




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

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

JAY LUDLAM • Deputy Secretary, NC Medicaid

SIGNATURE REQUEST MEMORANDUM

TO: Jay Ludlam 

FROM: Betty J. Staton, SPA Manager

RE: State Plan Amendment

Title XIX, Social Security Act
Transmittal #2023-0025

Purpose

Attached for your review and signature is a Medicaid State Plan amendment summarized below, and submitted on September 15, 2023, with a due date of September 18, 2023.

Clearance

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

Betty J. Staton, Emma Sandoe, Melanie Bush, Lotta Crabtree, Adam Levinson

Background and Summary of Request

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

- Please find attached a State Plan Amendment (SPA) to revise the PCS rate effective July 1, 2023, \$6.20, and implement a per diem reimbursement methodology for Personal Care Services provided in residential settings. Effective January 1, 2024, the fee schedule rate for PCS provided in an in-home residential setting shall be reimbursed in 15- minute increment units. Adult Care Homes (ACH) shall be reimbursed on a daily per diem basis. The ACH rate shall be the hourly equivalent to the 15-minute increment rate in effect on January 1, 2024, over a 24-hour period, with a maximum of 130 hours per month.

The proposed effective date is July 01, 2023.

Your approval of this State Plan Amendment is requested. If you have any questions or concerns, please contact me at (919) 538-3215.

NC MEDICAID

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

MEDICAL ASSISTANCE
STATE NORTH CAROLINA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

23. Any other Medical Care and any other type of remedial care recognized under State law, specified by the Secretary.

PERSONAL CARE SERVICES

Personal Care Services are reimbursed under the authority of 42 CFR 440.167 and when provided as defined in Attachment 3.1-A.1, Page 19, of this State Plan.

Effective January 1, 2021, providers subject to Electronic Visit Verification (EVV) as required by Section 12006 1903(l) of the 21st Century CURES Act, must be registered with the State's EVV solution or procure an alternative compliant EVV solution to receive reimbursement, as per PCS Clinical Coverage Policy No: 3L.

The agency's fee schedule rate of \$3.88 per 15 minutes was set as of August 1, 2017. Effective January 1, 2018 the fee schedule rate is \$3.90 per 15 minutes. Effective January 1, 2021, in adherence to EVV, payment for Personal Care Services (PCS) reimbursement shall be increased by ten percent (10%) above the rate in effect per fifteen (15) minute increment.

Effective July 1, 2023, the PCS fee schedule rate is established at \$6.20 per 15-minute increment.

Effective January 1, 2024, the fee schedule rate for PCS provided in an in-home residential setting shall be reimbursed in 15- minute increment units. Adult Care Homes (ACH) shall be reimbursed on a daily per diem basis. The ACH rate shall be the hourly equivalent to the 15-minute increment rate in effect on January 1, 2024, over a 24-hour period, with a maximum of 130 hours per month.

Rates are published on the North Carolina Medicaid Fee Schedule site https://ncdhhs.servicenowservices.com/fee_schedules, and are effective for services provided on or after the published date.

Except as otherwise noted in the plan, the state-developed fee schedule rate is the same for both governmental and non-governmental providers of Personal Care Services.

TN. No. 23-0025
Supersedes
TN. No. 21-0002

Approval Date:

Eff. Date: 07/01/2023