




NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
KODY H. KINSLEY • Secretary

March 18, 2022

SIGNATURE REQUEST MEMORANDUM

TO: Kody H. Kinsley, Secretary

THROUGH: Dave Richard, Deputy Secretary ^{DS} 

FROM: Betty J. Staton, SPA Manager

RE: State Plan Amendment
Title XIX, Social Security Act
Transmittal #2022- 0004

Purpose

Attached for your review and signature is a Medicaid State Plan amendment, summarized below, and submitted on March 18, 2022, with a due date of March 28, 2022.

Clearance

This amendment has been reviewed for both accuracy and completeness by:

Betty Staton, Emma Sandoe, Lotta Crabtree, Adam Levinson and Dave Richard.

Background and Summary of Request

It is recommended that you sign the State Plan Amendment submission per Centers for Medicare and Medicaid Services (CMS) protocol as head of the Single State Agency administering the Medicaid program.

The State Plan Amendment (SPA) requests authority for the following change to the NC Medicaid State Plan.

- The SPA allows Medicaid to move the authority for the per member per month enhanced management fees for primary care providers participating in the Carolina Access program from the Primary Care Case Management section of the State Plan to the Physician reimbursement section of the Medicaid State Plan.

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 DEPARTMENT OF HEALTH AND HUMAN SERVICES • OFFICE OF THE SECRETARY

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AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

State Plan Under Title XIX of the Social Security Act
Medical Assistance Program
State: North Carolina

Medical Home Fee for Carolina ACCESS and Advanced Medical Home (AMH) Program

This program will be administered under Physician Services and will be provided by Medicaid primary care providers (PCPs) who are enrolled in the Carolina ACCESS/AMH program.

Under Authority of 4.19-B, Section 5 page 1, DHB shall set forth medical home fees to providers enrolled in the Carolina ACCESS/AMH program.

Effective January 1, 2022, all Carolina ACCESS/AMH practices will receive a per member per month (PMPM) payment to support care management services for all not-partial benefit eligibility groups who are eligible for all state plan services and assigned to that practice:

Carolina ACCESS/AMH practices must meet all necessary practice requirements as determined by the Department, including:

- Enroll in NC Medicaid
- Sign Carolina ACCESS Agreement with DHB
- Provide primary care services, including certain preventative and ancillary services (ex. Family Medicine, OB/GYN, Psychiatry/Neurology, Internal Medicine, Pediatric)
- Manage patient-clinician relationship
- Offer a minimum of 30 hours/week of direct patient care operational hours
- Provide access to services and medical advice 24 hours/day, 7 days/week
- Refer to other providers for services not covered by PCP Offer interpretation services (at no cost to patient)

The Medical Home Rates for this program will be as follows:

- For non-Cherokee Indian Hospital Authority (CIHA) practices:
 - For all non-Aged, Blind, and disabled enrolled beneficiaries: \$2.50 PMPM
 - For all Aged, Blind, and disabled enrolled beneficiaries: \$5.00 PMPM
- For Cherokee Indian Hospital Authority (CIHA) practices: \$61.65 PMPM