
  - Tailored Plan webpage [ncmedicaidplans.gov/learn/get-answers/tailored-plan-services](https://ncmedicaidplans.gov/learn/get-answers/tailored-plan-services)
- NC Medicaid Behavioral Health I/DD Tailored Plan webpage [medicaid.ncdhhs.gov/Behavioral-Health-IDD-Tailored-Plans](https://medicaid.ncdhhs.gov/Behavioral-Health-IDD-Tailored-Plans)
- NC Medicaid Ombudsman
  - Website [ncmedicaidombudsman.org](https://ncmedicaidombudsman.org)
  - Phone 877-201-3750 (Monday–Friday, 8 a.m. to 5 p.m.)
- NC Medicaid Website [medicaid.ncdhhs.gov](https://medicaid.ncdhhs.gov)