



Medicaid Care Management

A Tool for People who receive Medicaid who must enroll in Managed Care
A suggested process for making an informed decision

Choosing a Managed Care Plan for your Medicaid Coverage

This document is intended to be used by the Person who receives Medicaid and/or his/her representative.

When you receive NH Medicaid you will be asked to choose a managed care health plan. NH Medicaid Care Management (MCM) program uses two health plans. The health plans cover the same services that NH Medicaid does. The health plans also offer optional services, programs and other extras including wellness and prevention programs.

You will be asked to pick from these health plans:

New Hampshire Healthy Families / Member Services: 1-866-769-3085 / Web www.nhhealthyfamilies.com

Well Sense Health Plan / Member Services: 1-877-957-1300 / Web www.wellsense.org

Each health plan has its own network of doctors, nurses and other providers who work together to give you the care that you need. You will still have Medicaid coverage. Health plans cover the same basic services and programs you have always had with Medicaid but there may be some changes in pharmaceuticals and prior-authorizations. Each health plan may also offer extra services not available under the regular Medicaid program.

This worksheet (on the back) is intended to help you through the process of making an informed decision regarding your Medicaid and your new Care Management Health Plan. It will be important to respond within the time frame that you have been given. If you do not respond, Medicaid will auto-assign you to a health plan. That means that they will pick a health plan for you.

If you have questions about enrolling with a health plan call 1-888-901-4999 and they will assist you. If you have a NH Easy account, you may enroll on-line with NH Easy (<https://nheasy.nh.gov>).

Considerations

- Providers have chosen to sign on to both health plans or just one. You may want to call your providers and inquire which plans they are enrolled with.
- You will have access to the “extra” services offered by the health plans.
- You will have access to a care manager who can help you maneuver through Medicaid services.
- You may not be able to access all of your specialists in one plan, resulting in your choosing new providers.

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

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

Your Providers / Services	How many times a year do you see the provider?	Prioritize What is the most important for you?			Medicaid Health Plans Check off the health plan in which Your providers are listed	
		Must Keep	Change Possible	Willing to Change	Well Sense Health Plan	New Hampshire Healthy Families
Primary Doctor						
Behavioral Health Provider						
Specialist: (i.e. Neurologist, Cardiologist, etc.) List below:						
*						
*						
*						
*						
Rehabilitative Services: (i.e. PT and OT, Speech and Language, etc.) List below:						
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Other Services you may need to consider: (These services should be listed in the health plan’s benefit handbook or you can call the health plan and ask how these services will be addressed)	Well Sense Health Plan	New Hampshire Healthy Families
• Medications / Pharmacy (including compounds and off-label)		
• Transportation Reimbursement		
• Wheelchair Transport to Doctors		
• Deaf Services		
• Cultural / Language Services		
• Other		

*Adapted from NH Family Voices and NHDHHS, Special Medical Services: August, 2015