

# 更多北卡居民可通过联邦医疗补助计划(Medicaid)获得医疗保险。

原本通过“节育医疗补助计划”获得部分补助的人，现在可能有资格通过联邦医疗补助计划(Medicaid)获得全面的医疗保险。

目前北卡医疗补助计划涵盖 19 至 24 岁、收入较高的人群。即使您之前不符合标准，现在您也可能通过 联邦医疗补助计划获得医疗保险。

原本通过“节育医疗补助计划”获得部分补助的人，如果符合新的规定，将从二零二三年十二月一号起自动得全面医疗保险。

## 如何知道是否能通过北卡医疗补助计划获得全面医疗保险？

- 您将收到来自您当地北卡健康与公众服务部的一封信，告知您将开始获得全面医疗保险。
- 之后政府会为您安排一个医疗保险计划。如果想改变您的医疗保险计划，您应在三十天内选择新的计划。
- 您的医疗保险计划会给您邮寄一份资料，包括新的医疗补助身份卡。身份卡上还会有您的家庭医生的名字。如果您想更换医生，可以联络您的医疗保险公司。
- 如果您通过 [HealthCare.gov](#) 享受医疗保险，您必须取消该计划。您可以登录您的 [HealthCare.gov](#) 账户或致电 1-800-318-2596。在从联邦医疗补助计划获取您新的医疗保险信息前请勿取消现有的计划。
- 医疗补助计划可帮助支付门诊、年度体检、急诊、心理健康服务等费用——您只需支付很少的费用或无需支付任何费用。

欲了解更多讯息 [Medicaid.nc.gov](http://Medicaid.nc.gov)

或致电北卡 Medicaid 联系中心 **888-245-0179**

也可访问北卡 Medicaid Ombudsman 网站

[NCMedicaidOmbudsman.org](http://NCMedicaidOmbudsman.org)



为什么通过“节育计划”享受部分补助的人不能自动加入北卡医疗补助的全额医疗保险系统？

有些人的收入可能超过了合格线。如果最近您的收入发生了变化而您认为自己可能符合条件，可在 ePASS 更新您的信息 ([epass.nc.gov](http://epass.nc.gov)) 或联系您当地的社会服务部 (DSS)。此外，请用 ePASS 或联系当地的 DSS 办公室以确保您的联系信息准确无误，以免错过关于医疗保险计划的重要信息。

有限的“节育计划医疗补助”指的是什么？什么人符合条件？

节育医疗补助计划为收入不超过联邦贫困线百分之一百九十五的人免费提供生殖保健服务-相当于每人每月约两千三百七十美元。该计划涵盖几乎所有的避孕方法、性病检测与治疗、预防性医疗服务等。

北卡健康与公众服务部

[NCDHHS.gov](http://NCDHHS.gov) • NCDHHS 是平等

机会雇主和提供商 • 二零二三年十二月



NC DEPARTMENT OF  
HEALTH AND  
HUMAN SERVICES

# More North Carolinians can get health care coverage through Medicaid.

People who receive limited benefits through **Family Planning Medicaid** may now be eligible for full health coverage through Medicaid.

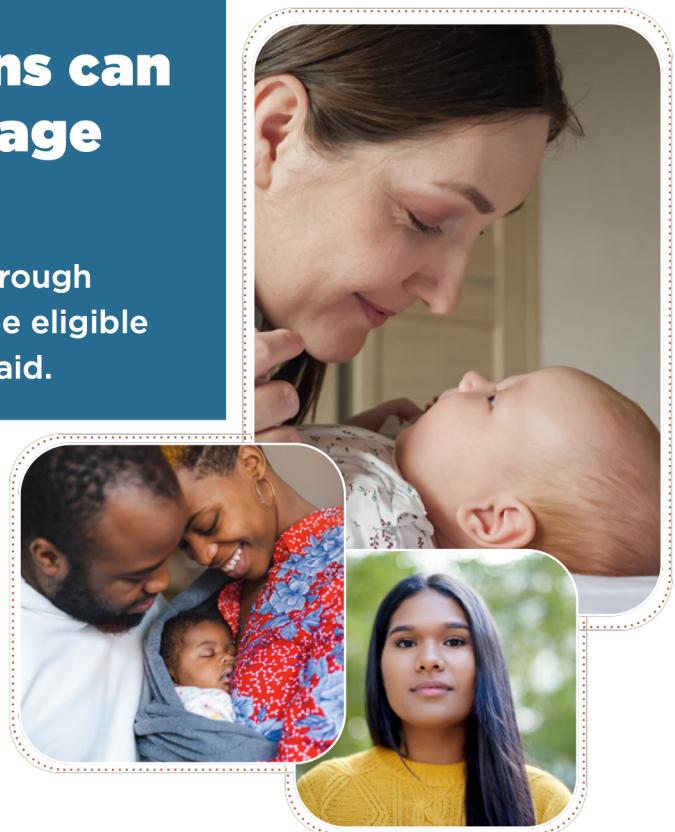
NC Medicaid now covers people ages **19 through 64 years** with higher incomes. Even if you didn't qualify before, you may now.

People who have limited benefits through Family Planning Medicaid and meet the new eligibility rules will automatically receive **full Medicaid coverage as of December 1, 2023**.

## How will I know if I get full health coverage through NC Medicaid?

- You will get a letter from your local Department of Social Services letting you know that you will start getting full Medicaid coverage.
- You will then be assigned a health plan. If you want to change your health plan, you have 90 days to pick a new one.
- Your health plan will send you a packet in the mail. It will include a new Medicaid ID card. Your ID card also has the name of your primary care doctor. You can change the doctor that was assigned to you by contacting your health plan.
- If you have health coverage through **HealthCare.gov**, you will need to cancel that plan. You can do that by logging into your HealthCare.gov account or calling 1-800-318-2596. Do not cancel your plan until you receive information from your new health plan through Medicaid.
- Medicaid will pay for doctor visits, yearly check-ups, emergency care, mental health services and more – at little or no cost to you.

Learn more at: [Medicaid.nc.gov](http://Medicaid.nc.gov)  
or contact the NC Medicaid  
Contact Center at **888-245-0179**  
or the NC Medicaid Ombudsman at  
[NCMedicaidOmbudsman.org](mailto:NCMedicaidOmbudsman.org).



## Why won't everyone with limited Family Planning Program benefits be automatically enrolled in full coverage through NC Medicaid?

Some people may have income that exceeds the Medicaid eligibility levels. If your income has recently changed and you think you may be eligible, update your information in ePASS ([epass.nc.gov](http://epass.nc.gov)) or by contacting your local Department of Social Services (DSS). Also, please use ePASS or contact your local DSS office to make sure your contact information is up-to-date so that you do not miss important information about your benefits.

## What is limited Family Planning Medicaid and who is eligible?

Family Planning Medicaid provides reproductive health care at no cost to people with incomes up to 195% of the federal poverty line – that's about \$2,370 a month for a single person. It covers almost all methods of birth control, testing and treatment for sexually transmitted infections, preventive services and more.

