

Medicaid - Some Basic Facts

There are two ways that you can get your health care when you have Medicaid. One is called Fee-For-Service. Many people call this regular Medicaid. The other way is through a managed care plan. Managed care plans are also called health plans. Here is how the two are different.

Medicaid Fee-For-Service vs Medicaid Managed Care

Fee-For-Service	Managed Care
You can go to any provider that takes Medicaid.	You sign up with a health plan. You can only see providers in that health plan.
You may have more than one provider who keeps track of all your care.	You have to pick one provider who keeps track of your care.
You can get specialty care from any provider that takes Medicaid.	You have to get a referral from your one provider to get specialty care.
You can use the Emergency Room to get care. You do not need to call your doctor to go to the Emergency Room.	You should try to call your health plan before going to the Emergency Room. Or you should call your health plan within 24 hours of going to the Emergency Room.
Medicaid pays providers for each service to you.	Medicaid pays your health plan a set amount of money every month.

What is a network? A health plan's network is all the providers who take that plan.

What is a PCP? A PCP is a "primary care provider." This is the doctor or nurse that you pick from your plan's network. You must get most of your health care from your PCP. If you need health care from another provider, your PCP will refer you. You cannot get specialty care from a provider that is not in your plan's network. So, in most cases, you cannot see providers that are not in your plan's network. And without a referral, you can only see your PCP.



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