

NORTH CAROLINA NEEDS MEDICAID TRANSFORMATION NOW.

Ever since the law was passed in 2015 to transition North Carolina's Medicaid system from fee-for-service to managed care, beneficiaries, providers and state taxpayers have been waiting to realize the financial and health benefits of this important law. This legislation gave 1.6 million Medicaid beneficiaries in North Carolina the opportunity to choose the health plan that best fits their individual needs and those of their families and the promise of better health outcomes. It also provided important budget predictability and cost savings to the state.

Despite significant private and state investment in the program, the transition to Medicaid managed care is currently on hold.

The transition to Medicaid managed care should be a top priority for North Carolina. Here's why:

MEDICAID MANAGED CARE OFFERS BUDGET PREDICTABILITY WHEN NORTH CAROLINA NEEDS IT MOST

Transitioning to a managed care system streamlines health care costs for the state, as it will pay one fixed cost to managed care providers, instead of a fee for each doctor visit or medical procedure. It is critical to finish the transition to allow the state to accurately project the annual cost of their Medicaid program and balance state budgets.

MEDICAID MANAGED CARE CREATES COST SAVINGS FOR THE STATE

For each month the state government fails to complete Medicaid's transition to a managed care system, North Carolina's taxpayers lose millions of dollars in cost savings. As the state needs every available dollar to combat the COVID-19 crisis, managed care's cost savings have become even more critical. We must act now to maintain the physical and fiscal health of North Carolina.

MEDICAID MANAGED CARE WILL PROVIDE BETTER HEALTH OUTCOMES

At a time when the needs of vulnerable populations of North Carolinians are especially great, the state can realize the benefits of managed care through health care service delivery, care coordination, behavioral health services, and long-term services and supports. This will provide whole-person care and result in improved health outcomes for over 1.6 million North Carolinians.

SIGNIFICANT PRIVATE AND PUBLIC INVESTMENTS HAVE ALREADY BEEN MADE

Providers, insurers and the state have already made significant investments to transform its Medicaid model to managed care. We can't let these investments go to waste. It's time to finish the job by fulfilling the state's promise to the Medicaid community and taxpayers.

TRANSITIONING MEDICAID TO MANAGED CARE IS ALREADY STATE LAW. THE PROGRAM IS PAUSED.

The pause in the transition to managed care has created confusion among 1.6 million of North Carolina's Medicaid beneficiaries and the providers who care for them—leaving both groups caught between two very different Medicaid models. Until the transition is complete, confusion among beneficiaries and providers about coverage will continue to erode confidence in the system. Beneficiaries and providers deserve stability and definitive action. So do taxpayers who are footing the bill.

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