



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Health Benefits

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

DAVE RICHARD • Deputy Secretary, NC Medicaid

MEMORANDUM

TO: Mandy Cohen, MD, MPH
Secretary

FROM: Dave Richard ^{DS}
Deputy Secretary for NC Medicaid

SUBJECT: State Plan Amendment
Title XIX, Social Security Act
Transmittal #2021-0019

DATE: August 17, 2021

Please find attached an amendment for North Carolina's State Plan under Title XIX of the Social Security Act for the Medical Assistance Program. The affected page is Attachment 4.19-B, Section 13, Page 17.

Mobile Crisis Management is an existing service that serves as an alternative to hospitalization for recipients who have mental illness/ substance abuse disorder. This involves all supports, services, and treatments necessary to provide integrated crisis response, crisis stabilization interventions and crisis prevention activities. It is available 24/7/365 and provides immediate evaluation, triage and access to acute MH/DD/SAS services, treatment, supports to effect symptom reduction, harm reduction and/or to safely transition persons in acute crisis to the appropriate environment for stabilization.

This state plan change will allow the state plan to establish a rate floor that would mandate a minimum reimbursement rate to aid in contracting between MCO's and Mobile Crisis Management Providers in the State Plan. The rate for HCPCS code H2011 will be \$90.00 per 15-minute increment.

This amendment is effective August 11, 2021.

Your approval of this state plan amendment is requested. If you have any questions or concerns, please contact me or Betty J. Staton at 919-538-3215.

NC MEDICAID

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH BENEFITS

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State: North Carolina

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

17) Mobile Crisis Management (H2011)

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Mobile Crisis Management. The agency's fee schedule rate of \$90.00 per 15 minutes was set as of August 11, 2021 and is effective for services provided on or after that date. The fee schedule is published on the agency's website at <https://medicaid.ncdhhs.gov/providers/fee-schedule/enhanced-mental-health-services-fee-schedule>.

This service will be provided by direct enrolled Medicaid providers who may be either private or governmental. This service is not cost settled for any provider. This service is provided in accordance with Attachment 3.1-A.1 Page 7c.5a, Paragraph 4.b.(8), subparagraph (f) and Attachment 3.1-A.1 Page 15a.5, Paragraph 13.D., subparagraph (vi).

The facilities providing this service are not IMD facilities and NC Medicaid is not reimbursing room and board for this service.

TN No. 21-0019

Supersedes

TN No. 14-032

Approval Date:

Effective Date: 08/11/2021