

Excluded Populations

The RFP uses the terms *excluded* and *exempt* for certain populations. What is the difference? Populations have been designated by the General Assembly as *excluded*. Some of the excluded populations are only excluded from managed care for a certain period of time. It is important to note that all of the excluded populations will continue to be served under Medicaid as they currently are served. Populations designated as *exempt* only include those who fall under the BH/IDD Tailored Plan and will initially continue to be managed by those LME/MCOs that are awarded a BH/IDD Tailored Plan contract under the current managed care structure for BH/IDD.

Populations *excluded* from Medicaid services managed the PHP contracts:

- a) Beneficiaries who are enrolled in both Medicare and Medicaid for whom Medicaid coverage is limited to the coverage of Medicare premiums and cost sharing;
- b) Qualified aliens subject to the five-year bar for means- tested public assistance under 8 U.S.C. § 1613 who qualify for emergency services under 8 U.S.C. § 1611;
- c) Undocumented aliens who qualify for emergency services under 8 U.S.C. § 1611;
- d) Medically needy Medicaid beneficiaries;
- e) Presumptively eligible beneficiaries, during the period of presumptive eligibility;
- f) Beneficiaries who participate in the North Carolina Health Insurance Premium Payment (NC HIPP) program;
- g) Beneficiaries enrolled under the Medicaid Family Planning program;
- h) Beneficiaries who are inmates of prisons;
- i) Beneficiaries being served through the Community Alternatives Program for Children (CAP/C);
- j) Beneficiaries being served through the Community Alternatives Program for Disabled Adults (CAP/DA); and
- k) Beneficiaries with services provided through the Program of All Inclusive Care for the Elderly (PACE).³

Populations *exempt* from Medicaid services managed under PHP contracts:

Beneficiaries with a serious mental illness, a serious emotional disturbance, a severe substance use disorder, an intellectual/developmental disability, or who have survived a traumatic brain injury and who are receiving traumatic brain injury services, who are on the waiting list for the Traumatic Brain Injury waiver, or whose traumatic brain injury otherwise is a knowable fact (except beneficiaries enrolled in the foster care system, formerly enrolled in foster care system up to age 26, or receiving Title IV-E adoption assistance, who will be excluded from Medicaid Managed Care during this time).