

## MANAGED CARE TERMS

1. Carolina ACCESS (CA): Primary care case management program serving as Medicaid's foundation managed care plan. The agency contracts directly with providers to serve as a medical home for Medicaid recipients enrolled with the practice. The medical home provides a primary care provider (PCP) who provides and coordinates the care of the practice's enrollees. Carolina ACCESS and Community Care of North Carolina are often used interchangeably. **Carolina ACCESS is the name which Medicaid recipients associate with Medicaid managed care and should continue to be used when talking with recipients about Medicaid managed care.**
2. Community Care of North Carolina (CCNC): Builds upon the Carolina ACCESS infrastructure by joining PCPs, departments of social services, local health departments, hospitals and other medical service providers into community networks. The networks assume responsibility for Medicaid recipients by identifying costly patients and costly services. The networks provide case management and disease management services based on the medical and utilization issues identified by the network medical management committee. Distinguishing features are: local collaboration and community focus; population based identification of at-risk enrollees; implementing targeted care management initiatives; developing and defining budget and utilization targets and quality indicators. Community Care of North Carolina and Carolina ACCESS are often used interchangeably.
3. Community Care of North Carolina/Carolina ACCESS (CCNC/CA): Term used in this manual to refer to Medicaid managed care.
4. CCNC/CA Enrollment Form and CCNC/CA Medical Exemption Request: Forms used by caseworkers to show that a choice of a medical home has been made by the recipient or if not enrolled, why the recipient was exempted from enrollment. The form verifies freedom of choice for the recipient. CA and CCNC are seamless to the recipients; however, this form is used for enrollment into any medical home.
5. Primary Care Provider (PCP): A person or "gatekeeper" who ensures access to care and continuity of medically necessary services. Primary care provider and medical home are often used interchangeably.
6. Medical Home: The one place that provides continuity of health care services. It is a place where a person's health care needs are known and care can be better managed. With a medical home, the need to go to the emergency department at a hospital is greatly diminished. Medical home and primary care provider are often used interchangeably.
7. CCNC Administrative Entity: Administrative arm of each network. It keeps the network operating and viable.
8. Primary Care Case Management (PCCM): A type of managed care that links recipients with a PCP and creates a medical home. Providers continue to be paid fee for service and receive a management fee for meeting all the conditions of the contract between the provider and the state. CCNC/CA is a PCCM program.