



# Medicaid Care Management A Tool for Families Having Children with Special Healthcare Needs

♥ A suggested process for making an informed decision

This worksheet (on the back) is intended to help you through the process of making an informed decision regarding your child's Medicaid and their new Care Management Health Plan.

The type of assistance your child receives will determine whether you are required to choose a Health Plan. The information you receive from NH Medicaid will identify your child's status as mandatory or voluntary for picking a Managed Care Plan (i.e. Well Sense Health Plan, NH Health Families or Meridian). If your child is **mandatory**, you **must** choose a health plan by the due date indicated on the paperwork.

These are the people in your case who have not yet picked a Health Plan and must pick one or opt out by the due date. If these people don't pick a Health Plan by this date, a Health Plan will be assigned for the individual:

Name	Enrollment Status	Reason	Due Date
Person or Child's Name	Mandatory	N/A	11/13/2013

When picking a Health Plan, each person will also be able to opt out if he or she has one.

Name	Enrollment Status	Reason	Due Date
Person or child's name	Voluntary	Medicare Recipient	11/13/2013

Voluntary means you can opt out. If you opt out you will still receive Medicaid through the state Medicaid Program.

To opt-out means you **tell** Medicaid that you do not want to pick a health plan.

If your notice identifies your child as **voluntary** you may choose between selecting or not selecting a Health Plan. To be **voluntary** means you have an option to pick a Health Plan or opt-out. However, it is important to respond whether you are choosing a health plan or opting out. If you do not respond Medicaid will auto-assign your child to a health plan. That means that they will pick a Health Plan for you.

- ♥ For Medicaid recipients who opt out, you will continue to get your Medicaid services as you currently do. This is through the fee-for-service model within NH Dept. of Health and Human Services. Medicaid is currently identifying the "opt out" as a 1 year option.
- ♥ If you choose a plan and are unsatisfied you have the option of changing plans within the first 90 days of coverage. If you are voluntary you can change anytime within this first year, you may also choose to opt out during this time.
- ♥ To talk with a service representative call 1-888-901-4999 and they will assist you to enroll with the Health Plan of your choice. If you have a NH Easy account, you can enroll on-line with NH Easy (<https://nheasy.nh.gov>).

### Some Pro's and Con's of choosing a Health Plan ....

- Pro - You will have access to the "extra" services offered by the MCO's.
- Pro - You will have access to a care manager who can help you maneuver through Medicaid services.
- Pro - Should your child become a Mandatory enrollee in the future you will already be in a managed care plan.
- Con - Service providers may experience some confusion as they begin billing processes with three new Managed Care companies. Families can expect to feel the impact of this.
- Con - Provider lists are still being negotiated and it might not be clear before your due date which plan meets your child's needs.
- Con - You may not be able to access all of your specialists in one plan, resulting in choosing new providers.

**The tool** - Once you have completed the table below, look at your “must keep” column and which Health Plan lists your child’s provider. Think about the providers in the other columns and decide on a plan that best suits your child’s needs. For those who are voluntary, opting out is an option, if you do not see a way to get your child’s healthcare met from a single plan.

**NOTE:** Remember to let Medicaid know of your decision otherwise you will be auto-assigned to a health plan.

Child’s Providers/Services	How many times a yr. does your child see the provider?	Prioritize What is the most important for you and your child			Medicaid Health Plans Check off the health plan in which your providers are listed		
		Must keep	Change possible	Willing to change	Well Sense Health Plan	New Hampshire Healthy Families	Meridian Health Plan
♦ Primary Doctor or Pediatrician							
♦ Specialist: (i.e. Neurologist, Cardiologist, etc.) List below:							
▪							
▪							
▪							
▪							
♦ Rehabilitative Services: (i.e. PT and OT, Speech and Language, etc.) List below:							
▪							
▪							
▪							
♦							

♦ Other services you may need to consider: (These services should be listed in the MCO’s benefit handbook or you can call the MCO and ask how these services will be addressed)	Well Sense Health Plan	New Hampshire Healthy Families	Meridian Health Plan
♦ Medications/Pharmacy (including compounds)			
♦ Transportation Reimbursement			
♦ Wheelchair Transport to Doctors			
♦ Deaf services			
♦ Cultural/Language services			
♦ Other			

♥ Please Note: Service providers are still signing on with the Health Plans. You may want to call your child’s provider and inquire which plans they are in enrolled with.

♥ This tool was a collaboration between NH Family Voices and NHDHHS, Special Medical Services - 10/13