



## Medicaid Care Management A Tool for Making an Informed Decision

**On August 1, 2019 Open Enrollment** for NH Medicaid recipients begins.

You will have thirty days to select a Managed Care health plan. The NH Department of Health and Human Services is adding a new Managed Care Organization, AmeriHealth Caritas NH, they are joining NH Healthy Families and Well Sense Health Plan in serving citizens who have NH Medicaid health insurance.



Open enrollment is a 30-day opportunity to choose a health plan based on your needs and satisfaction with your current plan. If you plan to keep the health plan you are with now you do not have to do anything.

If you want to choose a new plan it is important to choose it by August 30, 2019. After August 30, you still have 90 days to switch to a different health plan.

### **Choosing a Managed Care Plan**

NH Family Voices has created this worksheet (on the back) to help you through the process of making an informed decision regarding your health plan selection.

NH Medicaid Care Management (MCM) program uses (3) health plans. The health plans cover the same services that NH Medicaid does. The health plans also offer value-added services or extra services and programs, at no cost to you. Contact the health plans or visit their websites to learn more. Extra services vary by health plan.

AmeriHealth Caritas NH	Member Services: (1-833) 704-1177 / TTY: 1-855-534-6730 Web: <a href="http://www.amerihealthcaritasnh.com">www.amerihealthcaritasnh.com</a>
New Hampshire Healthy Families	Member Services: (1-866) 769-3085 / (TTY/TDD: 1-855-742-0123) Web: <a href="http://www.nhhealthyfamilies.com">www.nhhealthyfamilies.com</a>
Well Sense Health Plan	Member Services: (1-877) 957-1300 / (TTY/TDD: 711) Web: <a href="http://www.wellsense.org">www.wellsense.org</a>

Each health plan has its own network of doctors, nurses, and other providers who work together to give you the care you need. Health plans cover the same basic services and programs you have always had with Medicaid but there may be some changes in medications and the steps for prior-authorizations.

- ◆ If you have questions about enrolling with a MCO call Medicaid Service Center toll-free at 1-888-901-4999 (TTY: 1-800-735-2964, ext. 711) and they will assist you.

You can also call or visit a ServiceLink Resource Center at 1-866-634-9412 or [www.servicelink.nh.gov](http://www.servicelink.nh.gov)

If you have a NH Easy account, you can enroll on-line with NH Easy Gateway to Services (<https://nheasy.nh.gov>)

**The tool** - Once you have completed the table below, look at your “must keep” column and which health plan lists your provider. Think about the providers in the other columns and decide on a plan that best suits your needs.

Considerations:

- ◆ Your Providers may have chosen to sign on with all health plans or just one or two. You may want to call your providers and inquire which plans they are in enrolled with or visit the health plans’ website for this information.
- ◆ Each plan can arrange for you to get help from a care manager who can help you maneuver through Medicaid services.
- ◆ You may not be able to access all of your specialists in one plan, resulting in the need to choose new providers.

Providers/Services	How many times a yr. Do you or your child see the provider?	Prioritize Who is the most important to you?			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	AmeriHealth Caritas NH
◆ Primary Doctor or Pediatrician							
◆ Specialist: (i.e. Urologist, Neurologist, Cardiologist, etc.) List below:							
▪							
▪							
▪							
▪							
◆ Rehabilitative Services: (i.e. PT and OT, Speech and Language, etc.) List below:							
▪							
▪							
▪							
◆							
◆ <b>Other services you may need to consider:</b>					<b>Well Sense Health Plan</b>	<b>New Hampshire Healthy Families</b>	<b>AmeriHealth Caritas NH</b>
◆ Medications/Pharmacy (including compounds) The prescription drug list (also called ‘formulary’) is available on each health plan’s website.							
◆ Transportation including Wheelchair Transport							
◆ Specific Value Added/Extra Services							
◆ Deaf services							
◆ Cultural/Language services							
◆ Other							