

EBCI TRIBAL OPTION



Member Handbook

www.ebcitribaloption.com

Notice of Non-Discrimination

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The Eastern Band of Cherokee Indians (EBCI) Tribal Option complies with applicable federal civil rights laws and does not discriminate based on race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender identity or expression, or sexual orientation. EBCI Tribal Option does not exclude people or treat them differently because of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender, gender identity or expression, or sexual orientation as stipulated in 45 C.F.R. 80.3(d). All individuals are treated with dignity, compassion, and respect.

EBCI Tribal Option ensures each Member is not subject to any unlawful discrimination in the course of obtaining or receiving services through the EBCI Tribal Option or from any provider within the EBCI Tribal Option Network of Primary Care Providers (PCPs) in compliance with 45 C.F.R 80.3(d). EBCI Tribal Option ensures compliance with the non-discrimination requirements specified in the North Carolina Department of Health and Human Services (NCDHHS)/EBCI Tribal Option Contract, as well as any other applicable federal and state laws and regulations prohibiting discrimination against Members in the course of obtaining or receiving services through the EBCI Tribal Option or any Provider Network as required in 42 C.F.R. § 438.100(d).

EBCI Tribal Option complies with all applicable federal and North Carolina laws, regulations, guidelines, and standards, or those that may be lawfully adopted pursuant to the statutes prohibiting discrimination, including, but not limited to, the following:

- Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin;
- Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap;
- Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex;
- The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age;
- Section 654 of the Omnibus Budget Reconciliation Act of 1981, as amended, 42 U.S.C. 9849, which prohibits discrimination on the basis of race, creed, color, national origin, sex, handicap, political affiliation or beliefs;
- The Americans with Disabilities Act of 1990, P.L. 101-336, which prohibits discrimination on the basis of disability and requires reasonable accommodation for persons with disabilities;
- Section 1557 of the Patient Protection and Affordable Care Act, which prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs or activities;

- The North Carolina Equal Employment Practices Act, Article 49A of Chapter 143
 of the General Statutes, which prohibits employment discrimination on the basis of
 race, religion, color, national origin, age, sex, or handicap by employers which
 regularly employ fifteen (15) or more employees;
- The North Carolina Persons with Disabilities Protection Act, Chapter 168A of the General Statutes, which prohibits disability discrimination;
- The North Carolina Retaliatory Employment Discrimination Act, Article 21 of Chapter 95 of the General Statutes, which prohibits employer retaliation against employees who in good faith take or threaten to take protected action under the law;
- Abide by the non-discrimination provisions in North Carolina Executive Order 24 dated October 18, 2017 by maintaining or implementing employment policies that prohibit discrimination by reason of race, color, ethnicity, national origin, age, disability, sex, pregnancy, religion, National Guard or Veteran's status, sexual orientation, and gender identity or expression.

EBCI Tribal Option provides free auxiliary aids and services to people with disabilities to communicate effectively with their providers and care management staff using:

- Qualified American Sign Language (ASL) interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

EBCI Tribal Option provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, call 1-800-260-9992 (TTY/TDD 711).

If you believe that EBCI Tribal Option has failed to provide these services or discriminated in another way based on race, color, national origin, age, disability or sex, you can file a grievance with:

EBCI Tribal Option

EBCI Tribal Option 241 Cherokee Hospital Loop Cherokee, NC 28719 You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

- Online: ocrportal.hhs.gov/ocr/portal/lobby.jsf
- Bv Mail:

U.S. Department of Health and Human Services 200 Independence Avenue SW., Room 509F, HHH Building Washington, DC 20201

- By Phone: 1-800-368-1019 (TDD: 1-800-537-7697)
- By Fax:

202-619-3818

The NC Medicaid Ombudsman can provide you with free, confidential support and education about the rights and responsibilities you have under NC Medicaid. Call **1-877-201-3750** or visit ncmedicaidombudsman.org.

Aviso de no discriminación

EBCI Tribal Option cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad, credo, afiliación religiosa, ascendencia, sexo, identidad o expresión de género u orientación sexual. EBCI Tribal Option no excluye a las personas ni las trata de forma diferente por motivos de raza, color, origen nacional, edad, discapacidad, credo, afiliación religiosa, ascendencia, sexo, género, identidad o expresión de género u orientación sexual.

EBCI Tribal Option proporciona ayuda y servicios auxiliares gratuitos a las personas con discapacidades para que se comuniquen eficazmente con nosotros, por ejemplo:

- Intérpretes calificados de lenguaje de señas americano
- Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos)

EBCI Tribal Option ofrece servicios lingüísticos gratuitos a las personas para las cual el idioma principal no es el inglés, por ejemplo:

- Intérpretes calificados
- Información escrita en otros idiomas

Si necesita estos servicios, llame al 1-800-260-9992 (TTY/TDD 711).

Si cree que EBCI Tribal Option no le ha prestado estos servicios o lo ha discriminado de alguna otra manera por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar una queja ante:

EBCI Tribal Option

EBCI Tribal Option 241 Cherokee Hospital Loop Cherokee, NC 28719 También puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de los Estados Unidos:

En línea: ocrportal.hhs.gov/ocr/portal/lobby.jsf

Por correo:

U.S. Department of Health and Human Services 200 Independence Avenue SW., Room 509F, HHH Building Washington, DC 20201

Por teléfono: 1-800-368-1019 (TDD: 1-800-537-7697)

Los formularios de quejas están disponibles en: https://https

El NC Medicaid Ombudsman puede proporcionarle apoyo, educación gratuita y confidencial sobre los derechos y responsabilidades que tiene bajo NC Medicaid. Llame al 1-877-201-3750 o visite ncmedicaidombudsman.org.

For more information, visit the EBCI Tribal Option website at www.<u>ebcitribaloption.com</u>. (Choose "Members," then "Non-Discrimination Policy")

How to File a Non-Discrimination Complaint or Request for Reconsideration:

TG๗J Dักป AWGJ DLdWo-hÞRO DLSAฒิLo hSo Iyusdi Advnedi Gowelodi Adatsutany-Nigesyna Adaduhisdany Nigady

O¾A J\$4๗VJ Dơ DWAฒJ WCA D\$๗4๗VJ: Usoyi Digasesdodi ale Atayosdi Taline Agasesdodi:

- A written complaint must be filed with the EBCI Tribal Option Member Services office (post marked or hand delivered) within sixty (60) days of the date you became aware of the alleged violation. The complaint may be sent:
 - <u>Electronically:</u><u>www.ebcitribaloption.com</u>
 - By Mail or Hand Delivery:
 EBCI Tribal Option
 241 Cherokee Hospital Loop Cherokee, NC 28719
- The written complaint must be filed by the individual aggrieved by the alleged discrimination and must contain:
 - Name and mailing address of the aggrieved party complaining;
 - Name of the EBCI Tribal Option Provider or the EBCI Tribal Option agent involved:
 - Date(s) of the alleged violation;
 - Brief description of the alleged violation;

- If you require assistance in preparing a complaint due to a disability, the EBCI Tribal Option will provide assistance upon request;
- You may file a Request for Reconsideration if you got a letter that reports no findings of discrimination. The request must be made in writing, stating clearly the basis for which reconsideration should be granted. The Request for Reconsideration must be filed by the individual who made the initial complaint and sent to the EBCI Tribal Option's Member Services office (post marked or hand delivered) within thirty (30) days from the date of the letter that reports no findings of discrimination.

Complaint Investigation:

DLSA@VJ DOS4@J@ET:

Adaduhisdodi Anagasesdisgvi:

Once the complaint is received, the Member Services Manager or designee shall conduct an investigation of the allegation;

- If the complaint alleges discrimination against a Provider that is not an employee of CIHA or the EBCI Tribal Option, the Member Services Manager shall investigate and follow steps outlined in the NCDHHS/EBCI Tribal Option Contract;
- In the event that there is a perceived or real conflict between the Member Services
 Manager and the Member, a reassignment of the investigation will be made to a
 designee;
- The Member Services Manager may seek guidance from CIHA's Compliance Officer and/or CIHA's legal counsel if necessary;
- The Member Services Manager shall complete the investigation into the complaint within thirty (30) days and resolve the complaint by either:
 - Mailing the letter that reports no findings of discrimination to the complainant post marked within two (2) days of the letter's issuance; or
 - Resolving the issue between the Member provider aggrieved and the EBCI Tribal Option.

Other Actions:

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- The EBCI Tribal Option Member Services Manager may assist the individual in filing a complaint/grievance or requesting assistance from the NC Medicaid Ombudsman for further assistance at 1-877-201-3750;
- EBCI Tribal Option Members and Providers may contact the NC Department of Health and Human Services at the DHHS Customer Service Center at 1-800-662-7030. The process for filing a complaint is available online at: https://www.ncdhhs.gov/media/8251/open

Additional information can be obtained by contacting the NCDHHS Compliance Attorney:

 By Mail: DHHS ADA/RA Complaints Office of General Counsel 2001 Mail Service Center Raleigh, NC 27699-2001

- By Phone: 919-855-4800
- EBCI Tribal Option Members or Providers may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at:
 - Electronically:
 - www.hhs.gov/ocr/office/file/index.html, or
 - Office for Civil Rights Complaint Portal Assistant at: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf
 - o By Mail:

U.S. Department of Health and Human Services, Office for Civil Rights 200 Independence Avenue SW, Room 509F, HHH Building Washington, DC 20201

o By Phone:

U.S. Department of Health and Human Services
Office for Civil Rights
1-800-368-1019 (TTY: 1-800-537-7697)

 By Fax: 202-619-3818 ATTENTION: If you need a Cherokee interpreter, we can call someone for you. CWY Dറകിക് ക്രോ, yo ക്രിക്ക (Tsa la gi a ne sdi sgi yi tsa du li, gi lo yi wo tsi ya na) Call **1-800-260-9992 (TTY 711)**.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-260-9992 (TTY 711)**.

Auxiliary Aids and Interpreter Services

Auxiliary Aids and Interpreter Services You can request free auxiliary aids and services, including this material and other information in large print. Call 1-800-260-9992 (TTY/TDD 711). If English is not your first language, we can help. Call 1-800-260-9992 (TTY/TDD 711). We can give you, free of charge, the information in this material in your language orally or in writing, access to interpreter services, and can help answer your questions in your language.

Español (Spanish): Puede solicitar ayudas y servicios auxiliares gratuitos, incluido este material y otra información en letra grande. Llame al 1-800-260-9992 (TTY/TDD 711). Si el inglés no es su lengua nativa, podemos ayudarle. Llame al 1800-260-9992 (TTY/TDD 711). Podemos ofrecerle, de forma gratuita, la información de este material en su idioma de forma oral o escrita, acceso a servicios de interpretación y podemos ayudarle a responder a sus preguntas en su idioma.

中国人 (Chinese): 您可以申请免费的辅助工具和服务,包括本资料和其他计划信息的大字版。请 致电 1-800-260-9992 (TTY/TDD 711)。如果英语不是您的首选语言,我们能提供帮助。请致电 1-800-260-9992 (TTY/TDD 711)。我们可以通过口头或书面形式,用您使用的语言免费为您提供本资料中的信息,为您提供翻译服务,并且用您使用的语言帮助回答您的问题。

Tiếng Việt (Vietnamese): Bạn có thể yêu cầu các dịch vụ và hỗ trợ phụ trợ miễn phí, bao gồm tài liệu này và các thông tin khác dưới dạng bản in lớn. Gọi 1-800-260-9992 (TTY/TDD 711). Nếu Tiếng Anh không phải là ngôn ngữ mẹ đẻ của quý vị, chúng tôi có thể giúp quý vị. Gọi đến 1-800-260-9992 (TTY/TDD 711). Chúng tôi có thể cung cấp miễn phí cho quý vị thông tin trong tài liệu này bằng ngôn ngữ của quý vị dưới dạng lời nói hoặc văn bản, quyền tiếp cận các dịch vụ phiên dịch, và có thể giúp trả lời các câu hỏi của quý vị bằng chính ngôn ngữ của quý vị.

한국인 (Korean): 귀하는 무료 보조 자료 및 서비스를 요청할 수 있으며, 여기에는 큰 활자체의 자료 및 기타정보가있습니다. 1-800-260-9992 (TTY/TDD 711) 번으로 전화주시기 바랍니다. 영어가 모국어가 아닌 경우 저희가 도와드리겠습니다. 1-800-260-9992 (TTY/TDD 711) 번으로 전화주시기 바랍니다. 저희는 귀하께 구두로 또는 서면으로 귀하의 언어로 된 자료의 정보를, 그리고 통역 서비스의 사용을 무료 제공해 드리며 귀하의 언어로 질문에 대한 답변을 제공해 드리겠습니다.

Français (French): Vous pouvez demander des aides et des services auxiliaires gratuits, y compris ce document et d'autres informations en gros caractères. Composez le 1-800-260-9992 (TTY/TDD 711). Si votre langue maternelle n'est pas l'anglais, nous pouvons vous aider. Composez le 1-800-260-9992 (TTY/TDD 711). Nous pouvons vous fournir gratuitement les informations contenues dans ce document dans votre langue, oralement ou par écrit, vous donner accès aux services d'un interprète et répondre à vos questions dans votre langue.

Hmoob (Hmong): Koj tuaj yeem thov tau cov khoom pab cuam thiab cov kev pab cuam, suav nrog rau tej ntaub ntawv no thiab lwm lub phiaj xwm tej ntaub ntawv kom muab luam ua tus ntawv loj. Hu rau 1-800-260-9992 (TTY/TDD 711). Yog tias Lus Askiv tsis yog koj thawj hom lus hais, peb tuaj yeem pab tau. Hu rau 1-800-260-9992 (TTY/TDD 711). Peb tuaj yeem muab tau rau koj yam tsis sau nqi txog ntawm tej ntaub ntawv muab txhais ua koj hom lus hais ntawm ncauj los sis sau ua ntawv, mus siv tau cov kev pab cuam txhais lus, thiab tuaj yeem pab teb koj cov lus nug hais ua koj hom lus.

عربي (Arabic):

يمكنك طلب الخدمات والمساعدات الإضافية المجانية بما في ذلك، هذا المستند ومعلومات أخرى حول الخطة بأحرف كبيرة. اتصل على الرق

.1-800-260-9992 (TTY/TDD 711)

يمكننا (TTY/TDD 711) 1-800-260-9992. إذا كانت اللغة الإنجليزية ليست لغتك الأولى، فيمكننا المساعدة. اتصل على الرقم أن نقدم لك المعلومات الواردة في هذا المستند بلغتك شفهيًا أو كتابيًا إلى خدمات

Русский (Russian): Вы можете запросить бесплатные вспомогательные средства и услуги, включая этот справочный материал и другую информацию напечатанную крупным шрифтом. Позвоните по номеру 1-800-260-9992 (TTY/TDD 711). Если английский не является Вашим родным языком, мы можем Вам помочь. Позвоните по номеру 1-800-260-9992 (TTY/TDD 711). Мы бесплатно предоставим Вам более подробную информацию этого справочного материала в устной или письменной форме, а также доступ к языковой поддержке и ответим на все вопросы на Вашем родном языке.

Tagalog (Tagalog): Maaari kang humiling ng libreng mga auxiliary aid at serbisyo, kabilang ang materyal na ito at iba pang impormasyon sa malaking print. Tumawag sa 1-800-260-9992 (TTY/TDD 711). Kung hindi English ang iyong unang wika, makakatulong kami. Tumawag sa 1-800-260-9992 (TTY/TDD 711). Maaari ka naming bigyan, nang libre, ng impormasyon sa materyal na ito sa iyong wika nang pasalita o nang pasulat, access sa mga serbisyo ng interpreter, at matutulungang sagutin ang mga tanong sa iyong wika.

ગુજરાતી (Gujarati): તમે મોટી પ્રિન્ટમાં આ સામગ્રી અને અન્ય માહિતી સહિત મફત સહાયક સહાય અને સેવાઓની વિનંતી કરી શકો છો. 1-800-260-9992 (TTY/TDD 711). પર કૉલ કરો જો અંગ્રેજી તમારી પ્રથમ ભાષા ન હોય, તો અમે મદદ કરી શકીએ છીએ. 1-800-260-9992 (TTY/TDD 711). પર કૉલ કરો તમારી ભાષામાં મૌખિક રીતે અથવા લેખિતમાં તમને આ સામગ્રીની માહિતી અમે વિના મૂલ્યે આપી શકીએ છીએ, દુભાષિયા સેવાઓની સુલભતા આપી શકીએ છીએ અને તમારી ભાષામાં તમારા પ્રશ્નોના જવાબ આપવામાં અમે સહાયતા કરી શકીએ છીએ.

ខ្មែរ (Khmer): អ្នកអាចស្នើសុំសម្ភារៈនិងសេវាជំនួយដោយឥតគិតថ្លៃ រួមទាំងព័ត៌មានអំពីសម្ភារៈនេះ និងព័ត៌មានអំពី ផ្សេងទៀតនៅជាអក្សរពុម្ពជំ។ ហៅទូរសព្ទទៅលេខ 1-800-260-9992 (TTY/TDD 711) ។ ប្រសិនបើភាសាអង់គ្លេសមិនមែនជាភាសាទីមួយរបស់អ្នក យើងអាចជួយអ្នកបាន។ ហៅទូរសព្ទទៅលេខ

1-800-260-9992 (TTY/TDD 711)

យើងអាចផ្តល់ដូនអ្នកដោយឥតគឺតថ្លៃនូវព័ត៌មាននៅក្នុងឯកសារនេះជាភាសារបស់អ្នក ដោយផ្ទាល់មាត់ឬជាលាយលក្ខណ៍អក្សរ ទទួលបានសេវាអ្នកបកប្រែ និងអាចជួយឆ្លើយសំណួររបស់អ្នកជាភាសារបស់អ្នក ។

Deutsch (German): Sie können kostenlose Hilfsmittel und Services anfordern, darunter diese Unterlagen und andere informationen in Großdruck. Rufen Sie uns an unter 1-800-260-9992 (TTY/TDD 711). Sollte Englisch nicht Ihre Muttersprache sein, können wir Ihnen behilflich sein. Rufen Sie uns an unter 1-800-260-9992 (TTY/TDD 711). Wir können Ihnen die in diesen Unterlagen enthaltenen Informationen kostenlos mündlich oder schriftlich in Ihrer Sprache zur Verfügung stellen, Ihnen einen Dolmetscherdienst vermitteln und Ihre Fragen in Ihrer Sprache beantworten.

हिंदी (Hindi): आप इस सामग्री और अन्य की जानकारी बड़े प्रिंट में दिए जाने सहित मुफ्त अतिरिक्त सहायता और सेवाओं का अनुरोध कर सकते हैं। 1-800-260-9992 (TTY/TDD 711) पर कॉल करें। अगर अंग्रेजी आपकी पहली भाषा नहीं है, तो हम मदद कर सकते हैं। 1-800-260-9992 (TTY/TDD 711) पर कॉल करें। हम आपको मुफ्त में इस सामग्री की जानकारी आपकी भाषा में जबानी या लिखित रूप में दे सकते हैं, दुभाषिया सेवाओं तक पहुंच दे सकते हैं और आपकी भाषा में आपके सवालों के जवाब देने में मदद कर सकते हैं

ພາສາລາວ (Lao): ທ່ານສາມາດຂໍການຊ່ວຍເຫຼືອເສີມ ແລະ ການບໍລິການຕ່າງໆໄດ້ແບບຟຣີ, ລວມທັງເອກະສານນີ້ ແລະ ຂໍ້ມູນອື່ນໆເປັນຕົວພິມໃຫຍ່. ໂທຫາເບີ 1-800-260-9992 (TTY/TDD 711). ຖ້າພາສາແມ່ຂອງທ່ານ ບໍ່ແມ່ນພາສາອັງກິດ, ພວກເຮົາສາມາດຊ່ວຍໄດ້. ໂທຫາເບີ 1-800-260-9992 (TTY/TDD 711). ພວກເຮົາສາມາດໃຫ້ຂໍ້ມູນໃນເອກະສານນີ້ ເປັນພາສາຂອງທ່ານທາງປາກເບົ່າ ຫຼື ເປັນລາຍລັກອັກສອນ, ການເຂົ້າເຖິງການບໍລິການນາຍແປພາສາ ໃຫ້ແກ່ທ່ານໂດຍບໍ່ເສຍຄ່າຫຍັງ ແລະ ສາມາດຊ່ວຍຕອບຄຳຖາມຂອງທ່ານເປັນພາສາຂອງທ່ານ.

日本 (Japanese): この資料やその他の計画情報を大きな文字で表示するなど、無料の補助支援やサービスを要請することができます。1-800-260-9992 (TTY/TDD 711) に電話してください。英語が母国語でない方はご相談ください。1-800-260-9992 (TTY/TDD 711) に電話してください。この資料に記載されている情報を、お 客様の言語で口頭または書面にて無料でお伝えするとともに、通訳サービスへのアクセスを提供し、お客様 のご質問にもお客様の言語でお答えします。

Language Assistance

SOHAOJ DOOSAVJ Gawonihisdi alisdelydodi

You can request this Member Handbook and other EBCI Tribal Option information in large print at no cost. To get materials in large print, call Member Services at 1-800-260-9992 (TTY 711).

If English is not your first language, we can help. Call **1-800-260-9992 (TTY 711)**. You can request information provided within this Handbook in your language. We have access to interpreter services and will answer your questions in your language.

Cherokee Language Interpreter:

If you need a Cherokee interpreter, we can call someone for you.

CWY DЛЮЈЮУ ACSP, УG AOhФӨ Tsalagi anesdisgi yitsaduli, gilo yiwotsiyana

Call 1-800-260-9992 (TTY 711).

Spanish Interpreter:

Si el inglés no es tu primer idioma, podemos ayudarte. Llamar **1-800-260-9992 (TTY 711)**. Puede solicitarnos la información de este manual en su idioma. Tenemos acceso a servicios de intérprete y podemos ayudar a responder sus preguntas en su idioma.

Your EBCI Tribal Option Quick Reference Guide

TA CVC "EBCI" DOWอโР D&อังด RCR OCOL G4A DอโGตองป Ihi tsatseli "EBCI" analasdatlv asuyagidv elisv ulisda waselv asdawadvsdodi

EBCI Tribal Option Quick Reference Guide		
I WANT TO:	I CAN CONTACT:	
Find a doctor, specialist, or health care service	My Primary Care Provider (PCP) If calling after hours or on weekends, leave a message and include your name and contact information. • To choose or change my PCP, call your:	
Learn more about choosing or enrolling in a health plan or PCCM	NC Medicaid Enrollment Broker at 1-833-870-5500 (Monday through Saturday 7:00am to 5:00pm)	
Get this Handbook in another format or language	Member Services at 1-900-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm)	
Keep track of my appointments and health services	My PCP If calling after hours or on weekends, leave a message and include your name and contact information or Member Services at 1-800-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm)	
Get help with getting to and from my doctor's appointments	My Care Manager or call Member Services at 1-800-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm) or my local DSS office to learn more about transportation services. A list of DSS locations can be found here: ncdhhs.gov/localdss For more information on Transportation Services, refer to page 84 of this Handbook.	
Get answers to basic questions or concerns about my health, symptoms, or medicines	My PCP If calling after hours or on weekends, leave a message and include your name and contact information.	
Understand the services available through EBCI Tribal Option	Member Services at 1-800-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm) or the NC Medicaid Ombudsman at 1-877-201-3750	
Understand a letter or notice I got in the mail from the EBCI Tribal Option	You can also find more information about the NC Medicaid Ombudsman in this Handbook on page 74.	

EBCI Tribal Option Quick Reference Guide		
I WANT TO:	I CAN CONTACT:	
File a complaint about the EBCI Tribal Option	Member Services at 1-800-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm) or NC Medicaid Ombudsman at 1-877-201-3750 For more information about the NC Medicaid Ombudsman, refer to page 74 of this Handbook.	
Get help understanding a recent change in or denial of my health care services	Medicaid Appeals Line at 919-855-4350 or Online: https://medicaid.ncdhhs.gov/medicaid/your-rights or NC Medicaid Ombudsman: 1-877-201-3750 For more information about the NC Medicaid Ombudsman, refer to page 74 of this Handbook.	
Update my address	Member Services at 1-800-260-9992 (TTY 711) or (Monday through Friday 8:00am to 4:30pm) or My local DSS office to report an address change. A list of DSS locations can be found here: ncdhhs.qov/localdss You can also use ePASS to update your address and information. [epass.nc.gov] is North Carolina's secure self-service website where you can apply for benefits and services. You can create a basic ePASS account, then choose to update to an Enhanced ePASS account. Sign up at [epass.nc.gov].	
Find the EBCI Tribal Option Provider Directory or general information about the EBCI Tribal Option	Member Services at 1-800-260-9992 (TTY 711) (Monday through Friday 8:00am to 4:30pm) or Online through our website: https://ebcitribaloption.com/members/provider-information/ (scroll the page and click "Provider Directory" button)	

Key Words Used in This Handbook

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Your Definition Guide to EBCI Tribal Option (PCCM) Managed Care Words: As you read this Handbook, you may see some new words. Here is what we mean when we use them.

Adult Care Home: A licensed residential care setting with seven (7) or more beds for elderly or disabled people who need some additional supports. These homes offer supervision and personal care appropriate to the person's age and disability.

Adult Preventive Care: Care consisting of wellness checkups, patient counseling and regular screenings to prevent adult illness, disease, and other health-related issues.

Advance Directive: A written set of directions about how medical or mental health treatment decisions are to be made if you lose the ability to make them for yourself.

Adverse Benefit Determination: A decision made by a Local Management Entity/Managed Care Organization (LME/MCO) to deny, reduce, stop, or limit your health care services provided by Medicaid providers.

Appeal: If NC Medicaid makes a decision you do not agree with, you can ask them to review it. This is called an "appeal." Ask for an appeal when you do not agree with your health care service being denied, reduced, stopped, or limited. When you ask the EBCI Tribal Option for an appeal, you will get a new decision within thirty (30) days. This decision is called a "resolution." Appeals and grievances are different.

Behavioral Health Care: Mental health and substance use disorder treatment and recovery services.

Beneficiary: A person who is receiving Medicaid.

Benefits: A set of health care services covered by NC Medicaid.

Care Management: A service where a care manager or care team can help you meet your health goals by coordinating your medical, social and behavioral health services and help you find access to resources like transportation, healthy food and safe housing.

Care Manager: A care manager is a specially trained health care worker who works with you and your doctors to make sure you get the right care when and where you need it.

Children's Screening Services: A medical examination to monitor how a child is developing. Screening services can help identify concerns and problems early. The screenings assess social/emotional behavior, vision and hearing, motor skills and coordination, cognitive abilities, and language and speech.

CIHA Business Day: Monday through Friday, 800am until 4:30pm, Eastern Standard Time, except for holidays observed by CIHA. These holiday dates will be submitted annually to NCDHHS and posted on the EBCI Tribal Option website at www.ebcitribaloption.com.

Copayment (Copay): An amount you pay when you get certain health care services or prescriptions. The copay amount may vary by service or provider. Copays are not required for EBCI Tribal Option Members.

County Department of Social Services (DSS): The local (county) public agency that is responsible for determining eligibility for Medicaid and other assistance programs.

Covered Services: Health care services that are provided by NC Medicaid.

Durable Medical Equipment (DME): Certain items (like a walker or a wheelchair) your doctor can order for you to use at home if you have an illness or an injury.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT): A Medicaid benefit that provides comprehensive and preventive health care services for children under age twenty-one (21) who get Medicaid. When children need medical care, services are not limited by EBCI Tribal Option coverage policies. Medicaid must make sure that Members under age twenty-one (21) can get the medical care they need, when they need it, including health care services to prevent future illnesses and medical conditions.

Eastern Band of Cherokee Indians (EBCI) Tribal Option: The primary care case management entity (PCCM) created by the Cherokee Indian Hospital Authority (CIHA). It managed the primary care needs of federally recognized tribal members and others who qualify for services through the Indian Health Service (IHS) and live in Cherokee, Haywood, Graham, Jackson, or Swain County or in a neighboring county of the 5-county region.

Emergency Department Care (or Emergency Room Care):

Care you get in a hospital if you are experiencing an emergency medical condition.

Emergency Medical Condition: A situation in which your life could be threatened or you could be hurt permanently if you do not get care right away.

Emergency Medical Transportation: Ambulance transportation to the nearest hospital or medical facility for an emergency medical condition.

Emergency Services: Services you get to treat your emergency medical condition.

Enrollment Broker: Unbiased, third-party entity that provides managed care choice counseling and enrollment assistance and coordinates outreach and education to beneficiaries.

Grievance: Complaint about your provider, care, or services. Contact the EBCI Tribal Option and tell them you have a "grievance" about your services. Grievances are different from appeals.

Habilitation Services and Devices: Health care services that help you keep, learn, or improve skills and functioning for daily living.

Health Insurance: A type of insurance coverage that pays for your health and medical costs. Your Medicaid is a type of health insurance.

Home Health Care: Certain services you get outside a hospital or a nursing home to help with daily activities of life, like home health aide services, skilled nursing, or physical therapy services.

Hospice Services: Special services for patients and their families during the final stages of terminal illness and after death. Hospice services include certain physical, psychological, social, and spiritual services that support terminally ill individuals and their families or caregivers.

Hospital Outpatient Care: Services you get outside a hospital or nursing home to help with daily activities of life, like home health aide services, skilled nursing or physical therapy services.

Hospitalization: Admission to a hospital for treatment that lasts more than twenty-four (24) hours.

Local Management Entity/Managed Care Organization (LME/MCO): The organization that may coordinate services for you for a mental health disorder, substance use disorder (SUD), intellectual/developmental disability (I/DD) or traumatic brain injury (TBI). You will get a handbook from your LME/MCO that explains more about your LME/MCO and the behavioral health services they provide.

Long-Term Services and Supports (LTSS): Care provided in the home, in community-based settings, or in facilities to help individuals with certain health conditions or disabilities with day-to-day activities. LTSS includes services like home health and personal care services.

Managed Care: A health care program where North Carolina contracts with health plans, to arrange for integrated and coordinated physical health, behavioral health and other health services for Medicaid beneficiaries.

Medicaid: Medicaid is a health insurance plan. The program helps certain families or individuals who have low income or serious medical problems. It is paid with federal, state and county dollars and covers many physical health, behavioral health and I/DD services you might need. You must apply through your local Department of Social Services. When you qualify for Medicaid, you are entitled to certain rights and protections. See the

websites below for more information about Medicaid and your rights: www.ebcitribaloption.com and medicaid.ncdhhs.gov/medicaid/your-rights.

Medically Necessary: Medical services, treatments or supplies that are needed to diagnose or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.

Member: A person enrolled in and covered by the EBCI Tribal Option.

Member Services: The phone number you call to speak to someone and get help when you have a question. The EBCI Tribal Option number is **1-800-260-9992 (TTY 711).**

NC Department of Health and Human Services (NCDHHS): The state agency that includes NC Medicaid (Division of Health Benefits), the Division of Mental Health, Developmental Disabilities and Substance Abuse Services, the State Division of Social Services, the Division of Aging and Adult Services and other health and human service agencies. The NCDHHS website is ncdhhs.gov.

NC Medicaid: Agency that manages Medicaid health care programs, pharmacy benefits and behavioral health services on behalf of the North Carolina Department of Health and Human Services.

NC Medicaid Direct: Previously known as Medicaid Fee-For-Service, this category of care includes care management provided by Community Care of North Carolina (CCNC) for physical health services and Local Management Entities/Managed Care Organizations (LME/MCOs) that coordinate services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).

NC Medicaid Ombudsman: An independent organization that provides education and advocacy for Medicaid beneficiaries whether they are in NC Medicaid Managed Care or NC Medicaid Direct. The NC Medicaid Ombudsman provides issue resolution for NC Medicaid Managed Care members. A resource to be used when you have been unable to resolve issues with the EBCI Tribal Option or your PCP. The NC Medicaid Ombudsman is separate and distinct from the Long-Term Care Ombudsman Program.

Network (Provider Network or Provider Group): A group of doctors, hospitals, pharmacies, and other health care professionals who have a contract with your health plan to provide health care services for Members.

Non-Emergency Medical Transportation: The local DSS can arrange you transportation to help you get to and from medical appointments for you and your family.

Ongoing Course of Treatment: When a Member, in the absence of continued services, would suffer serious detriment to their health or be at risk of hospitalization or institutionalization.

Ongoing Special Condition: A condition that is serious enough to require treatment to avoid possible death or permanent harm. A condition that is life threatening, degenerative, or disabling and requires treatment over an extended period. This includes certain situations related to pregnancy, surgeries, organ transplants, inpatient stays or being terminally ill.

Palliative Care: Specialized care for a patient and family that begins with diagnosis and treatment of a serious or terminal illness.

Physician: A person who is qualified to practice medicine.

Physician Services: Health care services you get from a physician, nurse practitioner or physician assistant.

Postnatal: Pregnancy health care for a mother who has just given birth to a child.

Prenatal: Pregnancy health care for expectant mothers, prior to the birth of a child.

Prescription Drugs: A drug that, by law, requires a provider to order it before a beneficiary can get it.

Primary Care: Services from a primary care provider that help you prevent illnesses (check-ups, immunizations) to manage a health condition you already have (like diabetes).

Primary Care Provider or Primary Care Physician (PCP): The doctor or clinic where you get your primary care (immunizations, well-visits, sick visits, visits to help you manage an illness like diabetes). Your PCP should also be available after hours and on weekends to give you medical advice. They also refer you to specialists (cardiologists, behavioral health providers) if you need it. Your PCP should be your first call for care before going to the emergency room.

Prior Authorization (Preauthorization): Approval you must have from the EBCI Tribal Option or NC Medicaid before you can get or continue getting certain health care services of medicines.

Provider: A health care professional or a facility that delivers health care services, like a doctor, clinician, hospital or pharmacy.

Referral: A documented order from your provider for you to see a specialist or get certain medical services.

Rehabilitation and Therapy Services and Devices: Health care services and equipment that help you recover from an illness, accident, injury, or surgery. These services can include physical or speech therapy.

Skilled Nursing Care: Health care services that require the skill of a licensed nurse.

Specialist: A provider who is trained and practices in a specific area of medicine.

Standard Plan: A North Carolina Medicaid health plan that offers physical health, pharmacy, and basic behavioral health services for members. Standard Plans offer added services for members who qualify.

State Fair Hearing: The hearing or hearings conducted at the State Office of Administrative Hearings (OAH) under Article 2, Part 6A of Chapter 108A of the General Statutes to resolve a dispute related to an Adverse Determination and under Article 2 of Chapter 108D of the NC General Statutes to resolve a dispute related to an Adverse Determination.

Substance Use Disorder: A medical disorder that includes the misuse of, or addiction to, alcohol and/or illegal drugs.

Telehealth: Use of two-way real-time interactive audio and video to provide and support health care services when participants are in different physical locations.

Transition of Care: Process of assisting you to move between Medicaid delivery systems (like from the EBCI Tribal Option to a Standard Plan). This usually happens if your needs change or if you move locations in the state. It also means that you can get assistance when you need to change providers for any reason or if you are moving from a hospital back to your home.

Urgent Care: Care for a health condition that needs prompt medical attention but is not an emergency medical condition. You can get urgent care in a walk-in clinic for a non-life-threatening illness or injury.

Value Added Services (VAS): Services offered by health plans and the PCCM, EBCI Tribal Option, that are not part of the regular Medicaid benefit. Value Added Services are used to promote preventive care and services, engage members in their own care, address gaps in care and services, and support our Quality Improvement programs. Plans must submit to NC Medicaid and be granted approval for all VAS services, authorization requirements and limitations prior to administering VAS.

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Thank you for joining the Cherokee Indian Hospital's EBCI Tribal Option

INTRODUCTION TO THE EBCI TRIBAL OPTION

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EBCI Tribal Option Primary Care Case Management (PCCM) Program

"EBCI" DhW紀LP D&纽U TEA D600 DS4紀J를 DL00가 DS4紀VJ T紀のハJ "EBCI" Anilasdatly Asuyagida Igvyi Alenvdy Agasesdiha Adanvtely Agasesdodi Iyadvnedi This Handbook will help you understand the Medicaid Primary Care Case Management (PCCM) services available to you from the EBCI Tribal Option. You can also call the EBCI Tribal Option with questions at 1-800-260-9992 (TTY 711) or visit our website at www.ebcitribaloption.com.

What is the EBCI Tribal Option?

VTGʻ@J "EBCI" DhW@LP D&@YL R^R? Doiyusti "EBCI" Anilasdatly Asuyagida Elisy?

The Eastern Band of Cherokee Indians (EBCI) Tribal Option is a relationship-based, patient-centered approach to transforming and improving health care outcomes by connecting you to resources (doctors, appointments, medication, and therapy), which ensures that you get the most out of your benefits.

"EBCI" DhW๗LP D๕๗ปน D๗รปกรง๗ป จ๗๙T, J๗ZปT, Dơ iѲป๗ปป "EBCI" Anilasdatlv Asuyagida asdedaliyvsdi nusdvi, dikanodii, ale inadanvtedi

Zổ LVA TG คงVJ ibA AO OSE OGO SC PAJOE (Dhsos W, nole datselv iyulisdodi vyelv nudvnadegv nahnana detsaligodisgv (aniganagata,

D&&yl O&MA&J, ODJ, Zd DbO&&VJ), Jla DST&OT of Crasavja asuyagida wigaluhisdi, nvwoti, nole asinahvsdodi), gudalv atuisdvi kali tsalisdelvdodi

ts a soy as dodi.

C4&&VJ.

The EBCI Tribal Option manages the health care for North Carolina's approximately 4,000 tribal-eligible Medicaid beneficiaries, primarily in Cherokee, Haywood, Swain, Jackson, and Graham counties. Eligibility extends to neighboring counties when applicable. The program strongly focuses on a Member's primary care, preventive health, and chronic disease management and provides care management for high-need Members.

The EBCI Tribal Option program is also referred to as a Primary Care Case Management (PCCM) program. The PCCM program's rules and regulations are the criteria that NC Medicaid and the Cherokee Indian Hospital used to design and manage the EBCI Tribal Option.

Our Core Purpose

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Our core purpose is to assure the prosperity of the next seven generations of the EBCI. To accomplish this, we will work together to help you achieve physical, mental, emotional, and spiritual wellness.

The Right Way

SGS0

Duyugadv

The heart of our health care approach and Member engagement comes from the philosophy of "du yu ga dv" or "The Right Way" – a program designed to maximize the

effectiveness of our staff within the community by building and maintaining healthy relationships and to enhance patient/Member and family engagement. We understand that patients/Members have their own stories that guide their individual lifestyle choices and health care decisions.

"The Right Way" emphasizes the importance of developing strong, trusting, and healthy relationships between you and your Care Team.



We consider both the journey to wellness and Member engagement a shared responsibility. We encourage you to be an active member of your Care Team and help guide us in meeting your health and life goals.

Guiding Principles of Cherokee Indian Hospital and the EBCI Tribal Option

SP@APB JL4PA CWY DBO@A SOSV Zo "EBCI" DhW@LP Dulisgoliyv didasehehi Tsalagi Ayvwiyahi Ganagato nole "EBCI" Anilasdatly

Asuyagida Elisv D&&&YL R^R

The Guiding Principles of Cherokee Indian Hospital and the EBCI Tribal Option define "The Right Way" philosophy as an approach to guide the interactions of your Care Team in order to create trust and a positive experience of care, where both you and your family are engaged to make healthy choices to achieve excellent outcomes. The four Guiding Principles are as follows:

Guiding Principle One – O'GRO'LO ับาิ (u wa shv u da nv te lv)

(English phonetics: oo wa shuh oo da nuh tay luh)

"The One Who Helps You from the Heart"

We believe that care and service delivered most effectively is delivered from the heart.

Guiding Principle Two – VA (to-hi)

(English phonetics: toe hee)

"A State of Peace and Balance"

We believe that "to-hi" can only be achieved through healthy relationships and is fundamental to living healthy lives.

Guiding Principle Three - hACV↑ (ni hi tsa tse li)

(English phonetics: nee hee zah zay lee or nee hee jah jay lee)

"It Belongs to You"

We believe that all health care services belong to the people. CIHA and the EBCI Tribal Option serve as stewards of this health care, safeguarding it and providing it to patients/Members when and how they need it.

Guiding Principle Four - JIV∩TG®J (di qua tse li i yu sdi)

(English phonetics: dee gwa jay lee ee you sdee)

"Like Family to Me"

We are committed to being the health partner of choice for this community, reinforcing the relationships found in healthy families.

How EBCI Tribal Option Primary Care Case Management Works

Welcome to EBCI Tribal Option PCCM program. EBCI Tribal Option is part of NC Medicaid. We are a health care option serving federally recognized tribal members or people eligible for services through the Indian Health Service (IHS). Our Care Team works with you and your providers to help improve your health and wellness. Some of the services our team can provide are to:

- Listen to you and answer questions about your health
- Teach you about your health conditions and ways to take care of yourself
- Help you learn more about the medicines you take
- Connect you with resources and support in your community
- Work with you to find doctors and dentists

As a member of the EBCI Tribal Option, you qualify for a Care Manager who will coordinate with your PCP to connect you with the right specialists and health resources to address your complete care needs. The Care Manager can help make sure you get the medical, behavioral health, I/DD, TBI, pharmacy, and additional care beyond medical needs you may need, such as help with housing or food assistance.

When you join the EBCI Tribal Option, we are here to support you. Most of the time, your main contact will be your Primary Care Provider (PCP) and your Care Manager. If you need to have tests, see a specialist or go to the hospital; your PCP and Care Manager can help arrange it. Your PCP is always available to you. In some cases, you can go to certain doctors for some services without your PCP's referral, see page 39 for more information. You can view the EBCI Tribal Option Provider Directory at https://ebcitribaloption.com/members/provider-information/ (scroll the page and click "Provider Directory" button)

You Have a Health Care Team. We partner with PCPs and have Care Managers who work with your health care providers and coordinate all your services. The EBCI Tribal Option can work closely with you and your primary care practice to coordinate services, arrange appointments, and provide resources needed to assist you in achieving your best health.

Who is on My Care Team?

୭ATଙ୍କା ୭W ଫ୍ରୋଲେଆ EIS4ଇJଇ୨? Kagoiyusdi kela unadatsisgv gvquagasesdisgi?

Your Core Care Team includes:

- Primary Care Provider (PCP)
- Care Manager [Registered Nurse (RN)]

- Licensed Practical Nurse (LPN) or Case Management Assistant (CMA)
- Case Management Support Staff
- Pharmacist
- Behavioral Health Consultant
- Nutritionist

When you collaborate with your Care Team, you work to build strong, trusting, and healthy relationships. They will be with you every step of the way on your journey to wellness. Your Care Team is here to inform, support, and guide your health care decisions.

How Does the EBCI Tribal Option Work?

The EBCI Tribal Option works like a central home to coordinate your health care needs.

The EBCI Tribal Option is committed to providing the right individualized care for enrolled patients/Members through the Care Coordination program. The Care Coordination program recognizes that a person's overall well-being depends on more factors than just health. Where a person physically and socially lives, learns, works, and plays all have a tremendous impact on a Member's quality of life. Care management takes a personcentered, community-based approach to health and well-being. We partner with a group of health care providers (doctors, therapists, specialists, hospitals, home care providers, and other community partners) to meet your needs.

When you join the EBCI Tribal Option, we are here to support you. Most of the time, your main contact will be your Primary Care Provider (PCP) and your Care Manager. If you need to have tests, see a specialist, or go into the hospital, your PCP and Care Manager can help arrange it. Your PCP is available to you day and night. Even though your PCP is your main source of health care, in some cases, you can go to certain doctors for some services without checking with your PCP. (For more information, refer to page 39.)

For more information, visit the EBCI Tribal Option Provider Directory online at https://ebcitribaloption.com/members/provider-information/ (scroll the page and click "Provider Directory" button) or call Member Services at 1-800-260-9992 (TTY 711) to get a copy of the Provider Directory.

How to Use This Handbook

อZจ๊อัง TCOักป C VJ AD DL4จA AOO Kanohesgi itsadvnedi tsvdodi hia adasehehi goweli

This Handbook tells you how the EBCI Tribal Option works. It is your guide to health and wellness services.

Read pages 32 to 42 now. These pages have information that you need to start using your PCCM services.

When you have questions, you can:

- Use this Handbook
- Ask your PCP
- Ask your Care Manager
- Call Member Services at 1-800-260-9992 (TTY 711)
- Visit the EBCI Tribal Option website at: www.ebcitribaloption.com

Help from the EBCI Tribal Option

The EBCI Tribal Option has people to help you. You can call **Member Services at 1-800-260-9992 (TTY 711)** to help you solve issues and answer questions.

Help from Member Services

TLMOLT OND LVF2GOD

TLMOLT

TL

Call Member Services When You Have Questions About:

DUL LIQUI JPMQUI CQ1 YC4:

Aneli Ididvnedi Tisiladvnedi Tsatvdi Yitsaha:

- For help with non-emergent care management issues and questions, call us Monday through Friday, 8:00 a.m. to 4:30 p.m. If you leave a message after normal business hours, someone from our Care Team will call you back on the next business day during normal business hours.
- In case of a medical emergency, call 911.
- Benefits and services:
 - Get help scheduling a referral, replacing a lost or stolen Medicaid card, reporting the birth of a new baby, or inquiring about any changes that might affect you or your family's benefits.

- Pregnancy:
 - o If you are or become pregnant, your child will become a Member of the EBCI Tribal Option on the day of the child's birth. Call us or your local Department of Social Services (DSS) right away if you become pregnant. We can help you choose a doctor for both you and your baby.
- You can call to get help when you have a question. You may call us to get information about choosing or changing your PCP, to ask about resources and services, to talk to a Care Manager about your medical or behavioral health conditions and medication, to get help with referrals or ask about any change that might affect you or your family's benefits.
- If English is not your first language, we can help. Call us and we will find a way to talk with you in your own language.

Special Aids and Services for People with Hearing, Vision, or Speech Disabilities

You have the right to receive information about the EBCI Tribal Option, your care, and services in a format that you can understand and access. We provide free services to help people communicate with us.

Special Aids Services

OVPの DPのSAVJ TJのハJ Utselidy alisdelydodi ididynedi

If you have a hearing, vision, or speech disability, you have the right to get information about the EBCI Tribal Option and access your care and services in a format that you can understand.

Shrāy coaj, cagou do cohaoj, ocol cyoj ozao Ganiliyigi tsadvgodi, tsagowadvdi ale tsawonihisdi, utsanvda tsagisdi kanohedv

Θτ₀Θ "EBCI" DhW๗โจ Dซฒังơ RՐR Zổ RCS4ฒVJ Zổ nahnana "EBCI" anilasdalv asuyagidv elisv nole etsagasesdodi nole

TBCONJ DOOTOO BO KOOJ AWAT. iyetsadvnedi advnvisdv yeli tsolisdi gowelvi.

The EBCI Tribal Option provides free services to help people communicate effectively with us, like:

"EBCI" DӨWのJP D&のYO DJJ hÞRӨ DOOTOV BO OOOSPVJ "EBCI" analasdilv asuyagidv akudi nigesvna advnvisdo yvwi unalisdelvdodi.

あAのJ JSLOAJ: ohisdi digadatvgodi:

- TTY machine. Our TTY phone number is 711
- Qualified American Sign Language (ASL) interpreters
- Closed Captioning
- Written information available in large print, audio, accessible electronic format, and other formats

Special aids and services are free. Call **Member Services at 1-800-260-9992 (TTY 711)** to request these services.

For People with Disabilities

BO BC HPRO DO JHRAC

Yvwi Yeli Nigesvna ale Diniyootli

If you have difficulty hearing or need assistance with communicating, please call **Member Services at 1-800-260-9992 (TTY 711)**. If you are reading this on behalf of someone who is blind, deaf-blind, or has difficulty seeing, we can help. We can provide you with a list of doctor's offices who are equipped with special communication devices.

For People with Hearing Loss

If you are deaf, hard of hearing or deaf-blind, or you feel you have difficulty hearing and need help communicating, the EBCI Tribal Option has resources available to help you. These include but are not limited to:

- Qualified American Sign Language (ASL) interpreters
- Certified deaf interpreters
- Communication Access Realtime Translation (CART) captioning
- Personal amplification listening devices (ALDs) for your use
- Staff trained to appropriately handle your relay service calls (videophone, captioned phone, or TTY)

For People with Vision Loss

If you have vision loss, EBCI Tribal Option has resources available to help you. These include but are not limited to:

- Information in large print
- Written materials in accessible formats (Braille, audio, accessible electronic format)

For People with Speech Disabilities

If you have a speech disability, EBCI Tribal Option has resources available to you. These include but are not limited to:

- Speech-to-Speech Relay (STS)
- Artificial larynx

For People with Multiple Disabilities

Access needs for people with disabilities vary. Special aids and services are provided free of charge.

Other Special Aids and Services for People with Disabilities

- Help in making or getting to appointments
- Care Managers who can help you get the care you need
- Names and address of providers who specialize in your condition
- If you use a wheelchair, we can tell you if a provider's office is wheelchair accessible and help you make or get to your appointments
- Easy access to and from services (like ADA accessible, ramps, handrails and other services)

The EBCI Tribal Option complies with federal civil rights laws and does not leave out or treat people with disabilities differently. If you believe that the EBCI Tribal Option failed to provide these services, you can file a complaint. **To file a complaint or learn more call**Member Services at 1-800-260-9992 (TTY 711). There are other ways to file a complaint in the Notice of Non-Discrimination at the beginning of this Handbook.

Your Medicaid ID Card

Your Medicaid Card

CVP JLAO DOVJ Tsatseli gudalvdv aquidodi

Your Medicaid ID card has been mailed to you. The mailing address on the card is the same as the address on file at your local DSS office. Your Medicaid ID card has:

- Your assigned Primary Care Provider's (PCP's) name and contact information
- Your Medicaid Identification Number
- Information on how to contact us with questions
- Your LME/MCO, if you have one assigned to you

If anything is wrong on your Medicaid ID card or if you lose your Medicaid ID card, call your local DSS office right away. A list of DSS locations can be found here: ncdhhs.gov/localdss.



Always carry your Medicaid ID card with you. You will need to show it each time you go for care. Never let anyone else use your Medicaid card. This card is for your use only!

You can still get services from a NC Medicaid provider even if you have not received your ID card. Providers can verify your Medicaid eligibility even if your Medicaid ID card is not present.

N.C. Dept. of Health and Human Services Division of Health Benefits

Cut along dotted lines

ANNUAL MEDICAID IDENTIFICATION CARD

LME MCO:

nfCustName nfAptSuite addressLine1 addressLine2 city, state zipCode

EBCI TRIBAL OPTION

Recipient Signature (Not valid unless signed) USE OF THIS CARD BY ANYONE NOT LISTED ON THE CARD IS FRAUD AND IS PUNISHABLE BY A FINE, IMPRISONMENT OR

N.C. DEPT. OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH BENEFITS

RECIPIENT I.D.

RECIPIENT NAME

BIRTH DATE

ISSUE DATE

For questions about your Medicaid coverage and/or to report Medicaid fraud, waste or program abuse, please contact the NC Medicaid Contact Call Center at 1-888-245-0179.

Notice to Providers

The Medicaid Identification card is not proof of Medicaid eligibility. It is the responsibility of the medical provider to verify the identity of the individual, the Medicaid covered services, medical home/primary care physician with whom the recipient is enrolled.

Eligible Provider: A provider must be enrolled in the NC Medicaid program to be paid for services rendered to NC Medicaid recipients. If not enrolled, go to www.nctracks.nc.gov to find enrollment information and forms or call the CSC Enrollment Verification and Credentialing I(EVC) Center at 1-866-844-1113.

NCEAST-20004 (Rev. 10/19)

Prior Approval: Some Medicaid services must be approved in advance. Refer to https://medicaid.ncdhhs.gov/providers/programs-services/prior-approval-and-due-process for prior approval requirements. Changes are published the first of each month in Medicaid Provider bulletins.

https://files.nc.gov/ncdma/documents/files/2A-3.pdf
Out of state providers must obtain approval prior to delivering
Medicaid services unless there is a medical emergency as defined in
the Social security Act, Section 1923 (b)(2)(B)(i-iii) and (C)(i-iii). In
cases of medical emergency that result in patient hospitalization, out
of state providers must notify North Carolina Medicaid within 72 hours
(three business days) of the admission date.

<u>Claim Filling:</u> Bill other insurance first; Medicaid is last payor. Medicaid payment is full payment even if charges exceed the payment. Refer to the Basic Medicaid Billing Guide for additional information regarding claim filing.

Page: 1 of 1

PART 1: FIRST THINGS YOU SHOULD KNOW

DEÄ O°S№7: AD TEÄ CSGFA®J Agvyi ugahalv: hia igvyi tsadelohohisdi





How to Choose Your PCP

AD TCTAL คลิซิสิ่งอิป TEA CS4ลิปลิง SOSW Hia itsadvnedi hiyasuyagisdi igvyi tsagasesdisgi ganagata

Your PCP is a doctor, nurse practitioner, physician assistant, or other type of provider specialty (e.g., obstetrician/gynecologist, pediatrician) who will:

- Care for your physical health when you are well and sick
- Coordinate your needs
- Help you get referrals for specialized services, if you need them (like a cardiologist)

As a Medicaid beneficiary, you had an opportunity to choose your own PCP. If you did not choose a PCP, NC Medicaid will assign CIHA as your PCP. You can find your PCP's name and contact information on your Medicaid card. If you would like to change your PCP, you can do so at any time. To change your PCP, refer to "How to Change Your Primary Care Provider (PCP)" on page 36. To change your PCP, call your local department of social services (DSS) office or call the NC Medicaid Center at 1-888-245-0179 Monday through Friday 8:00am to 5:00pm. A list of DSS locations can be found here: ncdhhs.gov/localdss.

When Deciding on a PCP, You May Want to Find a PCP Who:

SFAJ@E C\$4@J@Y \$\text{SFW}, CH BP PP@E AGOJ C\$4@J@Y: dehugotisgv tsagasesdisgi ganagata, tsvsa yeli helisgv hiwatvdi tsagasesdisgi:

- You have seen before
- Understands your health history
- Is taking new patients
- Can serve you in your language
- Is easy to get to

Each family member enrolled in the EBCI Tribal Option can have a different PCP, or you can choose one PCP to take care of the whole family. A pediatrician treats children. Family practice doctors treat the whole family. Internal medicine doctors treat adults. To get help with choosing a PCP that is right for you and your family, call your local DSS office. A list of DSS locations can be found here: ncdhhs.gov/localdss. Or call **Member Services at 1-800-260-9992 (TTY 711)** or the **NC Medicaid Contact Center at 1-888-245-0179** for help with questions.

You can choose an obstetrics/gynecology [(OB/GYN) a doctor for women's health] doctor to serve as your PCP. You do not need a PCP referral to see an OB/GYN doctor or another provider who offers women's health care services. You can get routine check-ups, follow-up care if needed, and regular care during pregnancy.

If you have a complex health condition or a special health care need, you may be able to choose a specialist to act as your PCP.

To Receive Help with Choosing a PCP That is Right for You and Your Family: RCଡେମ୍ଡ୍ରୀ କ୍ଷ୍ଟେଇyଉE କେଖେ SGAେ ୯୫୩୦ ୯୫4ଉJଡେ୨ ଅଧି ଧାନ୍ୟନ: etsasdelvdi hasuyagisgv ganagata duyugodv tsayelvnv tsagasesdisgi nole sidanelvhi:

You can find a full list of NC Medicaid providers, including PCPs, at ncmedicaidplans.gov.

You can view the EBCI Tribal Option Provider Directory at
 https://ebcitribaloption.com/members/provider-information/ (scroll the page and click "Provider Directory" button) or you can call Member Services at 1-800-260-9992 (TTY 711) to receive a copy of the Provider Directory].

If Your PCP Leaves the EBCI Tribal Option Network

If Your Provider Leaves Our Network

รอรฟ ตัดภูพิเอ Do ตับตุ Tรูโมฟโอi Ganagata tsakahy yuyohisdana ale yudanysy igadasiladanay

If your PCP leaves the EBCI Tribal Option, we will tell you within seven (7) days and help make sure you choose a new PCP.

In certain situations, you may be able to stay with your provider for an extended period of time when they leave the EBCI Tribal Option Network.

If you have any questions about the information in this section, call **Member Services** at 1-800-260-9992 (TTY 711). For the Provider Directory visit https://ebcitribaloption.com/members/provider-information/ (scroll the page and click "Provider Directory" button).

Care if Your Provider Leaves the EBCI Tribal Option Network

D&ՖУԾ RՐR Þ٩ DhSOSW DbWlOiT asuyagidv elisv kelv aniganagata asiladanavi

If your Primary Care Provider (PCP) leaves the EBCI Tribal Option, we will contact you within seven (7) days from when we know this will happen. If you want to choose a new PCP, you can contact the **NC Medicaid Contact Center at 1-888-245-0179**, or one will be assigned to you.

Transition of Care

Your Care When Changing from a Health Plan or Provider

Do SOSW ale ganagata

Once you have joined the EBCI Tribal Option from an NC Medicaid Health Plan, we will contact your previous health plan within five (5) business days of notification of your plan or PCP change. We will make efforts to work with your previous health plan and make sure that services you were receiving or planning to get will continue without interruption.

You Can Help with EBCI Tribal Option Policies

You Can Help with Plan Policies

ുറെ Crക്ടപ JWbVJ Dഗര്നകിക്ക് Yeligwu Tsalisdelvdi Dilasidodi Advnvisdisgv

As a Member of the EBCI Tribal Option, we value your ideas. You can help us develop policies that best serve you and other Members. We have several Member committees within the EBCI Tribal Option and North Carolina. Let us know if you would like to be a part of one of these groups.

Member Committees and Work Groups			
Name of Committee	Managed By		
CIHA Patient and Family Advisory Council (PFAC)	EBCI Tribal Option and CIHA		
State Medical Care Advisory Committee (MCAC)	NC Medicaid Committee		
State Consumer and Family Advisory Council (CFAC)	NC Division of Mental Health, Developmental Disabilities, and Substance Use Services (MH/DD/ SUS)		

Another way you can assist the EBCI Tribal Option in improving your care and support services is by completing and returning member surveys when you get them. We value your feedback. Hearing from you will help us achieve **Guiding Principle Four** - JIVCTG@J (di qua tse li i yu sdi) "Like Family to Me." We are committed to being the health partner of choice for this community, reinforcing the relationships found in healthy families.

Call **Member Services at 1-800-260-9992 (TTY 711)** to learn more about how you can help.

How to Change Your PCP

How to Change Your Primary Care Provider (PCP) or If You Have Questions

VDตกม Dอรเคยอม Tea C54อมอัง รอรฟ Do Afอม อติตของ Doadvnedi asdedaliyysdi igvyi tsagasesdisgi ganagata ale gohosdi yadvdyhysga

- You can find your PCP's name and contact information on your Medicaid card.
- You can change your PCP at any time, for any reason. You can change your PCP and get help in one of these ways:
 - Call your local Department of social services (DSS) office. A list of DSS locations can be found here: <u>ncdhhs.gov/localdss</u>.
 - Call the NC Medicaid Contact Center at 1-888-245-0179 Monday through Friday 8:00am to 5:00pm.

You do not have to provide a reason for changing your PCP.

How to Get Regular Health Care

VDตกม TAAต VA DBA DS4@VJ Doadvnedi igohidv dohi ayelv agasesdodi

- When you need regular health care, contact your PCP to schedule an appointment.
- "Regular health care" means exams, <u>regular</u> check-ups, shots, or other treatments to keep you well and address illness or other symptoms. It also includes giving you advice when you need it and referring you to the hospital or specialists, when needed. You and your PCP work together to keep you well or to see that you get the care you need.
- Your PCP is always available. Call your PCP when you have a medical question or concern. If you call after hours or on weekends, leave a message and where or how you can be reached. Your PCP will call you back as quickly as possible. Remember, your PCP knows you and knows how the EBCI Tribal Option works.
- Your PCP will take care of most of your health care needs, but you must have an appointment to see your PCP. If you ever cannot keep an appointment, call to let your PCP know.

You should only use the emergency room if there is a true emergency, not for routine health care treatment. Speak with your PCP or Care Manager about obtaining regular health care if you frequently visit the emergency room for non-emergencies.

Some examples of **non-emergencies** are colds, upset stomach, or minor cuts and bruises and should be treated by your PCP or at an urgent care clinic. Emergency rooms should never be used for routine care. Non-emergencies may also be family issues or a breakup.

How to Prepare for Your First Visit with a New Provider

VDซักม CซึซิโซิVม YWDEล AAGซิม DV SOSW Doadvnedi tsadvnvisdodi gilaagvyi higowadvdi atse ganagata

Scheduling Your First Regular Health Care Appointment:

Dซ๊ฟิฟฟิ Aฟฺจิ TC DEล้ ค฿ฺจิ D\square Aฟฺจิ Usa asuyagisdi gowelv iyu agvyi hiyelv agasesdodiyi:

Making your first regular health care appointment

As soon as you choose or are assigned a PCP, if it is a new provider, call to make a first appointment. There are several things you can do to help your PCP get to know you and your health care needs:

- Request a transfer of medical records from your current provider to your new PCP
- Make a list of problems you have now and be prepared to discuss your general health, past major illnesses, surgeries, and other health issues
- Make a list of questions you want to ask your PCP
- Bring medication and supplements you are taking to your first appointment

It is best to visit your PCP within three (3) months of enrolling in the EBCI Tribal Option.

If You Need Care Before Your First Appointment:

AChES RCS4๗VJ OLMA DhGi VL๗J: yitsanigvga etsagasesdodi udalulv atsilov tsedasdi:

Call your PCP's office to explain your concern. Your PCP will give you an earlier appointment to address your current health concerns. You should keep your original appointment to talk about your medical history and ask your new doctor questions.

If you have enrolled and normally get your care from an EBCI Tribal Option provider, you do not need to do anything. Continue seeing your provider as usual.

The EBCI Tribal Option has resources available to assist you in preparing for your health care visits and on how you can assist your health team. These materials can be viewed online at the EBCI Tribal Option website at https://ebcitribaloption.com/members/ or requested from Member Services by calling 1-800-260-9992 (TTY 711).

It is important to us that you can visit a doctor within a reasonable time. The following Appointment Guide lets you know how long you may have to wait to be seen.

Appointment Guide				
DL4₽A J&®YL	(AAGむ」 SOSW)			
Adasehehi disuyagida (l	nigowadvdi ganagata)			
IF YOU CALL FOR THIS TYPE OF SERVICE:	YOUR APPOINTMENT SHOULD BE:			
Routine Well Care (services like routine health check-ups or immunizations)	Within thirty (30) days			
Prenatal Visits for Pregnant Members	Within fifteen (15) days			
Routine Sick Care	Within three (3) days			
Urgent Care Services (care for problems like sprains, flu symptoms, or minor cuts and wounds)	Within twenty-four (24) hours			
Emergency Care	Go to the hospital emergency room immediately [available twenty-four (24) hours a day, three hundred sixty-five (365) days a year]			
Hospital Discharge Follow-up	Your Care Manager will follow-up within two (2) weeks of discharge			

If you are not getting the care you need within the time limits listed in the Appointment Guide, call Member Services at 1-800-260-9992 (TTY 711).

How to Get Specialty Care – Referrals

VDชาม Oับาช ils4๑VJ iJAาผูป @JSา. Dาฬลาปพิ่ง Doadvnedi utselidv vdagasesdodi vdigoliyedi yaguduli. Alisgolvdisgi

DAGのJ Oアトの SOSW agowadvdi utselidv ganagata

If you require specialized care that your Primary Care Provider (PCP) cannot give you, your PCP will refer you to a **specialist** who can. A specialist is a doctor who is trained and practices in a specific area of medicine (like a cardiologist or surgeon). If your PCP refers you to a specialist, we will pay for your care if it is medically necessary. Talk to your PCP to be sure you know how referrals work.

- If you think a specialist does not meet your needs, talk with your PCP. Your PCP can help you find a different specialist.
- There are some treatments and services your PCP must ask the EBCI Tribal Option to approve before you can get them. Your PCP can tell you what those services are.

- If you have trouble getting a referral you think you need, contact Member Services at 1-800-260-9992 (TTY 711).
- If you have a complex health condition or special health care need, you may be able to choose a specialist to act as your PCP.

Sometimes, Medicaid may not approve a specific service that your health care provider has requested for you. If you do not agree with Medicaid's decision, you can appeal the decision. Refer to pages 55-58 to learn how to make an appeal.

Get These Services from the EBCI Tribal Option Without a Referral

"EBCI" DѲѠѽ҄LP D&҈ѲӲの RſR iβJの҄ЛЈ DѠҺ҈ѲЈ ҺҎ҈RѲ "EBCI" analasdatlv asuyagidv elisv vyegudvnedi atayosdi nigesvna

Dr๛Aกุม๛ัง DAGou ovro Sosw alisgolvdisgi agowadvdi utselidv ganagata

A referral is a documented order from your provider for you to see a specialist or receive certain medical services. You do not need a referral to get these services:

Primary Care

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You do not need a referral to get primary care services. If you need a check-up or have a question about your health, call your Primary Care Provider (PCP) to make an appointment. Your assigned PCP's name and contact information are listed on your Medicaid ID card.

Women's Health Care

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You do not need a referral from your PCP if:

- You are pregnant and need pregnancy-related services
- You need OB/GYN services
- You need family planning services
- You need to have a breast or pelvic exam

Family Planning

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You can go to any doctor or clinic that takes Medicaid and offers family planning services. You can also visit one of our family planning providers. You do not need a referral from your PCP for family planning services. Family planning services include:

- Birth control
- Birth control devices, such as intrauterine devices (IUDs), implantable contraceptive devices and others that are available with a prescription
- Emergency contraception
- Sterilization services
- Human immunodeficiency virus (HIV) and sexually transmitted infection (STI) testing, treatment, and counseling
- Screenings for cancer and other related conditions

Children's Screening

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You do not need a referral to get children's screening services or school-based services.

Local Health Department Services

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You do not need a referral to get services from your local health department or EBCI Public Health and Human Services (PHHS).

Behavioral Health Services

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You do not need a referral for your first behavioral health or substance use disorder assessment completed within a 12-month period. Ask your PCP or **call Member Services at 1-800-260-9992 (TTY 711)** for a list of mental health providers and substance use disorder providers.

EMERGENCIES

For Emergencies

OPOL TSPOJOY Ulisda Igalisdisgi

You are always covered for emergencies. An emergency medical or behavioral condition is a situation in which your life could be threatened, or you could be hurt permanently if you do not get care right away. Some examples of an emergency are:

- A heart attack or severe chest pain
- Bleeding that will not stop
- Bad burn
- Broken bones
- Trouble breathing
- Convulsions
- Loss of consciousness
- When you feel you might hurt yourself or others
- If you are pregnant and have signs like pain, bleeding, fever, or vomiting
- Drug overdose

If you believe you have an emergency, <u>call 911</u> or go to the nearest emergency room.

- You can go to any hospital or setting to get emergency care.
- You **do not** need approval from your plan or your PCP before getting emergency care, and you are not required to use our in-network hospitals or doctors.
- If you are not sure if your condition is an emergency, call your PCP at any time, day or night. Tell the person you speak with what is happening. Your PCP's team will:
 - Tell you what to do at home
 - o Tell you to come to the PCP's office
 - Tell you about community services you can get, like a shelter
 - Tell you to go to the nearest urgent care emergency room

Remember: If you need to speak to your PCP after hours or weekends, leave a message and how you can be reached. Your PCP will get back to you as soon as possible.

- If you are out of the area when you have an emergency:
 - Go to the nearest emergency room

Remember: Use the Emergency Department only if you have an emergency. If you have questions, call your PCP or EBCI Tribal Option **Member Services at 1-800-260-9992 (TTY 711)**.

Some examples of **non-emergencies** are colds, upset stomach, or minor cuts and bruises and should be treated by your PCP or at an urgent care clinic. Emergency rooms should never be used for routine care. Non-emergencies may also be family issues or a breakup.

Urgent Care/Immediate Care Center

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You may have an injury or an illness that is not an emergency but still needs prompt care and attention. This could be:

- A child with an earache who wakes up in the middle of the night and will not stop crying
- The flu
- A cut that needs stitches
- A sprained ankle
- A bad splinter you cannot remove

Whether you are at home or away, you can walk into an urgent care clinic or an immediate care center and get care the same day or make an appointment for the next day. If you need help making an appointment:

- Call your PCP any time, day or night.
- If you are unable to reach your PCP, call Member Services at 1-800-260-9992 (TTY 711). Tell the person who answers what is happening. They will tell you what to do.

For Care Outside of North Carolina/ For Care Outside of the United States

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In some cases, the EBCI Tribal Option may pay for health care services you get from a provider located along the North Carolina border or in another state. Your PCP and the EBCI Tribal Option can give you more information about which providers and services are covered outside of North Carolina and how you can get them if needed. If you need medically necessary emergency care while traveling anywhere within the United States and its territories, please go to the nearest emergency room.

- If you need medically necessary emergency care while traveling anywhere within the United States and its territories, NC Medicaid will pay for your care.
- NC Medicaid will not pay for care received outside of the United States and its territories.

If you have questions about getting care outside of North Carolina or the United States, talk with your PCP or call **Member Services at 1-800-260-9992 (TTY 711)**.

Part 2: Your Primary Care Case Management Services PART 2: YOUR BENEFITS

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NC Medicaid Benefits:

NC Medicaid provides medical, pharmacy, and behavioral health services. This section provides information on:

- Understanding Medicaid covered and non-covered services. "Covered services" are services paid for by Medicaid if their rules for payment are followed. These are also called "Benefits." "Non-covered services" are the services Medicaid does not generally pay for, except, in certain circumstances, for children. For Members under twenty-one (21) years of age, refer to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) information on pages 76-78.
- The EBCI Tribal Option will provide or arrange for most services and supports based on your needs if you:
 - Are pregnant (and up to 12 months post-partum)
 - Are sick or injured
 - Experience a substance use disorder or have mental health needs
 - Need assistance with tasks like eating, bathing, dressing, or other activities of daily living
 - Need help getting to the doctor's office
 - Need medication
 - Need assistance with other factors that affect your health such as housing, access to food, etc.
- Filing a grievance regarding EBCI Tribal Option

The next section describes the specific services covered by Medicaid. If you have any questions about your benefits, call your PCP or **Member Services at 1-800-260-9992 (TTY 711)**.

You can get some services that your PCP does not have to arrange. These services include primary care, emergency care, women's health, family planning, children's screening, local health department, EBCI PHHS, some behavioral health, and some school-based services.

Accessing Primary Care Case Management Services

Extra Support to Manage Your Health

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The EBCI Tribal Option provides care management services in addition to the benefits and health care services covered by NC Medicaid. A description of benefits provided by NC Medicaid is included in Appendix A.

Managing your health care and support services alone can be hard, especially if you are dealing with many health problems at the same time. If you need extra support to get and/or stay healthy, we can help. As a Member of the EBCI Tribal Option, you are eligibile to have a Care Manager on your health Care Team unless you are getting certain services that provide care management. A Care Manager is a specially trained health care worker who works with you and your doctors, and other providers and agencies to make sure you get the right care and support when and where you need it. The Care Manager knows what resources are available in your community and will work with local providers to get you the help you need.

The EBCI Tribal Option will match you to a Care Manager that has specialized training to meet your needs. You may change your Care Manager at any time and for any reason.

Your Care Managers Can:

- Help connect you to your PCP
- Help understand your Medicaid benefits, including transportation benefits
- Help you understand your medication and find a pharmacy
- Help your transition home from the hospital
- Help arrange your appointments and transportation to and from your doctor
- Support you in reaching your goals to better manage your ongoing health conditions and safety concerns
- Answer questions about what your medicines do and how to take them
- Follow up with your doctors, community-based organizations, or specialists about your care and supports which you need to stay healthy and safe
- Connect you to helpful resources in your community
- Help you continue to get the care and support you need if you switch doctors

- Assist you if you need access to LTSS services like nursing home care, home
 - health, or personal care services to help manage activities of daily living, like eating, bathing, and performing household tasks
- Assist you if you are pregnant and have certain health issues, such as managing diabetes, addressing behavioral health, and other concerns like quitting smoking
- Support your children from birth to five (5) years of age who may live in stressful situations and/or have certain health conditions and/or disabilities



Your Care Manager may participate with your PCP's health care team. The EBCI Tribal Option Care Manager will provide you with continuous care management for any level of need. To learn more about how you can get extra support to manage your health, talk to your PCP or call **Member Services at 1-800-260-9992 (TTY 711)**.

To help you manage your health care needs, your Care Manager will ask about your health concerns and create a Care Plan with your input that lists your specific goals and ways to reach them. This Care Plan will cover your complete health and other related needs as needed, including:

- Care from your PCP
- Pharmacy/medication
- Behavioral health
- Long-Term Services and Supports
- Health-related resource needs

Your Care Manager may use your health records, discussions with other health care and social services providers, and other documents to help create the Care Plan. The Care Plan will also list services in the community that can help you reach your health goals. Your Care Manager will review your Care Plan at least once a year or whenever your circumstances, needs, or health condition changes significantly. You may also ask for a review of your Care Plan at any time.

Your Care Manager will work with a team of health care professionals and service providers, who will help you get services in your community to address your care needs. Your care management team will generally include your PCP and other health care professionals who can help you with your needs and goals. Your Care Manager will task one of the members of your team to help you get each service listed in your Care Plan. Your Care Manager can work with family members and friends on this team if you want.

As part of the care management process, your Care Manager will meet with you regularly, either in person, over the phone, or using video chat. Your Care Manager will also have regular conversations with your care management team to make sure they are helping you make progress on your health goals and getting you the services that you need. Your Care Manager will also track and monitor the services you receive. Your health needs and goals will be at the center of the care management process, and you will have an important role in creating your Care Plan and making decisions about your care.

Your Care Manager will be in touch with you soon after you enroll to find out what care you need and to help you with appointments. Your Care Manager or someone from your Care Team is available to you twenty-four (24) hours a day, seven (7) days a week. To learn more about how you can get extra support to manage your health, talk to your PCP or Care Manager or call **Member Services at 1-800-260-9992 (TTY 711).**

Help with Problems Beyond Medical Care

It can be hard to focus on your health if you have problems with your housing or worry about having enough food to feed your family. We can connect you to resources in your community to help you manage issues beyond your medical care.

Call Member Services at 1-800-260-9992 (TTY 711) if you:

- · Worry about steady housing or homelessness
- Have trouble getting enough food to feed yourself or your family
- Find it hard to get to and from appointments, work, or school because of transportation issues
- Feel unsafe or are experiencing domestic or community violence.
 If you are in immediate danger, call 911
- Residing in unhealthy living conditions
- Being unemployed
- Trying to find a job
- Facing financial difficulties when paying utilities or other bills
- Other challenges you may be facing in your life journey

Other Programs to Help You Stay Healthy

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The EBCI Tribal Option wants to help you and your family get and stay healthy. If you want to quit smoking or are a new mom who wants to learn more about how to best feed your baby, we can connect you with the right program for support.

Call Member Services at 1-800-260-9992 (TTY 711) to learn more about:

- Tobacco cessation services to help you stop smoking or using other tobacco products
- Women, Infants and Children (WIC) special supplemental nutrition program
- Newborn screening program
- Hearing screening program
- Early Intervention program
- Nurse Family Partnership
- Disease Management programs, such as Diabetes and Hypertension, and
- Exercise and other wellness programs

Opioid Misuse Prevention Program

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Opioids are powerful prescription medication that can be the right choice for treating severe pain. However, opioids may also have serious side effects, such as addiction and overdose. The EBCI Tribal Option supports safe and appropriate opioid use through our Opioid Misuse Prevention Program. If you have any questions about our program, call **Member Services at 1-800-260-9992 (TTY 711)**.

Preventive Health

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Your PCP will tell you when you and your family are due for check-ups, certain screenings, and immunizations.

You may get a call or a letter reminding you about things such as appointments, your yearly flu shot, or a missed health check. The following guidelines on preventive health do not replace your PCP's advice/judgment. You should always talk with your PCP about the care that is right for you and your family and express any health concerns. Your PCP may determine that other services are needed based on your specific health care needs.

Preventive Health Guidelines

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The next few pages are recommended guidelines for preventive care services, which determine when you should get check-ups, tests, and immunizations.

By referring to these guidelines, you will know when it is time to visit your PCP to get these services. If you or a family member are missing a check-up or test, call your doctor to schedule an appointment.

The EBCI Tribal Option provides reminders as a service to you. Every year, we will send each family member a reminder about sixty (60) to ninety (90) days before preventive care service(s), such as tests and/or immunizations, are due.

Adult Preventive Health Guidelines

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If you are new to the EBCI Tribal Option, you should get a baseline physical exam within the first ninety (90) days of joining. If you are pregnant, you should get this done within the first trimester or within seven (7) days.

The following recommendations are services that the EBCI Tribal Option consider very important to prevention of certain diseases and conditions in adults. The EBCI Tribal Option strongly recommends that Members get these preventive services. They can help you lead a healthier life.

Adult Preventive Health Guidelines					
<u>Age</u>	<u>Screening</u>	<u>Frequency</u>			
 Adolescents 18 years of age and older Adults 21 years of age and older 	Blood Pressure, Height and Weight, Body Mass Index (BMI), Alcohol Use	 Annually, 18-21 years of age After 21 years of age, every 1-2 years or at the PCP's recommendation 			
Adults 20 years of age and older, especially if at high risk	Cholesterol	• Every 5 years (More frequent if elevated)			
 Women 21 years of age and older 	Pap Test and Chlamydia	Every 1-3 years or at the PCP's recommendation			
Women 50-74 years of age	Mammography	• Every 1-2 years			
• 50 years of age and older	Colorectal Cancer Screening Hearing Screening	 Periodically, depending upon test 			
 Women starting at 65 years of age, or Women starting at 60 years of age for women at risk 	Osteoporosis (Bone Mass Measurement)	• Every 2 years or per PCP recommendations			
 65 years of age and older, or Younger for those that have diabetes or other risk factors 	Vision, including Glaucoma or Diabetic Retinal Exam, as needed	 Every 2 years for routine exams or every year for diabetic Members or those with other risk factors 			

Adult Immunizations ୦୯୦ ଧ୍ୟୁ ଅନ୍ତେଶ୍ୟ Utanv Digatsayosdi

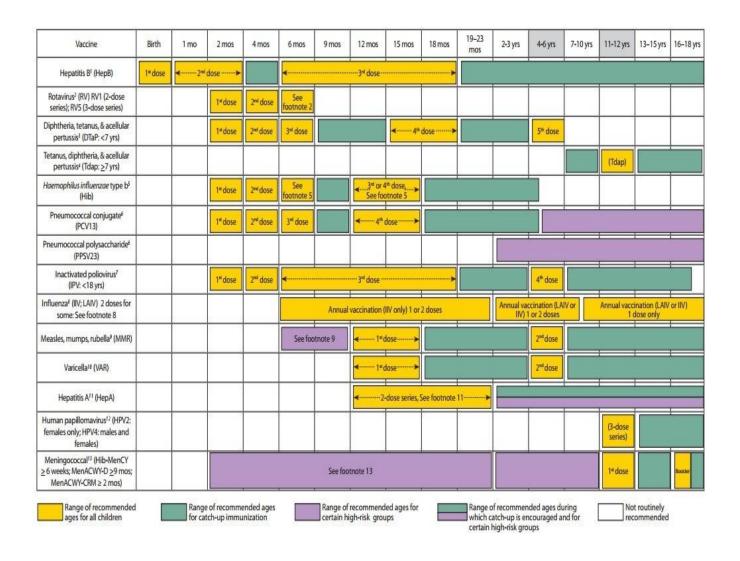
Adult Immunizations			
Diphtheria, Tetanus and Pertussis (DTaP)	18 years of age and older, DTaP: Substitute a one-time dose DTaP for Td, then boost with Td every 10 years		
Varicella (VZV)	All adults without evidence of immunity to varicella should get 2 doses of single-antigen varicella vaccine if not previously vaccinated or the second dose if they have only gotten 1 dose		
Measles, Mumps, Rubella (MMR)	All adults born during or after 1957 should get 1-2 doses		
Pneumococcal vaccinations	65 years of age and older, all adults who smoke or have certain chronic medical conditions-pneumococcal vaccines per their providers recommendations		
Seasonal Flu	All adults annually		
Hepatitis A Vaccine (HepA)	All unvaccinated individuals who anticipate close contact with an international adoptee or those with certain high-risk behaviors		
Hepatitis B Vaccine (HepB)	Adults at risk, 18 years of age and older – (3 doses)		
Meningococcal Conjugate Vaccine (MCV)	College freshmen living in dormitories not previously vaccinated with MCV and others at risk, 18 years of age and older – 1 dose. Meningococcal polysaccharide vaccine is preferred for adults ages 56 years and older		
Human Papillomavirus (HPV)	For eligible Members 9-45 years of age		
Shingles Vaccine	Healthy adults 50 years of age and older		
Haemophilus Influenza Type B (Hib)	For eligible Members who are at high risk and who have not previously gotten Hib vaccine (1 dose)		

Childhood Immunizations from Birth to 18 Years of Age

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Source: Centers for Disease Control (CDC) 2019



Value Added Services (Extra Benefits You May Qualify For)

Value Added Services (VAS)

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The EBCI Tribal Option will offer additional services that are referred to as Value Added Services (VAS). These services are unique to the EBCI Tribal Option and are not offered by the health plans. VAS can be identified and explained by either the NC Enrollment Broker or your Care Manager in the Health Plan Choice Guide, Member welcome packet, Member Handbook, and the EBCI Tribal Option website at https://ebcitribaloption.com/members/health-promotion-and-education/. PCPs will be notified of the availability of these services via your Care Manager, the EBCI Tribal Option website, and the Provider Manual, and if you feel that you qualify for any of these services, contact Member Services at 1-800-260-9992 (TTY 711).

Value Added Services (VAS)					
Value Added Services (VAS)	Definition of Criteria	Prior Authorization	Responsibility		
Cherokee language classes and supplemental learning	Enrollment limited only to classes offered by Cherokee Choices	None required	Provided by Cherokee Choices		
materials			Not provided by Medicaid providers		
Car Safety Seat with education on installation and use	Car Safety Seat limited to newborns only EBCI Tribal Option Member is not eligible to get car seats from other agencies or programs	Care Manager referral	Not provided by Medicaid providers		
Up to \$75 in gift cards or a breast pump (approx \$200 value) for members who attend the required prenatal appointments	 Adherence to prenatal appointments as defined in the Member's care plan Adherence to required appointments as ordered by the treating physician for the pregnancy 	Care Manager submits the authorization to Member Services Manager for distribution of \$25 gift card per trimester	EBCI Tribal Option issues the gift cards		

Up to \$250 voucher for a computer, if accepted and enrolled full time in an institution of higher education	 Must be ineligible for EBCI Higher Education services Proof of acceptance to and full-time enrollment at an institution of higher education 	 Adherence to the EBCI Higher Education policy Purchase is available for Members of the EBCI Tribal Option who do not meet benefit eligibility for EBCI enrolled members 	Not provided by Medicaid providers
Transportation for job training and other activities to implement person's care plan	 Transportation for job training and other activities required for implementing an individual's care plan 	Care Manager referral	Provided by Cherokee Transit
Up to \$750 voucher for associate's degree tuition and materials	 Must be 21 years of age or older Submit request to Member Services for approval Must be ineligible for EBCI Department of Education services 	 Submit request to Member Services Must adhere to the EBCI Higher Education policy Available for EBCI Tribal Option Members who do not meet benefit eligibility for EBCI enrolled members 	Not provided by a Medicaid provider
Up to \$250 Graduate Equivalency Degree (GED®) test voucher, materials, and life skills training	 Must be 19 years of age or older Submit request to Member Services for approval Must be ineligible for EBCI Higher Education services 	 Must be ineligible for tribal education reimbursement Must adhere to the EBCI Higher Education policy Available for EBCI Tribal Option Members who do not meet benefit eligibility for EBCI enrolled members 	Not provided by a Medicaid provider
Nutrition, cooking, and exercise classes	Members are eligible to attend these classes	None required	CIHA, EBCI, or other tribal entities or CIHA sponsored or endorsed activities
1 pair of sport shoes per calendar year	 Must be 18 years of age or younger Must be ineligible for the EBCI shoe program or its maximized benefit 	Prior authorization required	Purchase of shoes only through the Birdtown Recreation Center

Indian Health Service (IHS) Eligibility

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The determination process for Indian Health Service (IHS) eligibility is unique to the EBCI Tribal Option. If your IHS eligibility is denied and you feel you are entitled to these services, you can appeal by contacting the **CIHA Patient Access Manager at 1-828-497-9163**. This appeal will be processed by the CIHA Eligibility Committee, and a decision will be made within thirty (30) days of filing the appeal.

If You Have Problems with the EBCI Tribal Option and/or Healthy Opportunity Pilot (HOP) Services, You Can File a Grievance

How to File a Grievance Regarding the EBCI Tribal Option and/or Healthy Opportunities Pilot (HOP) Services

We hope the EBCI Tribal Option serves you well. If you are unhappy or have a complaint, you may talk with your Primary Care Provider or Care Manager, and you may contact us:

By Mail:

EBCI Tribal Option 241 Cherokee Hospital Loop Cherokee, NC 28719

By Phone:

Member Services

1-800-260-9992 (TTY 711) (Monday through Friday from 8:00am to 4:30pm)

A grievance and a complaint are the same thing. Contacting us with a grievance means that you are unhappy with the EBCI Tribal Option, your Care Manager, provider, or your health services. Most problems like this can be solved right away. Whether we solve your problem right away or need to do some work, we will document your call, your problem, and our solution. We will inform you when we have received your grievance. We will also tell you when we have finished working on your grievance.

You can ask a family member, a friend, your provider, or a legal representative to help you with your complaint. If you need our help because of a hearing or vision impairment, or if you need translation services, or help filling out any forms, we can help you.

You can contact us by phone or in writing at any time:

By Phone:

Member Services 1-800-260-9992 (TTY 711) (Monday through Friday, from 8:00am to 4:30pm)

By Mail:

EBCI Tribal Option 241 Cherokee Hospital Loop Cherokee, NC 28719

Resolving Your Grievance:

In Resolving Your Grievance:

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We will let you know in writing that we got your grievance. We will review your complaint and tell you how we resolved it within twenty-one (21) calendar days of hearing from you.

The EBCI Tribal Option shall make a decision regarding the grievance and provide notice to the Member of its decision within twenty-one (21) calendar days of receipt of the Member grievance.

The EBCI Tribal Option may extend the timeframe for resolving your grievance up to fourteen (14) calendar days if we need additional information and/or the delay serves your best interest.

We will make every effort to provide a prompt verbal notice if the timeframe is extended. We will notify you of the delay and give you written notice within two (2) calendar days. Each notice you get will tell you the reason why the decision was made to extend the timeframe. You will have the right to file a grievance or complaint if you disagree with the decision.

For more information on how grievances are handled, refer to our Grievance Procedures on the EBCI Tribal Option website at www.ebcitribaloption.com/members/grievances-and-appeals/.

Appeals JWRODJT

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EBCI Tribal Option Members have a right to appeal decisions stopping, limiting, or denying a health service requested by your doctor. If a health service is stopped, limited, or denied, you will get a letter from either NC Medicaid Direct or your Local Management Entity/Managed Care Organization (LME/MCO). The path for your appeal depends on whether you get an Adverse Determination letter from NC Medicaid or whether you get a Notice of Adverse Benefit Determination from an LME/MCO. No matter who sends the decision stopping, limiting, or denying a health service, the letter will explain how to file

an appeal and what happens next. For more information about LME/MCO appeal rights, please reference your LME/MCO member handbook. The following is an overview of the appeals process for NC Medicaid Direct:

Appealing an Adverse Determination from NC Medicaid

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In most cases, a decision to stop, limit, or deny services will be made by NC Medicaid. If NC Medicaid decides to stop, limit, or deny a health care service requested by your doctor, they will send you a letter of Adverse Determination along with an Appeal Request Form. This letter and form will explain your right to appeal NC Medicaid's decision by requesting a State Fair Hearing.

- If you do not agree with the Adverse Determination, you have the right to appeal the decision by requesting a State Fair Hearing. A State Fair Hearing will be held by the NC Office of Administrative Hearings. A State Fair Hearing is your opportunity to give more information and facts and to ask questions about the decision before an Administrative Law Judge (who rules on laws that regulate government agencies). The judge in your State Fair Hearing is not part of the EBCI Tribal Option in any way. An Administrative Law Judge will review your request and any new information you may provide to make a decision about your service request.
- You have thirty (30) days from the date on the Adverse Determination letter to ask for a State Fair Hearing.
- You can request a State Fair Hearing by using one (1) of the following options:

o By Mail:

Fill out and sign the Appeal Request Form that you got with the letter of Adverse Determination. Mail it to the address listed on the form. Your request must be received no later than thirty (30) days after the date on the Adverse Determination letter.

By Phone:

You can call to ask for an appeal at:

 NC Office of Administrative Hearings 984-236-1860, or

There are instructions on the form that tell you what to do.

By Fax:

Fill out, sign, and fax the Appeal Request Form no later than thirty (30) days after the date on the Adverse Determination letter. You will find the fax number listed on the form.

- You can ask for a State Fair Hearing yourself. You may also ask a friend, a family member, your provider, or a lawyer to help you. You can call the EBCI Tribal Option at 1-800-260-9992 (TTY 711) or visit the EBCI Tribal Option website at www.ebcitribaloption.com if you need help with your State Fair Hearing request.
- When you request a State Fair Hearing, you and any person you have chosen to help you can see the health records and criteria NC Medicaid used to make the decision you are appealing. If you choose to have someone help you, you must give them written permission.
- When you ask for a State Fair Hearing, you will continue to get your benefits at the same level you were receiving them before the Adverse Determination letter. Once you file your State Fair Hearing request, you do not need to take any other action to continue receiving your services. If you file your State Fair Hearing request within ten (10) days of the date on the Adverse Determination letter, you will continue to get services without interruption. If you file your State Fair Hearing request between day eleven (11) and thirty (30) from the date on the letter of Adverse Determination, you may experience an interruption in services before they are reinstated.
- If you need any assistance understanding the Adverse Determination letter or the State Fair Hearing process, you can contact:

o By Phone:

- Member Services
 1-800-260-9992 (TTY 711), or
- Medicaid Appeals Line 919-855-4350, or
- NC Medicaid Ombudsman 877-201-3750
- If you need a quick decision because your life, physical or mental health, or ability to attain, maintain, or regain good health is in danger, you may request an expedited (faster) State Fair Hearing by mail, phone, or fax. The Appeal Request Form you got with your Adverse Determination letter will provide instructions on how to ask for an expedited appeal.

- If your request for an expedited State Fair Hearing is granted, you will have a State Fair Hearing as quickly as possible.
- If your request for an expedited State Fair Hearing is denied, your State Fair Hearing will be decided in the standard appeal timeline.
- When you request a State Fair Hearing, you will be contacted by the Mediation Network of North Carolina within five (5) business days to schedule a phone mediation to resolve your appeal quickly. You do not have to participate in mediation. You can ask for the State Fair Hearing to be scheduled, or you can schedule a mediation to attempt to resolve your appeal.
- If you choose to forego mediation or mediation is unable to resolve your appeal, a
 State Fair Hearing will be held within fifty-five (55) days of receipt of your appeal
 request, unless an extension is granted. The Administrative Law Judge will have
 twenty (20) days from the State Fair Hearing to issue a final decision on your
 appeal.
- If you disagree with the final decision, you may appeal that decision to the Superior Court in the county where you live by filing the appeal with your county Superior Court within thirty (30) days from the day you got the State Fair Hearing final decision.

Member Rights and Responsibilities

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As a Member of the EBCI Tribal Option, you have certain rights and responsibilities. The EBCI Tribal Option will respect your rights and make sure that no one working for our plan or any of our providers, will prevent you from using your rights. Also, we will make sure that you are aware of your responsibilities as a Member of our health care option. Providers must also adhere to these Rights and Responsibilities when providing services and supports to you.

A Healthy Opportunities enrollee can find their Rights and Responsibilities for the Healthy Opportunities Pilot on the EBCI Tribal Option website at www.ebcitribaloption.com.

Your Rights

As a Member of the EBCI Tribal Option, you have a right to:

- Be cared for with respect and with consideration for your dignity and privacy without regard for health status, sex, race, color, religion, national origin, age, marital status, sexual orientation or gender identity.
- Be told what services are available to you.
- Be told where, when and how to get the services you need from the EBCI Tribal Option.
- Be told of your options when getting services so you or your guardian can make an informed choice.
- Give your approval of any treatment.
- Give your approval of any plan for your care after that plan has been fully explained to you.
- Refuse care and be told what you may risk if you do.
- Get information about your health care.
- Get a copy of your medical record and talk about it with your PCP.
- Ask, if needed, that your medical record be amended or corrected.
- Be sure that your medical record is private and will not be shared with anyone except as required by law, contract or with your approval.
- Use the EBCI Tribal Option complaint process to settle complaints. You can also contact the NC Medicaid Ombudsman at 1-877-201-3750 any time you feel you were not fairly treated.
- Use the State Fair Hearing system.
- Appoint someone you trust (relative, friend or lawyer) to speak for you if you are unable to speak for yourself about your care and treatment.
- Receive considerate and respectful care in a clean and safe environment, free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.

Your Rights if You are a Minor

Minors have the right to agree to some treatments and services without the consent of a parent or guardian:

- Treatment for sexually transmitted diseases.
- Services related to pregnancy.
- Services to help with alcohol and/or other substance use disorders.
- Services to help with emotional conditions.

Member Rights

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Right to Considerate and Respectful Care

You have the right to:

- Expect that we will respect your dignity and privacy as you utilize our care, services, and providers.
- Expect that we will respect your values and beliefs. We will support your beliefs as long as they do not hinder the well-being of others or your planned course of care.
- Be cared for and supported with respect without regard to race, color, National Guard or Veteran's status, national origin, age, disability, sex, ethnicity, pregnancy, religion, sexual orientation, culture, language, health status, need for health care services, physical or mental disability, socioeconomic status, marital status, or gender identity or expression.
- Report abuse, neglect, discrimination, or harassment to any health care worker, manager, or executive director.

Right to Information

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You have the right to:

- Obtain current and understandable information from physicians and caregivers regarding your diagnosis, treatment, and prognosis, except in emergencies in which you lack the capacity to make decisions and the need for treatment is urgent.
- Have misinformation removed from or disagreeing opinions about treatment or recommendations added to your medical record. Any changes to your medical record will be made free of charge.
- Discuss and request information related to specific procedures and treatments, including risks involved and reasonable alternatives and receive assistance when you need information interpreted. You or someone you choose will have access to this information, which can be interpreted if necessary, except when restricted by law.

Right to Decide or Refuse Treatment

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You have the right to:

- Take part in planning your care and have an active role in the person-centered plan, including refusal of treatment, supports, or recommendations at any time.
- Be consulted if a doctor wants you to participate in a research or donor program and allowed to choose whether or not you want to participate. You will receive quality care and support whether or not you choose to participate.

Right to Privacy

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You have the right to:

 Every consideration of privacy. Discussion of your care, consultations, examinations, and treatment will be conducted privately and discreetly. Individuals not directly involved in your care must have your permission to be present.

Right to Confidentiality

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You have the right to:

 Expect that all communications and records pertaining to your care will be treated as confidential, except in cases of suspected abuse and public health hazards when reporting is required by law.

Right to Reasonable Response

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You have the right to:

 Obtain second opinions or request external assistance in accomplishing your care plan goals. You may include family, friends, and advocates to be on your Care Team to assist you with understanding and addressing your identified care support needs.

Right to Continuity of Care

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You have the right to:

- Reasonable continuity of care. You have the right to know, in advance, what appointment times and physicians are available.
- Expect that your providers and other support agencies will keep you informed of your continuing health care requirements following discharge.

Right to Advance Directive

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You have the right to:

- An Advance Directive, such as a living will or health care power of attorney. These
 documents express your choices about your future care or name someone to
 make decisions for you if you cannot speak for yourself. A copy of the health care
 power of attorney will be required whenever that person is making decisions on
 your behalf.
- Receive information and assistance that can help you formulate an Advanced Directive. Contact your Primary Care Provider, Care Manager, or Member Services to request this information and assistance.

Right to Knowledge of Policies and Practices Affecting Your Care

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You have the right to:

- Be informed of our policies and practices that relate to your care and services.
- Voice complaints and recommend changes without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment, and services.
- Be informed about resources that resolve disputes and grievances. If your concerns are not resolved with the EBCI Tribal Option, you may report them to the NCDHHS.
- You can also contact the NC Medicaid Ombudsman any time you feel you were not fairly treated. For more information about the NC Medicaid Ombudsman, refer to page 74.

Right to an Interpreter

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You have the right to:

- An interpreter, translation services, or other forms of communication if you do not speak English or have trouble reading, hearing, or communicating.
- A minister/spiritual advisor of your choosing.
- Present your concerns, receive spiritual care, receive advice concerning ethical issues related to care, discharge planning, and money matters concerning care.

Right to Protection

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You have the right to:

 Receive help with protection from abuse, discrimination, and neglect. You can report your concerns to your Primary Care Provider, your Care Manager, or Member Services or by using the contact form on the EBCI Tribal Option website at https://ebcitribaloption.com/contact/.

Member Responsibilities

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Your Responsibilities

As a Member of the EBCI Tribal Option, you agree to:

- Work with your Care Manager to protect and improve your health.
- Find out how your primary care case management coverage works.
- Listen to your Care Manager's advice and ask questions.
- Treat health care staff with respect.
- Keep your appointments. If you must cancel, call as soon as you can.
- Use the Emergency Department only for emergencies.
- Call your PCP when you need medical care, even if it is after hours.
- Give correct and complete reports about your health.
- Tell your doctor and Care Manager if you do not understand the plan for your care and services or know what your role is within that plan.

- Participate in the plan of care and services that you, your PCP, and your Care Team have prepared.
- Understand that you may cause your health to decline if you refuse treatment or do not follow your care plan.
- Report changes in your health and keep scheduled appointments.
- Consider the needs and feelings of other patients and members of your Care Team.
- Give Advance Directives (Five Wishes, a living will, or a health care power of attorney), if you have any.

Rights and Responsibilities for Pediatric Members and Their Families

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In addition to the Member rights and responsibilities previously listed, the following rights and responsibilities specifically apply to pediatric Members [under eighteen (18) years of age]:

You have the right to:

- Receive timely reports about your care that you can understand.
- Emotional support.
- · Your need to grow, play, and learn.
- Make your own choices when you are able to do so.

Family Responsibilities

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Provide correct, complete reports about your child's health.

- Give your child the care he or she needs.
- Think about and respect the rights of other patients, families, and other members of the Care Team.

How to Change Your Health Care Option (Disenrollment from the EBCI Tribal Option)

Options for Disenrollment from the EBCI Tribal Option Program

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You can disenroll from the EBCI Tribal Option at any time, for any reason. Your enrollment in the EBCI Tribal Option may also be impacted by certain factors, like moving out of the EBCI Tribal Option service area. Our service area includes Cherokee, Haywood, Graham, Jackson, and Swain County and the neighboring counties of the 5-county region.

Being a Member of the EBCI Tribal Option also means that you may have the choice of a Health Plan if you choose to disenroll. To learn more about health plans and NC Medicaid Managed Care, contact the **NC Medicaid Enrollment Broker at 1-833-870-5500 (TTY 711 or RelayNC.com)** Monday to Saturday 7:00 a.m. to 5:00 p.m. or visit ncmedicaidplans.gov.

Moving Out of the EBCI Tribal Option Service Area

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If you move out of the service area, you may be disenrolled from the EBCI Tribal Option. When you move, call **Member Services** at **1-800-260-9992** to report your change of address, and Member Services will notify Medicaid of your change in address. You can also use ePASS to update your information or call your local Department of Social Services.

You May Be Disenrolled in the EBCI Tribal Option if You

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You may be disenrolled from the EBCI Tribal Option if any of the following happen:

- · You are no longer eligible for Medicaid
- You have a change in your IHS eligibility determination
- You move out of the EBCI Tribal Option Service Area
- You stay in a nursing home for more than ninety (90) days in a row
- You become eligible for and are transferred for treatment to a state-owned Neuro-Medical Center or a Department of Military and Veterans Affairs-operated Veterans Home
- You change in Medicaid eligibility category
- You begin receving Medicare

If you are no longer eligible for Medicaid, you will receive a letter letting you know that all benefits and services that you may be receiving under the program will stop. If this happens, contact your local Department of Social Services.

How to Change your Health Plan or PCCM (EBCI Tribal Option) if You Move Out of the Service Area or if You Want to Change to a Different Health Plan

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How to Disenroll from EBCI Tribal Option and Enroll in a Health Plan

- Some people have different choices of health care options from NC Medicaid. Because you are a Member of the EBCI Tribal Option, you may be able to choose from several different health plans based on your health care goals and needs. You can request to change your health plan by contacting the NC Medicaid Enrollment Broker. You can ask to change health plans by phone or mail or electronically. You will get help and information from the Enrollment Broker. If you want to change your health plan, you can change in one of these ways:
 - o Go to <u>ncmedicaidplans.gov</u>.
 - Use the NC Medicaid Managed Care mobile app
 - o Call 1-833-870-5500 (TTY 711 or RelayNC.com)
- You can also ask for a form to mail or fax your request to change health plans. If your request is approved, you will get a notice that the change will take place by a certain date. The EBCI Tribal Option will provide you care until then.
- You can ask for faster action if you believe the timing of the regular process will cause risk to your health. In that case, you will get a notice about your request to leave the health plan within three (3) days of making the request.

We Can Ask You to Disenroll from the EBCI Tribal Option

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You can be disenrolled in the EBCI Tribal Option program if:

- Your behavior seriously hinders our ability to care for you or other EBCI Tribal Option Members
- We have documented efforts to resolve your issues

You Can Appeal a Disenrollment Decision

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You or your authorized representative may request a State Fair Hearing if you disagree with a decision that:

- Denied your request to change plans or
- Approved the EBCI Tribal Option's request for you to be disenrolled

A State Fair Hearing is your opportunity to give more information and facts and to ask questions about the decision before an Administrative Law Judge. The judge in your State Fair Hearing is not in any way affiliated with the EBCI Tribal Option.

You have thirty (30) days from the time you get a notice to request a State Fair Hearing if the EBCI Tribal Option:

- Denies your request to change your plans, or
- Requests you to leave the EBCI Tribal Option

When you request a State Fair Hearing, you will get an opportunity to mediate your disagreement. Mediation is an informal voluntary process to see if an agreement can be made on your case. Mediation is guided by a professional, impartial mediator. If you do not reach an agreement at mediation, you can still have a State Fair Hearing. You can also decide not to go through mediation and just ask for a State Fair Hearing.

Request a State Fair Hearing one of the following ways:

By Mail:

NC Office of Administrative Hearings (OAH)
Attention: Clerk of Court
1711 New Hope Church Road
Raleigh, NC 27609

- By Phone: 1-984-236-1860
- By Fax: 984-236-1871

State Fair Hearings for Disenrollment Decisions

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You have the right to request a State Fair Hearing if you disagree with the decision on your disenrollment from the EBCI Tribal Option. A State Fair Hearing allows you or your representative to make your case before an Administrative Law Judge who rules on laws that regulate government agencies. If you have any questions, call **Member Services at 1-800-260-9992 (TTY 711)**.

Advance Directives

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There may come a time when you become unable to manage your own health care. If this happens, you may want a family member or other person close to you making decisions on your behalf. By planning in advance, you can arrange now for your wishes to be carried out. An Advance Directive is a set of directions you give about the medical and mental health care you want if you ever lose the ability to make decisions for yourself.

Making an Advance Directive is your choice. If you become unable to make your own decisions, and you have no Advance Directive, your doctor or behavioral health provider will consult with someone close to you about your care. Discussing your wishes for medical and behavioral health treatment with your family and friends now is strongly encouraged, as this will help to make sure that you get the level of treatment you want if you can no longer tell your doctor or other physical or behavioral health providers what you want.

North Carolina has three (3) ways for you to make a formal Advance Directive. These include living wills, health care power of attorney, and advance instructions for mental health treatment.

Living Will

In North Carolina, a "living will" is a legal document that tells others that you want to die a natural death if you:

- Become incurably sick with an irreversible condition that will result in your death within a short period of time
- Are unconscious and your doctor determines that it is highly unlikely that you will regain consciousness
- Have advanced dementia or a similar condition which results in a substantial loss
 of attention span, memory, reasoning, and other brain functions, and it is highly
 unlikely the condition will be reversed.

In a living will, you can direct your doctor not to use certain life-prolonging treatments, such as a breathing machine (called a "respirator" or "ventilator"), or to stop giving you food and water through a feeding tube.

A living will goes into effect only when your doctor and another doctor determine that you meet one (1) of the conditions specified in the living will. You are encouraged to discuss your wishes with friends, family, and your doctor now, so that they can help make sure that you get the level of care you want at the end of your life.

Health Care Power of Attorney

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A "health care power of attorney" is a legal document in which you can name one (1) or more people as your health care agent(s) (someone who can make medical and behavioral health decisions for you as you become unable to decide for yourself). You can always say what medical or behavioral health treatments you would want and not want. You should choose an adult you trust to be your health care agent. Discuss your wishes with the people you want as your agents before you put them in writing.

Again, it is always helpful to discuss your wishes with your family, friends, and your doctor. A health care power of attorney will go into effect when a doctor states in writing that you are not able to make or to communicate your health care choices. If, due to moral or religious beliefs, you do not want a doctor to make this determination, the law provides a process for a non-physician to do it.

Advance Instruction for Mental Health Treatment

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An advance instruction for mental health treatment is a legal document that tells doctors and mental health providers what mental health treatments you would want and what treatments you would not want if you later became unable to decide for yourself. It can also be used to nominate a person to serve as guardian if guardianship proceedings started. Your advance instruction for behavioral health treatment can be a separate document or combined with a health care power of attorney or a general power of attorney. An advance instruction for behavioral health may be followed by a doctor or behavioral health provider when your doctor or an eligible psychologist determines in writing that you are no longer able to make or communicate behavioral health decisions.

Forms You Can Use to Make an Advance Directive

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You can find the Advance Directive forms at www.sosnc.gov/ahcdr. The forms meet all the rules for a formal advance directive. For more information, you can also call 919-807-2167 or write to:

Advance Health Care Directive Registry Department of the Secretary of State P.O. Box 29622 Raleigh, NC 27626-0622

You can change your mind and update these documents at any time. We can help you understand or get these documents. They do not change your right to quality health care benefits. The only purpose is to let others know what you want if you cannot speak for yourself. Talk to your PCP or call Member Services at 1-800-260-9992 (TTY 711) or the NC Medicaid Contact Center at 1-888-245-0179 if you have any questions about advance directives.

Five Wishes

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The EBCI Tribal Option and Cherokee Indian Hospital also provide *Five Wishes* books. These books guide you in creating your Advance Directive. These can be notarized and filed with your PCP. Contact your Care Manager or Member Services with any questions or to request a *Five Wishes* book.

Concerns About Abuse, Neglect, and Exploitation

Your health and safety are very important. You should be able to lead your life without fear of abuse or neglect by others or someone taking advantage of them (exploitation). Anyone who suspects any allegations of abuse, neglect, or exploitation of a child [age seventeen (17) or under] or disabled adult **must** report these concerns to the local DSS office. A list of DSS locations can be found here: ncdhhs.nc.gov/localdss. There are also rules that no one will be punished for making a report when the reporter is concerned about the health and safety of an individual.

Providers are required to report any concerns of abuse, neglect, or exploitation of a child or disabled adult receiving mental health, substance use disorder, I/DD services and/or TBI services from an unlicensed staff to the local DSS and the Healthcare Personnel Registry Section of the North Carolina Division of Health Service Regulation for a possible investigation. The link to the Healthcare Personnel Registry Section is https://ncnar.ncdhhs.gov/verify_listings1.jsp.. The provider will also take steps to ensure the health and safety of individuals receiving services.

For additional information on how to report concerns, contact your Care Manager or **Member Services at 1-800-260-9992 (TTY 711).**

Fraud, Waste and Abuse

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If you suspect that someone is committing Medicaid fraud report it. Examples of Medicaid fraud include:

- An individual who does not report all income or other health insurance when applying for Medicaid.
- An individual who does not get Medicaid uses a Medicaid member's card with or without the member's permission.
- A doctor or a clinic bills for services that were not provided or were not medically necessary.

You can report suspected fraud and abuse in any of the following ways:

- Call the EBCI Fraud, Waste and Abuse Tip Line at 1-800-455-9014
- Call the Medicaid Fraud, Waste and Abuse Program Tip Line at 1-877-DMA-TIP1 (1-877-362-8471)
- Call the State Auditor's Tipline at 1-800-730-TIPS (1-800-730-8477)
- Call the U.S. Office of Inspector General Fraud Line at 1-800-HHS-TIPS (1-800-447-8477)
- Access the NC Medicaid Fraud and Abuse Confidential Complaint Form at https://medicaid.ncdhhs.gov/meetings-notices/report-fraud-waste-or-abuse/medicaid-fraud-and-abuse-confidential-complaint

Important Phone Numbers and Hours of Operation

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EBCI Tribal Option Member Services	1-800-260-9992 (TTY 711)	Monday through Friday 8:00am to 4:30pm
EBCI Tribal Option Provider Services	1-800-260-9992 (TTY 711)	Monday through Friday 8:00am to 4:30pm
EBCI Family Safety	1-828-359-1520	Available 24 hours a day
(After Hours Number)	1-828-497-4131	When calling after hours, request to speak to the Family Services on-call social worker
EBCI Legal Assistance Office (Free Legal Service)	1-828-359-7400	
EBCI Fraud, Waste and	1-800-455-9014	24 hours a day or
Abuse Tip Line		Online at <u>ebci.alertline.com</u>
NC Medicaid Contact Center	1-888-245-0179	Monday through Friday 8:00am to 5:00pm
NC Enrollment Broker	1-833-870-5500	Monday through Saturday 7:00am to 5:00pm
Free Legal Services Line (Legal Aid NC Helpline)	1-866-219-5262	 Monday through Friday 8:30am to 4:30pm Monday and Thursday 5:30 pm to 8:30pm
NC Medicaid Fraud, Waste and Abuse Tip Line	1-877-362-8471 (1-877-DMA-TIP1)	
State Auditor's Tipline (to Report Fraud and Waste)	1-800-730-8477 (1-800-730-TIPS)	
U.S. Office of Inspector General Fraud Line	1-800-447-8477 (1-800-HHS-TIPS)	
NC Medicaid Ombudsman	1-877-201-3750	 Monday through Friday 8:00am to 5:00pm, except state holidays After hours/on weekends, call and leave a message or use online portal at https://ncmedicaidombudsman.org/contact/

NC Mediation Network NC Mediation Network supports community mediation centers across the state to assist with informally resolving disputes.	1-336-461-3300	Monday through Friday 8:00am to 5:00pm
NCDHHS Compliance Attorney, Office of the Secretary	1-919-855-4800	
U.S. Department of Health and Human Services, Office for Civil Rights	1-800-368-1019 (TTY 1-800-537-7697)	
Medicaid Appeals Line	1-919-855-4350	
NC Office of Administrative Hearings	1-984-236-1850 (for general questions) 1-984-236-1860 (for an appeal)	
Advance Health Care Directive Registry	1-919-807-2167	
CIHA Patient Access Manager	1-828-497-9163	
EBCI / NCDHHS Medicaid and FNS Eligibility Office	1-828-497-4317	

Keep Us Informed

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Call **Member Services at 1-800-260-9992 (TTY 711)** whenever these changes happen in your life:

- You have a change in Medicaid eligibility
- Pregnancy status or when you give birth
- There is a change in Medicaid coverage for you and/or your children
- Physical address and/or phone number
- Residency if you move from your home to a care facility such as a nursing home

- Death of an EBCI Tribal Option Member
- IHS eligibility
- Family composition

Any life changes need to be reported to your local DSS office.

If you no longer get Medicaid, check with your local DSS office or check to see if you qualify for any other services at:

EBCI/NCDHHS Medicaid and FNS Eligibility Office 1526 Acquoni Road Cherokee NC 28719 828-497-4317

You may be able to enroll in another program.

NC Medicaid Ombudsman

O'BC" පියාර්ච JLAO DJ&@y DLSJ@ Dd DBC OROC uyvtsv gayalena gudalvnv akuyisgi adagatiya ale ayeli usvkali Dho@ DS4ӘJӘУ D_BBO DqQ 9hEOG'USY atsikanv agasesdisgi udiskanosdvnv atsudv nunigvwiyusadegi asiyvwi 40AL00 hPRO ΡRΤ tsuwugodanv nigesvna gesvi

The NC Medicaid Ombudsman is a resource you can contact if you need help with your health care needs. The NC Medicaid Ombudsman is an independently operated, nonprofit organization whose only job is to ensure that individuals and families under NC Medicaid get access to the care that they need.

The NC Medicaid Ombudsman Can:

- Answer your questions about benefits
- Help you understand your rights and responsibilities
- Provide information about Medicaid and Medicaid Managed Care
- Answer your questions about enrolling in or disenrolling from a health plan
- Help you understand a notice you have gotten
- Refer you to other agencies that may be able to assist you with your health care needs
- Help resolve issues you are having with your health care provider, PCCM, Member, or health plan

- Be an advocate for you if you are dealing with an issue or a complaint affecting access to health care
- Provide information to assist you with your appeal, grievance, mediation, or fair hearing
- Connect you to legal help if you need it to help resolve a problem with your health care

You can contact the **NC Medicaid Ombudsman at 1-877-201-3750** from 8:00am to 5:00pm Monday through Friday. To make contact after hours and on weekends (except for State holidays), use the online portal at ncmedicaidombudsman.org and select the "Get Help" button or call the phone number and leave a message. You will receive a return call the next business day.

Appendix A: Services Covered by the EBCI Tribal Option

Services Covered by the EBCI Tribal Option

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You may receive the following services from any NC Medicaid provider. Services must be medically necessary, provided, and coordinated by your PCP. These services are available to NC Medicaid beneficiaries, unless otherwise specified. If you have questions or need assistance, contact your PCP or Care Manager or call Member Services at 1-800-260-9992 (TTY 711).

Regular Health Care

- Office visits with your PCP, including regular check-ups, routine labs, and tests
- Referrals to specialists
- Vision/hearing exams
- Well-baby care
- Well-child care
- Immunizations (shots) for children and adults
- Help with quitting smoking or other tobacco use

<u>Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services for Members Under Age 21</u>

Early and Periodic Screening, Diagnostic and Treatment (EPSDT):

DEA Z6 OFA hSroJe RCArβJ, AreJ, Z6 RCOOJA (EPSDT)

agvyi nole usoyiha nigalisdisgv etsagoliyedi, golisdi, nole etsanvwodihi (EPSDT)

Members under twenty-one (21) years old have access to a broad menu of federal health care benefits referred to as "Early and Periodic Screening, Diagnostic and Treatment Services." "The EPSDT guarantee" covers wellness visits and treatment services and offers a broad menu of health care benefits. The EPSDT benefits provide preventive, diagnostic, and treatment services to help meet children's health and developmental needs. The EPSDT services include age-appropriate medical, dental, and vision and hearing screening services at scheduled visits and also when health problems occur or are suspected.

Early and Periodic Screening and Diagnosis

These "screening" visits are wellness care. They are free for Members under twenty-one (21). These visits include a complete exam, free vaccines, and vision and hearing tests. Your provider will also watch your child's physical and emotional growth and well-being at every visit and "diagnose" any conditions that may exist. At these visits, you will get referrals to any treatment services your child needs to get well and to stay healthy.



The "T" in EPSDT: Treatment for Members under 21 years old

Sometimes children need medical treatment for a health problem, and the planned treatment must be looked at based on its potential to treat, fix, or improve your child's health problem or condition. This is decided based on your child's need. EBCI Tribal Option cannot refuse your child's treatment because of limits in your health plan. Treatment cannot be refused because it is not included in our health plan coverage. We must do a special EPSDT review in these cases.

Medicaid-Covered EPSDT Services Approved by NC Medicaid:

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DOVJ AAGWO akwidodi gohiyutanv

When NC Medicaid approves services for children, important rules apply:

- There are no copays for Medicaid covered services to members under twenty-one (21) years old.
- There are no copays for federally recognized tribal members.
- There are no limits on how often a service or treatment is given, unless the service is found to be medically unnecessarily.
- There is no limit on how many services the Member can get on the same day, unless doing so would cause harm.
- Services may be delivered in the setting that is best for the child's health.
 This might include a school or a community setting.

You can access the entire menu of Medicaid-covered EPSDT services at: https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html or visit the EBCI Tribal Option website at www.ebcitribaloption.com.

The broad menu of medical care services includes, but is not limited to, the following examples:

- Dental
- Comprehensive health screening (well-child check-ups, developmental screenings, and immunizations)
- Health education
- Hearing
- Home health
- Hospice
- Inpatient and outpatient hospital
- Lab and X-ray
- Mental health
- Personal care
- Physical and occupational therapy
- Prescription drugs
- Prosthetics
- Rehabilitation and therapy (for speech, hearing, and language disorders)
- Transportation to and from medical appointments
- Vision
- Any other necessary health services that treat, fix, or improve a health problem

If you have questions about EPSDT services, speak with your child's PCP or your Care Manager. For more information about the EPSDT guarantee online, visit the

EBCI Tribal Option website at www.ebcitribaloption.com
or the NC Medicaid EPSDT webpage at https://medicaid.ncdhhs.gov/medicaid/get-started/find-programs-and-services-right-you/medicaids-benefit-children-and-adolescents.

Help to Quit Smoking or Using Other Tobacco Products

DrอราVJ Dradvj iAyde Do iejde 4t kw oora Alisdelvdodi Ayohisdodi Vgogisgv ale Vgvdisgv Soi Tsola Utvsvhi

 Resources and classes to help you quit smoking or using other tobacco products



Maternity Care

JOLMP JS4@VJ

Dinadaluli Digasesdodi

- Prenatal, delivery, and post-partum care
- Childbirth education classes
- Professional and hospital services related to maternal care and delivery
- One (1) medically necessary post-partum home visit for newborn care and assessment following discharge, but no later than sixty (60) days after delivery
- High-risk pregnancy care management services during pregnancy and for two (2) months after delivery

Hospital Care

ShSV iUS4⊕VJ

Ganigato Vdagasesdodi

- Inpatient care
- Outpatient care
- Labs, X-rays, and other tests

Behavioral Health Services (Mental Health and Substance Use Disorder Services)

ILODIA ZO SULGIUO EJON TJONJ

Vdanvtediyi nole Galidasdanv Gvdisgi Ididvnedi

Behavioral health care includes mental health (your emotional, psychological, and social well-being) and substance (alcohol and drugs) use disorder treatment and rehabilitation services. All Members have access to services to help with mental health issues like depression or anxiety or to help with alcohol or other substance use disorders.

The behavioral health services include:

Mental Health Services:

OMGC DBA AOOSE TJONJ ululotsv ayelv nudvnadegv ididvnedi

- Assertive community treatment (ACT)
- Diagnostic assessment services
- Individual, group, and family therapy
- Mobile crisis management services
- · Facility-based crisis services for children and adolescents
- Professional treatment services in a facility-based crisis program
- Specialized behavioral health services for children with autism
- Child and adolescent integrated classroom services
- Community support team (CST)

- EPSDT for members under age twenty-one (21)
- Multi-systemic therapy services
- Intensive in-home services
- Outpatient behavioral health services provided by direct-enrolled providers
- Outpatient behavioral health emergency room services
- Inpatient behavioral health services
- Research-based intensive behavioral health treatment
- Partial hospitalization
- Peer support services
- Psychiatric residential treatment facilities (PRTFs)
- Psychological services in health departments and school-based health centers sponsored by health departments
- Psychosocial rehabilitation
- Residential treatment facility services for children and adolescents

Substance Use Disorder Services:

ราเอเง EVJ TJตกJ (DJพอJ, DlทคอJ Do JyคอJ) galidasdany gydodi ididynedi (aditasdi, adatsiyosdi ale dikihisdi)

- Behavioral health crisis services and withdrawal management services:
 - o Facility-based crisis services for children and adolescents
 - Mobile crisis management services
 - o Professional treatment services in a facility-based crisis program
 - Ambulatory detoxification services
 - Medically supervised or alcohol and drug abuse treatment center detoxification crisis stabilization
 - Non-hospital medical detoxification services
- Outpatient opioid treatment services
- Diagnostic assessment services
- Early and periodic screening, diagnostic and treatment services (EPSDT) for members under age twenty-one (21)
- Inpatient behavioral health services
- Outpatient behavioral health emergency room services
- Outpatient behavioral health services provided by direct-enrolled providers
- Partial hospitalization
- Peer support services
- Psychological services in health departments and school-based health centers sponsored by health departments
- Residential treatment facility services for children and adolescents
- Substance Abuse Comprehensive Outpatient Treatment program (SACOT)
- Substance Abuse Intensive Outpatient (SAIOP)
- Substance abuse medically monitored residential treatment
- Substance abuse non-medical community residential treatment

Services for Individuals with Intellectual and Developmental Disabilities (I/DD):

> Members with I/DD often need services and supports to assist them in learning skills, accomplishing developmental milestones, or gaining more independence. Medicaid can help support the Member in meeting their desires, wishes, and goals. For assistance with accessing these Medicaid benefits, contact your Care Manager

Home Health Services

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- Time-limited skilled nursing services
- Specialized therapies, including physical therapy, speech-language pathology, and occupational therapy [prior authorization required treatment services; beneficiaries aged twenty-one (21) and older limited to twenty-seven (27) visits per year across all therapy disciplines combined; see the ten (10)-series of Specialized Therapies policies for more details: https://medicaid.ncdhhs.gov/providers/clinical-coverage-policies]
- Home health aide services for help with activities such as bathing, dressing, preparing meals, and housekeeping
- Medical equipment and supplies

Personal Care Services

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• Help with common activities of daily living, including eating, dressing, and bathing for individuals with disabilities and ongoing health conditions

Hospice Care

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Nutsosedvna Agasesdodi

- Hospice helps patients and their families or caregivers with the special needs that come during the final stages of illness and after death
- Hospice provides medical, supportive, and palliative care to terminally ill individuals and their families or caregivers
- You can get these services in your home, in a hospital, in an assisted living facility, Adult Care Home, or or in a nursing home

HIV and STI Screening

- You can get HIV and STI testing and treatment and counseling service any time from your PCP or EBCI Tribal Option doctors. When you get this service as part of a family planning visit, you can go to any doctor or clinic that takes Medicaid and offers family planning services. You do not need a referral when you get this service as part of a family planning visit
- You can choose to go either to your PCP or to the local health department for diagnosis and/or treatment. You do not need a referral to go to the local health department

Vision Care

JYOW (JhSVPT) JS4@VJ Digikata (Dinigatoli) Digasesdodi

- Services provided by ophthalmologists and optometrists, including routine eye exams, medically necessary contact lenses, and dispensing fees for eyeglasses.
 Opticians may also fit and dispense medically necessary contact lenses and eyeglasses
- Coverage frequency for routine eye exams and eyeglasses varies for children and adults:
 - Children may receive services once every year [three hundred and sixty-five (365) days]
 - Adults may receive services once every two (2) years [seven hundred and thirty (730) days]
- Early eye exams and eyeglasses can be approved based on medical necessity
- Specialist referrals for eye diseases or defects

Pharmacy

დე J@IhAVJ

Nvwoti Disgwanigododi

- Prescription medication
- Some medicines sold without a prescription (also known as "over-the-counter"), like allergy medicines
- Insulin and other diabetic supplies like syringes, test strips, lancets, and pen needles
- Smoking cessation agents, including over-the-counter products
- Emergency contraception
- Medical and surgical supplies, available through DME pharmacies and suppliers
- NC Medicaid Direct also provides a Pharmacy Lock-In Program, which helps identify Members that are at risk for possible overuse or improper use of pain medication (opioid analgesics) and nerve medication (benzodiazepines and certain anxiolytics)

Emergency Care

Oral DS4aVJ

Ulisda Agasesdodi

- Procedures, treatments, or services needed to evaluate or stabilize an emergency
- After you have received emergency care, you may need other care to make sure you remain in stable condition
- Depending on the need, you may be treated in the Emergency Department, in an inpatient hospital room, or in another setting
- For more information about emergencies, refer to the "For Emergencies" section on page 41)

Specialty Care

iプՐの DS4めVJ

Vtselidv Agasesdodi

Specialty care services include but are not limited to the following:

- Respiratory care services
- Podiatry services
- Chiropractic services
- Cardiac care services
- Surgical services

Nursing Home Services

APCTA TELIMONY LIQUI

Tsunitsvgi Digatidisdiyi Ididvnedi

- Includes short-term or rehabilitation stays and long-term care for up to ninety (90) days
- If you need nursing care for more than ninety (90) days, you may need to enroll in a different health plan. If you have questions, talk with your PCP or Care Manager or call **Member Services at 1-800-260-9992 (TTY 711)**
- Covered nursing home services include medical supervision, twenty-four (24)-hour nursing care, assistance with daily living, physical therapy, occupational therapy, and speech-language pathology
- Nursing home services can only be received from a nursing home that is enrolled in NC Medicaid. For help locating a nursing home enrolled in Medicaid, call Member Services at 1-800-260-9992 (TTY 711)

Transportation Services

DhyŵVJ TJீDJ Anigisdodi Ididvnedi

Emergency

OՐმს TSՐმJმУ ulisda igalisdisgi

If you need emergency transportation (an ambulance), call 911

Non-Emergency

C-Oาดป Tราดปลั่ง tsa-ulisda igalisdisgi

Transportation to help you get to and from your appointments for Medicaid-covered care. This service is free to you. If you need an attendant to go with you to your doctor's appointment, or if your child [eighteen (18) years old or younger) is a Member of the plan, transportation is also covered for the attendant, parent, or guardian. Non-emergency transportation includes personal vehicles, taxis, vans, mini-buses, mountain area transports, and public transportation.

How to Schedule Non-Emergency Transportation

TƏMA JRƏVA OPƏL HERƏ ILAMƏL Iyadvnedi Disvsdodi Ulisda Nigesvna Vdatinvsdi

Call your local DSS office to schedule transportation services. If further assistance is needed, contact your Care Manager. A list of DSS locations can be found here: ncdhhs.gov/localdss. Call, as far in advance as possible, to arrange transportation to and from your appointment.

Long-Term Services and Supports (LTSS)

อภ~งา TJกJ Zb Jกอรงป Kanegwodv Ididvnedi nole Dilisdelvdodi

If you have a certain health condition or disability, you may need help with day-to-day activities, like eating, bathing, toileting, or doing light household chores, including services like home health, personal care services, and other Medicaid Home and Community-Based Services (HCBS) Waiver programs like Community Alternatives Program/Disabled Adults (CAP-DA), Community Alternatives Program for Children (CAP-C) and NC Innovations. You may get LTSS in your home or within your community. Other LTSS services include placement in a nursing home or assisted living facility.

Family Planning

You can go to any doctor or clinic that takes Medicaid and offers family planning services. You can also visit one of our family planning providers. You do not need a referral from your PCP for family planning services. Family planning services include:

- Birth control
- Birth control devices, such as IUDs, implantable contraceptive devices, and others that are available with a prescription
- Emergency contraception
- Sterilization services
- HIV and STI testing, treatment and counseling
- Screenings for cancer and other related conditions

Other Covered Services

- Durable medical equipment/prosthetics/orthotics (when medically necessary; prior authorization and other limits may apply, see the 5-series of Medical Equipment policies for more details: https://medicaid.ncdhhs.gov/providers/clinical-coverage-policies)
- Hearing aid products and services
- Telehealth
- Home infusion therapy
- Rural Health Clinic (RHC) services
- Federally Qualified Health Center (FQHC) services
- Local Health Department services
- Free clinic services
- Dental services
- Services provided or billed by Local Education Agencies that are included in your child's Individualized Education Program, Individual Family Service Plan, a section 504 Accommodation Plan, an Individual Health Plan, or a Behavior Intervention Plan
- Services provided and billed by Children's Developmental Agencies (CDSAs) or providers contracted with CDSAs that are included in your child's Individualized Family Service Plan

If you have questions about any of these EBCI Tribal Option covered services, talk to your PCP, your Care Manager, or call **Member Services at 1-800-260-9992 (TTY 711)**.

Appendix B: Services NOT Covered

Services NOT Covered by Medicaid

TJのハJ Medicaid JJL7VJ hÞRO ididvnedi Medicaid digudalvdodi nigesvna

Below are some examples of services that are **not available** from the EBCI Tribal Option **or** NC Medicaid. If you get any of these services, you may have to pay the bill:

- Cosmetic surgery, if not medically necessary
- Personal comfort items, such as cosmetics, novelties, tobacco, or beauty aids
- Routine foot care, except for beneficiaries with diabetes or a vascular disease
- Routine newborn circumcision (medically necessary circumcision is covered for all ages)
- Experimental drugs, procedures, or diagnostic tests
- Infertility treatments
- Sterilization reversal
- Sterilization for patients under age twenty-one (21)
- Medical photography
- Hypnosis
- Blood tests to determine paternity (contact your local Child Support Enforcement Agency)
- Chiropractic treatment unrelated to the treatment of an incomplete or partial dislocation of a joint in the spine
- Erectile dysfunction drugs
- Weight gain drugs
- Liposuction
- "Tummy tuck"
- Ultrasound to determine sex of child
- Hearing aid products and services for beneficiaries age twenty-one (21) and older
- Services for which you need a referral (approval) in advance, and you did not get it.
- Services for which you need prior authorization in advance, and you did not get it.
- Medical services provided out of the United States
- Tattoo removal
- Payment for copies of medical records

This list does not include all services that are not covered. To determine if a service is not covered, call **Member Services at 1-800-260-9992 (TTY 711)**.

A provider who agrees to accept Medicaid generally cannot bill you. You may have to pay for any service that Medicaid does not approve or offer. Your PCP will inform you about any requested services that Medicaid does not cover. Or, if before you get a service, you agree to be a "private pay" or "self-pay" patient, you will have to pay for the service. This includes:

- Services not covered by NC Medicaid Direct of your LME/MCO (including those previously listed)
- Unauthorized services when referral or prior authorization is required
- Services provided by providers who are not part of Medicaid

If You Get a Bill

ふCOYU D4AA TS DLSE

Yitsanagisa Asehihi Iga Adatugv

If you get a bill for treatment or service that you do not think you owe, do <u>not</u> ignore it. Call **Member Services at 1-800-260-9992 (TTY 711)** immediately. We can explain why you may have gotten a bill and recommend the next steps for you to take.

Service Authorization and Actions

T&TJJ DPAJJØY Z6 OOTJ& iyadvnedi alisgolvdisgi nole nanadvnehv

Medicaid will need to approve certain treatments and services before you get them. Medicaid may also need to approve some treatments or services for you, in order for you to continue receiving them. Obtaining approval before you get or continue treatments and services is called preauthorization. Your provider will obtain approvals from Medicaid on your behalf. Your provider should communicate with you about the approvals or denials of the authorization. If the service requested is denied, you will also get a letter from NC Medicaid explaining why the service was denied and what actions you may take.

The EBCI Tribal Option is committed to meeting your needs. With the focus on you, the Member, (ni hi tsa tse li) "It Belongs to You," the EBCI Tribal Option staff and the EBCI Tribal Option Provider Network, (u wa shv u da nv te lv) "The One Who Helps You from The Heart," will ensure that a Member's needs will be successfully met. The EBCI Tribal Option belongs to the people of the Cherokee community, (di qua tse li i yu sdi) "Like Family to Me," and we are entrusted to serve you.

Together, we will be successful.

We appreciate you joining the EBCI Tribal Option and look forward to working with you. We are here for you!

ชั่วการ เลือง "EBCI" DhWอlp Otsaliheliga tsatelady "EBCI" Anilasdatly

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> TA CEG↑ おVVサ! Ihi tsagvwali otsedoha!

