



EBCI TRIBAL OPTION

[For Providers](#)



February 2025 Provider Newsletter

What is the EBCI Tribal Option?

EBCI Tribal Option assists approximately 5,100 Tribal-eligible Medicaid beneficiaries, primarily in Cherokee, Haywood, Swain, Jackson, and Graham counties.

[Learn More](#)

Children and Families Specialty Plan to Launch in 2025

The first-of-its-kind Children and Families Specialty Plan will go live on December 1, 2025. This is a single, statewide NC Medicaid Managed Care plan that will wrap Medicaid-enrolled children, youth and their families in the child welfare system with seamless, integrated and coordinated health care.

NCDHHS and Blue Cross NC's highest priority is to deliver a plan that meets the needs of the children and families of North Carolina. We are committed to building the systems and processes needed to ensure the Plan works for families and the counties that serve them. Since the contract was awarded in August 2024, we have been working together to and carefully planning to ensure the launch of the new plan goes smoothly and is ready to serve beneficiaries on day one.

Over the next year, we will be working quickly and collaboratively to ensure that we are ready to support children and families by providing coordinated and comprehensive health care, including mental health care, that follows the person and works across multiple systems.

We will also support providers in preparing to best serve this population under the new plan including extensive training and working with providers to address unmet health-related resource needs, including housing, food, transportation, and interpersonal violence. And, of course, we will collaborate with county leaders, DSS staff, community partners and stakeholders while preparing to support children and families in this new way of accessing care.

What is the Children and Families Specialty Plan?

- The Children and Families Specialty Plan is a new single, statewide Medicaid Managed Care plan that will wrap Medicaid-enrolled children, youth, and their families currently and formerly served by the child welfare system with seamless, integrated and coordinated health care.
- The Plan will operate statewide, ensuring members can access the health care services they need, including mental health care, and continue to work with their doctors as placements may move them across the state.
- The Plan is part of North Carolina's commitment to improving the long-term health and well-being of children experiencing the child welfare system and to strengthen and support families.
- To implement the Plan, NCDHHS will work with Blue Cross and Blue Shield of North Carolina (Blue Cross NC), who will manage it under the name Healthy Blue Care Together.

How will the Children and Families Specialty Plan help children, youth, and families in North Carolina?

- One, single statewide plan: The Plan will operate statewide as the single entity accountable for the health care of its members, simplifying processes and providing caregivers, providers, case workers and families with the information to provide the right care at the right time.
- Informed by local needs: The Plan will collaborate with County DSS, local stakeholders and families to understand and respond to needs in each community. Care managers will be located within the community to support this work.
- Prevention focused: The Plan will take a family-focused approach to care delivery to strengthen and preserve families, reduce entry and re-entry into foster care, and support reunification and other permanency plan options.
- Comprehensive care: The Plan will increase timely access to a broad range of physical health, behavioral health, pharmacy, long-term services and supports (LTSS) and I/DD services, as well as unmet health-related resource needs for all members.
- Coordinated care: The Plan will provide care management to all members to support integrated, whole-person care and facilitate coordination among service providers. It will also facilitate seamless transitions for members who experience changes in treatment settings, child welfare placements, transitions to adulthood and/or loss of Medicaid eligibility.

How can I learn more/follow the progress?

- We will continue to share regular updates and also hold meetings with key stakeholders and organizations.

State Consumer and Family Advisory Committee Meeting

Aligning Priorities Through Managed Care Innovation

Join SCFAC for a panel discussion with LME/MCO leadership. Moderated by SCFAC Chair Bandon Wilson, the panel will talk about innovative approaches to managed care, identifying and prioritizing community needs, collaboration across LME/MCOs and community stakeholders, and ensuring accountability and consumer-centered care.

Date/Time: Wednesday, Feb. 12, 2025, 12:30-3:00 pm

Location: The Frontier at RTP, 800 Park Offices Drive, Durham, NC

Attend In-Person: [Register for the meeting](#)

Attend Virtually: [Register for the virtual meeting](#)

Event Flyer: [Download flyer](#)



Acronym of the Month

NCDHHS

NORTH CAROLINA
DEPARTMENT OF HEALTH
AND HUMAN SERVICES



Cherokee Language

I LOVE YOU

GV.GE.YU

EᎠᏍ



Claims Denial for Services with Identified Third-Party Insurance NCTracks TPL Edit 00259

A Message from NCTracks on Behalf of NC Medicaid

As part of NC Medicaid's commitment to ensuring compliance with federal regulations, we are implementing updates to NCTracks Third Party Liability (TPL) process for NC Medicaid Direct. These updates will impact claims submitted for certain services when a member has other third-party insurance coverage listed in their eligibility record.

What This Means for Providers

- Claims for the following services will be denied if third-party insurance is detected in the member's eligibility record
- Hospice

- Private Duty Nursing
 - Home Infusion Therapy
 - Local Health Department (LHD)
 - Therapy Services
 - Institutional Ambulance
 - Hearing Aid
 - Independent Diagnostic Testing Facility/Portable X-ray
- Providers are required to submit these claims to the member's primary insurer before billing Medicaid.

What Providers Need to do to Avoid Claim Denials

1. Check Member Eligibility Before Billing: Always verify member eligibility and third-party insurance information in NCTracks prior to submitting claims.
2. Submit Claims to Primary Insurance First: Ensure claims for the affected services are submitted to any identified third-party insurance before sending them to NC Medicaid.
3. Maintain Documentation: Keep Explanation of Benefits (EOB) records from the primary insurers for audit and resubmission purposes.

Claims submitted prior to Dec. 31, 2024, will not be affected. These updates align with NC Medicaid Direct federally mandated role as the payer of last resort.

Contact

Third Party Recovery; 919-527-7690

CMS Releases New Medicaid and Children's Health Insurance Program Core Set Data Dashboard

The Centers for Medicare & Medicaid Services (CMS) is pleased to announce the new [Medicaid and CHIP Core Set Data Dashboard](#), featuring dynamic displays of performance data on 2023 Child and Adult Core Set measures. It shows detailed information, including state-specific performance and national medians, on each Core Set measure that was reported by at least 25 states and met CMS's standards for data quality. The easy-to-navigate dashboard can be used to better understand the quality of care provided to beneficiaries in Medicaid and CHIP and to identify areas for quality improvement. CMS plans to add more years of Core Set data to the Dashboard in the future.

For more information about the Child and Adult Core Sets, including other data products and releases, please visit the [Child Core Set](#) and [Adult Core Set](#) pages on Medicaid.gov.

[Learn More Here](#)

CMS Releases Updated Guidance on Requirements for States to Provide Continuous Eligibility to Children

The Centers for Medicare & Medicaid Services (CMS) released updated [State Health Official \(SHO\) Letter and Frequently Asked Questions \(FAQs\)](#) guidance that replace the previously issued SHO #23-004 and FAQs on the requirement that states provide 12 months of continuous eligibility (CE) for children under the age of 19 in Medicaid and the Children's Health Insurance Program (CHIP). The letter and FAQs provide guidance and answer questions about the requirement that was effective January 1, 2024.

[SHO Letter and FAQs](#)

Questions - Contact Live Help Desk

Submit questions to the Help Desk via email at openpayments@cms.hhs.gov or by calling 1-855-326-8366 (TTY Line: 1-844-649-2766), Monday through Friday, from 9:00 a.m. to 5:00 p.m. (ET), excluding Federal holidays.

The Help Desk refers media inquiries to CMS' Press Office for response.

Visit the [Resources](#) page on the Open Payments website for many of the above resources.

**EAT WELL.
PLAY WELL.
STAY WELL.**



EBCI TRIBAL OPTION





241 Cherokee Hospital Loop

Cherokee, NC 28719

MEMBER/PROVIDER: 800.260.9992

[Connect With Us](#)

