

Medicaid Expansion

What Providers and Subcontractors need to know

Content provided by the NC Department of Health and Human Services.



Delivering the Next
Generation
of Health Care

More North Carolinians Can Get Covered

Starting December 1, 2023, more North Carolinians can get health care coverage through Medicaid.

- North Carolina is providing health care coverage to more people through Medicaid.
- Medicaid will cover people ages 19 through 64 years with higher incomes.
- Individuals may be able to get Medicaid even if they didn't qualify before.
- Medicaid pays for doctor visits, yearly check-ups, emergency care, mental health and more – at little or no cost to beneficiaries.

Coverage through Medicaid lets members get the health care they need

Medicaid covers most health services, including but not limited to

- **primary care** so they can go to a doctor for a check-up or when they are not feeling well
- **hospital services** when they need to stay overnight (inpatient) or when they can go home the same day (outpatient)
- **maternity and postpartum care** if they are pregnant and after giving birth
- **vision and hearing services**
- **prescription drug benefits** to pay for their medicines
- **behavioral health**
- **preventive** and wellness services
- **devices** and other therapies

More North Carolinians will be eligible

Individuals will be eligible if they are **19 through 64 years old** AND their income is up to **138% of the Federal Poverty Level**.

Household Size	Annual Income
Single Adults	≤ \$20,120
Family of 2	≤ \$27,214
Family of 3	≤ \$34,307
Family of 4	≤ \$41,400
Family of 5	≤ \$48,493
Family of 6	≤ \$55,586

No changes for current Medicaid beneficiaries

If someone was eligible before, they are still eligible. Nothing changes for them.

Group	Annual Income in 2023 (rounded)
Children	211% of Federal Poverty Level 1 – \$30,800 2 - \$41,600 3 - \$52,500
Pregnant Women	196% of Federal Poverty Level 1 - \$28,700 2 - \$38,700 3 \$48,700
Older Adults > 65 People with blindness People with disabilities *Asset limits also apply	100% of Federal Poverty Level 1 - \$14,600 2 - \$19,700

Are immigrants now eligible for Medicaid?

Some non-U.S. citizens can get health coverage through Medicaid.

To be eligible, they must be:

- A person living in North Carolina
- A non-citizen with qualified immigration status. Most people must wait five years. Qualified immigration status includes:
 - Lawful Permanent Residents (LPR/Green Card Holder)
 - Asylees
 - Refugees
 - Cuban/Haitian entrants
 - Paroled into the U.S. for at least one year
 - Conditional entrant granted before 1980
 - Battered non-citizens, spouses, children, or parents
 - Victims of trafficking and his or her spouse, child, sibling, or parent or individuals with a pending application for a victim of trafficking visa
 - Granted withholding of deportation
 - Member of a federally recognized Indian tribe or American Indian born in Canada
 - Citizens of the Marshall Islands, Micronesia, and Palau who are living in one of the U.S. states or territories (referred to as Compact of Free Association or COFA migrants)
- Non-citizens without documents who do not qualify for full health coverage under Medicaid may be able to get temporary coverage for emergency conditions that need to be treated in an emergency room.

What does Medicaid cost?

- There are no monthly premiums.
- Medicaid pays the cost for most health services.
- The highest copay is \$4 and that is only required on some services.

What information does someone need to apply?

It takes time to complete the application. Here is some of the information they will be asked to provide for each person applying:

- Full legal name
- Date of Birth
- Social Security number (or immigration documents)
- North Carolina residency
- Income information (from paystubs, W-2 forms, tax returns or business records)

North Carolina uses external resources to verify the information provided. If more information is needed, the applicant will receive a letter in the mail from their local DSS.

What documents can be used?

If DSS needs more information, the following items can be used:

North Carolina residency	A photo ID with NC address listed, or <ul style="list-style-type: none"> • A utility bill, or • A lease or mortgage agreement, or • Vehicle registration, or • Documentation of employment, or If they do not have any documentation, they can check a box in ePASS labeled “NC Residency Declaration.”
Income	If they are Employed - pay stubs, employer verification or your most recent tax return to show proof of income. <ul style="list-style-type: none"> • If they are Self-Employed - most recent tax return or copies of business records. If they don't have that, they can fill out a Verification Form for Self-Employment Income and Expenses form.
Date of Birth	<ul style="list-style-type: none"> • A photo ID with their date of birth listed, or • Birth certificate
Social Security Number	<ul style="list-style-type: none"> • A copy of their Social Security card, or • Another official document containing their name and SSN, or • A military ID card
Citizenship	<ul style="list-style-type: none"> • Birth Certificate, or • Passport
Immigration Status	A copy of their VISA/immigration card.

What is someone currently has limited benefits through Family Planning Medicaid?

If they meet the new eligibility rules, they will automatically receive full Medicaid coverage as of December 1, 2023 and will:

- Get a letter from the NC Department of Health and Human Services letting them know that they will start getting full Medicaid coverage.
- Be assigned a health plan. If they want to change it, they will have 90 days to pick a new one.
- Get a packet from their health plan with a new Medicaid ID card. Their ID card also has the name of their primary care doctor. They can change the doctor that was assigned by contacting their health plan.
- If they have health coverage through HealthCare.gov, they will need to cancel that plan.

They should not cancel their plan until they receive information from their new health plan through Medicaid.

How to apply for Medicaid

People can enroll in four ways:

 <p>ePASS</p> <p>epass.nc.gov</p>	 <p>Paper application</p> <p>ncgov.servicenowservices.com</p>	 <p>In person at your local DSS office</p> <p>ncdhhs.gov/localDSS</p>	 <p>Call DSS office</p> <p>ncdhhs.gov/localDSS</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

How long does it take to find out if they are covered?

It may take up to 45 days after they apply. Incomplete applications may take longer.

They can help the process go faster by:

- **Applying online at ePASS and providing all information requested.** If the application is incomplete, it may take longer to process. DSS will reach out to them if DSS does not have what is needed to complete the application, so they should be sure to respond to mail or phone calls.
- **Keeping their contact information up-to-date in ePASS, so they don't miss important information about their Medicaid benefits**
 - **Sign up for an enhanced ePASS account.** An enhanced ePASS account allows them to keep information updated without having to contact the local Department of Social Services (DSS) office

What happens once someone is approved?

Most people who get health coverage through Medicaid are part of NC Medicaid Managed Care. This means they can choose the health plan that is best for them.

- All health plans offer the same base services. Some have extra services. Each has its own network of doctors and professionals.
- They can choose their health plan and their primary care doctor - family doctor, clinic or health care provider - when they apply.
- They will receive a health care plan ID card in the mail. It will come from the health plan that they selected during the application process. If they did not select a health plan, one will be assigned to them. They have 90 days to pick a new one. They will receive a packet from the NC Medicaid Enrollment Broker that tells them how to change plans.
- Their ID card also has the name of their primary care doctor. If they did not choose one when they applied, one will be assigned to them.

What if they are still not eligible?

If they still are not eligible for health coverage through Medicaid, they may still be able to get health coverage through the ACA Marketplace at HealthCare.gov

- Open enrollment for 2024 begins November 1, 2023, and ends January 15, 2024. they can apply at other times of the year if they qualify for special enrollment such as loss of a job, change in family circumstance, or loss of Medicaid coverage.
- Households with incomes up to 400% of the federal poverty level may be eligible for help to pay for their health coverage.
- If they don't have health insurance, they can also get basic health care services at federally qualified health centers, rural health clinics, and free and charitable clinics. Costs vary based on income. Learn more at <https://www.ncdhhs.gov/divisions/office-rural-health/safety-net-resources>.

ACNC Note: AmeriHealth Caritas offers a plan on the ACA Marketplace that serves 37 North Carolina counties. Find out more about AC Next at <https://amerihealthcaritasnext.com/nc/view-plans/coverage-area.aspx>

Additional Content

Policy Flexibilities



Delivering the Next
Generation
of Health Care

Policy Levers to Ease Beneficiary Confusion and Provider Administrative Burden

Policy Lever	Duration	Timeframe	
Honor Existing NC Medicaid Medical PAs	182 days	12/1/23 – 5/31/24	This only applies to Medical Health services (physical, behavioral health and I/DD services) not Pharmacy
Honor Existing NC Medicaid Pharmacy PAs	182 days (or the life of the PA)	12/1/23 – 5/31/24	
Allow Expedited PA Requests/Review for New Expansion Members	182 days	12/1/23 – 5/31/24	TAT 72 hours This only applies to Medical Health services (physical, behavioral health and I/DD services) not Pharmacy
Non-Par Providers Paid at Par Rates	182 days	12/1/23 – 5/31/24	This applies to all Medical (physical, behavioral health and I/DD services) providers and Pharmacy providers
Non-Par Providers Follow In-Network Prior Auth Rules	91 additional days	6/1/24 – 8/31/24	This applies to all Medical (physical, behavioral health and I/DD services) providers and Pharmacy providers
Ability to Switch PCP Without Cause for All Members	274 days	12/1/23 – 8/31/2024	Not limited to Expansion members, applies to <u>all</u> members