

Medicaid Managed Care Eligibility

Most Medicaid beneficiaries will enroll in Medicaid managed care— either in a Standard Plan or a BH I/DD Tailored Plan.

Status of Medicaid Managed Care Enrollment, Per Legislation	Populations
Included	<ul style="list-style-type: none"> ▪ Medicaid and NC Health Choice-enrolled children ▪ Parents and caretaker adults ▪ People with disabilities who are not dually eligible for Medicaid and Medicare
Exempt	<ul style="list-style-type: none"> ▪ Members of federally recognized tribes
Excluded	<ul style="list-style-type: none"> ▪ Medically needy beneficiaries (have a spend-down or deductible they must meet before benefits begin)* ▪ Health Insurance Premium Payment program* ▪ CAP/C waiver enrollees ▪ CAP/DA waiver enrollees ▪ Beneficiaries with limited Medicaid benefits— family planning, partial duals, qualified aliens subject to the five-year bar, undocumented aliens, refugees, and inmates ▪ PACE population
Delayed	<p>Until July 2021</p> <ul style="list-style-type: none"> ▪ BH I/DD Tailored Plan-eligible beneficiaries (choice to opt into Standard Plan) <i>Includes both Medicaid-only beneficiaries and dual eligibles. Dual eligibles will not have the choice to opt into a Standard Plan and will obtain only behavioral health and I/DD services through their BH I/DD Tailored Plan; they will receive all other Medicaid-covered services through Medicaid fee-for-service</i> ▪ Beneficiaries in foster care under age 21, children in adoptive placement, and former foster youth up to age 26 who aged out of care <p>Until 2023</p> <ul style="list-style-type: none"> ▪ Long-stay nursing home population ▪ Dual eligibles who are not BH I/DD Tailored Plan eligible

Managed care enrollment does not impact Medicaid eligibility.

*Beneficiaries enrolled in the Innovations or TBI waivers are not excluded from Medicaid managed care, and will default into BH I/DD Tailored Plans upon their launch.