




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 #2023-0046

Purpose

Attached for your review and signature is a Medicaid State Plan amendment, Outpatient Specialized Therapy Services – Adult Visit Limit summarized below, and submitted on November 3, 2023, with a due date of November 3, 2023.

Clearance

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

Betty J. Staton, 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.

This State Plan Change will allow Medicaid to increase the limitations on Outpatient Specialized Therapy Providers (excluding EPDST eligibles) to the following (the current visit limit is 27 combined for all three services):

- A total maximum of 30 treatment visits per calendar year combined across occupational and physical therapy habilitative services.
- A total maximum of 30 treatment visits per calendar year combined across occupational and physical therapy rehabilitative services.
- A total maximum of 30 treatment visits per calendar year for speech therapy habilitative services.
- A total maximum of 30 treatment visits per calendar year for speech therapy rehabilitative services.

The proposed effective date is December 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.

State/Territory: North Carolina

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND
REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

- d. Physical therapy, occupational therapy, or speech pathology and audiology services provided by a home health agency or medical rehabilitation facility.

Provided: No limitations With limitations*

Not provided.

8. Private duty nursing services.

Provided: No limitations With limitations*

Not provided.

* Description provided on attachment.

TN No: 23-0046

Supersedes

TN No: 92-01

Approval Date

Effective Date: 12/01/2023

HCFA ID: 7986E

AMOUNT, DURATION AND SCOPE OF MEDICAL AND
REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

9. Clinic services.

Provided: No limitations With limitations*

Not provided.

10. Dental services.

Provided: No limitations With limitations*

Not provided.

11. Physical therapy and related services.

a. Physical therapy.

Provided: No limitations With limitations*

Not provided.

b. Occupational therapy.

Provided: No limitations With limitations*

Not provided.

c. Services for individuals with speech, hearing, and language disorders (provided by or under the supervision of a speech pathologist or audiologist).

Provided: No limitations With limitations*

Not provided.

* Description provided on attachment. See 3.1-A.1

TN No: 23-0046

Approval Date:

Effective Date: 12/01/2023

Supersedes

TN No: 86-05

THIS PAGE INTENTIONALLY LEFT BLANK

TN No: 23-0046
Supersedes
TN No: 09-011

Approval Date:

Effective Date: 12/01/2023

11. Physical Therapy and related services

Outpatient Specialized Therapy Providers for Non-EPSTD Eligibles:

North Carolina licensed physical therapists, occupational therapists and speech language pathologists who provide services to beneficiaries aged 21 and older. EPSTD eligibles are excluded from visit limits.

- a. Scope: Provide medically necessary physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders as defined in 42 CFR 440.110.
- b. Amount: A beneficiary can receive rehabilitative and habilitative visits specified as follows:
 - A total maximum of 30 treatment visits per calendar year combined across occupational and physical therapy habilitative services.
 - A total maximum of 30 treatment visits per calendar year combined across occupational and physical therapy rehabilitative services.
 - A total maximum of 30 treatment visits per calendar year for speech therapy habilitative services.
 - A total maximum of 30 treatment visits per calendar year for speech therapy rehabilitative services.

TN No: 23-0046
Supersedes
TN No: NEW

Approval Date:

Effective Date: 12/01/2023

MEDICAL ASSISTANCE
State: NORTH CAROLINA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

Stand Alone Therapy Services

Stand alone therapy is paid at the same rate as therapy services provided on Attachment 4.19-B Section 6, page 1d.

- (1) Physical Therapy Visit;
- (2) Speech Therapy Visit;
- (3) Occupational Therapy visit;

TN. No. 23-0046

Supersedes

TN. No. NEW

Approval Date

Effective Date: 12/01/2023

MEDICAL ASSISTANCE
State: NORTH CAROLINA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

7. HOME HEALTH SERVICES

The rates for home health services were set as of July 1, 2012 and are effective for Services provided by Medicare certified home health agencies participating in the North Carolina Medicaid Program on or after that date. All rates are published on the website at <https://dma.ncdhhs.gov/providers/fee-schedules>.

A. REIMBURSEMENT METHODS FOR CERTIFIED HOME HEALTH AGENCIES

8. A maximum rate per visit is established annually for each of the following services:

- (1) Registered or Licensed Practical Nursing Visit;
- (2) Home Health Aide Visit

(b) The maximum rate for new services identified in Section (a) above are computed and applied as follows: