I. BACKGROUND

In June 2009, the Managed Care Section began the first of several attempts to ensure that every Medicaid recipient who is not exempt is enrolled in a managed care program. At that time, the Managed Care Section identified Medicaid recipients who were seeing a primary care physician (PCP) who was enrolled in the Community Care of North Carolina or Carolina ACCESS (CCNC/CA) programs but the recipient was not enrolled in CCNC/CA. These recipients were sent a letter informing them that they were being enrolled in CCNC/CA with the primary care physician the recipient was seeing for his medical needs. The letter also instructed the recipient that if this was not the physician/medical home he wishes to continue to use, he was to contact his local county department of social services to request a different physician/medical home.

The second phase of the CCNC/CA enrollment identifies those Medicare/Medicaid recipients who are seeing a primary care physician who is enrolled in CCNC/CA and the recipient is not. This phase addresses dual eligible recipients in twenty six intervention counties: Bertie, Buncombe, Cabarrus, Chatham, Chowan, Edgecombe, Gates, Green, Hertford, Hoke, Lincoln, Madison, Mecklenburg, Mitchell, Montgomery, Moore, New Hanover, Orange, Pasquotank, Pender, Perquimans, Pitt, Sampson, Stanly, Union, and Yancey.

Identified recipients in Lincoln County began receiving letters (attachment 1 and attachment 2) informing them of their enrollment during the last two weeks of December 2009. Recipients in the other intervention counties will receive letters during January 2010. Recipients in the remaining counties will be addressed in phase three. We will provide you with further information about phase three and these recipients.

The letter informs the recipient with whom he is enrolled as his primary physician and medical home and instructs him to contact the Medicaid Customer Service at 1-888-245-0179 if he wants a different medical home. The Managed Care Section Customer Service is responsible for keying the PCP in EIS. If a recipient calls the county dss, refer him to the Medicaid Customer Service.

The Medicaid caseworker is reminded to continue to explain the managed care program to every applicant and recipient (a/r) and encourage them to enroll.
II. PROCEDURES TO FOLLOW IN RESPONSE TO LETTERS MAILED DECEMBER 2009 AND JANUARY 2010 TO IDENTIFIED RECIPIENTS

A list of recipients in your county who have been identified and are sent a letter during December 2009 and January 2010 can be found in NCXPTR. The name of the report is DHRWDB OPT OUT DUALS CAII AND CAI.

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

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

This material was researched and written by Susan Ryan, Policy Project Manager, Medicaid Eligibility Unit.