

Recipient Notices, Spring 2012

This notice is being sent to all Medicaid and NC Health Choice recipients so that everyone knows about the important information and changes.

Important Information For Medicaid Recipients Under Age 21

This pertains to all services mentioned in this notice. Children under age 21 who have Medicaid are entitled to medically necessary screening, diagnostic and treatment services that are needed to “correct or ameliorate defects and physical and mental illnesses and conditions” under the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program, regardless of whether the requested service is covered under the Medicaid State Plan. For more information about EPSDT, please refer to: <http://www.ncdhhs.gov/dma/epsdt>. EPSDT does not apply to children who have NC Health Choice.

IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID AND NORTH CAROLINA HEALTH CHOICE FOR CHILDREN RECIPIENTS

This notice is to let you know about important information and changes that are taking place in Medicaid and NC Health Choice.

Diabetic Supplies

Beginning November 15, 2011, your diabetic meter is the ACCU-CHEK meter and ACCU-CHEK supplies. The deadline to change to an ACCU-CHEK meter and testing supplies has been extended. All NC Medicaid and Health Choice recipients must be changed to an ACCU-CHEK meter and testing supplies by **April 30, 2012**. The ACCU-CHEK meter and supplies are available at all retail pharmacies and durable medical equipment companies. This change does not apply if your diabetic testing supplies are paid for by Medicare or private insurance in addition to Medicaid, or if you are on an Insulin pump.

If you have questions about this change, call the ACCU-CHEK Customer Care at 1-877-906-8969. You may also go to the ACCU-CHEK web site at www.accu-chek.com.

Reporting Changes

When changes occur, you must report them to your county case worker. You can report changes in person, by phone, or by mail to your case worker. If you do not report changes or if you allow anyone to use your Medicaid/NCHC card that is not listed on the card, you can be lawfully punished. You will be required to repay any medical bills and/or premiums that were paid incorrectly.

By accepting North Carolina Medicaid/NCHC, you understand that the information you give about you and your family will be checked. You agree to help do that and allow Medicaid/NCHC to get the information it needs from government agencies, employers, medical providers, and others.

Changes that need to be reported

- Changes in income for you, your family and anyone getting Medicaid/NCHC (This includes parents of children getting Medicaid/NCHC)
- Changes in the amount of child support or alimony
- Changes in the amount of daycare you pay
- Changes in health insurance for anyone who gets Medicaid/NCHC
- Change in your home or mailing address
- If anyone moves into or out of your home
- You start or stop receiving unemployment, workman’s compensation, disability, social security, VA, and/or any other income

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How to Report Recipient Fraud and Abuse

- Call your county department of social services office, or
- Contact the Division of Medical Assistance by calling the DHHS Customer Service Center at 1-800-662-7030 (English or Spanish), or
- Call the Medicaid fraud, waste, and program abuse tip line at 1-877-DMA-TIP1 (1-877-362-8471), or
- Complete and submit a Medicaid fraud and abuse confidential online complaint form via <http://www.ncdhhs.gov/dma/fraud/reportfraudform.htm>.

IMPORTANT INFORMATION FOR NORTH CAROLINA MEDICAID RECIPIENTS

This notice is to let you know about important information and changes that are going to be taking place in Medicaid.

Attention all Behavioral Health Recipients

During 2012 changes are planned for your behavioral health care coverage. Over the 2012 year, your services will begin to be managed by your Local Management Entities (LMEs). LMEs will make this change on the proposed timeline:

- April 1, 2012 - PBH LME, expanding to include Orange, Person, and Chatham Counties.
- April 1, 2012 - East Carolina Behavioral Health LME, consisting of Beaufort, Bertie, Camden, Chowan, Craven, Currituck, Dare, Gates, Hertford, Hyde, Jones, Martin, Northampton, Pamlico, Pasquotank, Perquimans, Pitt, Tyrell, and Washington Counties.
- July 1, 2012 - Sandhills LME, consisting of Anson, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond, and Guilford Counties.
- July 1, 2012 - Smoky Mountain Center, consisting of Alexander, Alleghany, Ashe, Avery, Caldwell, Cherokee, Clay, Graham, Haywood, Jackson, Macon, McDowell, Swain, Watauga, and Wilkes Counties.
- January 1, 2013 - Pathways, consisting of Burke, Catawba, Cleveland, Gaston, Iredell, Lincoln, Surry, and Yadkin Counties.
- January 1, 2013 - Eastpointe, consisting of Bladen, Columbus, Duplin, Edgecombe, Greene, Lenoir, Nash, Robeson, Sampson, Scotland, Wayne, and Wilson Counties.
- January 1, 2013 - Mecklenburg LME which will cover Mecklenburg County.
- January 1, 2013 - The Durham Center, consisting of Durham, Cumberland, Johnston, and possibly Wake Counties.
- January 1, 2013 - CenterPoint, consisting of Davie, Forsyth, Rockingham, and Stokes Counties.
- January 1, 2013 - Southeastern Center (ECCS) consisting of Brunswick, New Hanover, Pender, Onslow, and Carteret Counties.

This should not change your services. You may have a change in who provides you services. The provider must be someone who is enrolled to provide services with the LME in your county. Your LME is responsible for making sure that your treatment needs are covered by an approved provider. Once the LME begins managing your services, Targeted Case Management (TCM) will no longer be a covered service. For guardians, your child could still receive TCM under EPSDT if needed. They may receive a similar service to address their needs.

Change to your Medicaid Identification Card (MID)

If you receive mental health services through a Local Management Entity (LME), beginning in April 2012, all new, replacement and annual MID cards will have your LME printed on the left hand side of the card above your name.

Medical Advice is Available 24/7

If you have a CCNC/CA doctor listed on your Medicaid ID card, you have access to 24-hour medical advice. If you have a medical problem that is **NOT AN EMERGENCY** but cannot wait until your doctor's office opens, you can call your doctor for medical advice. If you call your doctor listed on your Medicaid ID card you should receive a call back within one hour. If you have questions, call your doctor's office or your local DSS office.

Who to Contact With Questions About Information in This Notice: For questions or concerns please contact the DHHS Customer Service Center at 1-800-662-7030 (English/Spanish) or 1-877-452-2514 (this is a TTY number and only those with TTY equipment can talk to a person when this number is dialed). The DHHS Customer Service Center is available to assist you Monday – Friday 8 am to 5 pm.