

**PUBLIC NOTICE**  
**Alternative Benefit Plan**

The North Carolina Department of Health and Human Services, Division of Medical Assistance hereby provides notice of its intent to amend the Medicaid State Plan to add the population eligible for the Alternative Benefit Plan, as described in Section 1902(a)(10)(A)(i)(VIII) of the Social Security Act and 42 CFR 435.119. The proposed effective date for this amendment is January 1, 2018.

The State assures that the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services will be provided to individuals under 21 years of age through the Alternative Benefit Plan, pursuant to 42 CFR 440.345. Alternative Benefit Plan services, including behavioral health services, will be rendered through the existing Primary Care Case Management system and reimbursed on a Fee-for-Service basis.

The amendments listed below reflect the necessary authority for North Carolina to expand Medicaid. The State will conduct a 10-day posting to comply with N.C.G.S. § 108-54-1A(d). The Centers for Medicare and Medicaid Services (CMS) accepts this time period for the public posting requirement as it relates to Expansion. North Carolina will submit all public comments received during the 10-day period with the official State Plan submission to CMS.

## **Alternative Benefit Plan State Plan Amendments**

*Please use INTERNET EXPLORER as the Web browser to download the State Plan Amendment files linked below.*

- [Supplement 18 to Attachment 2.6-A: Methodology for Identification of Applicable FMAP Rates and Attachment](#)
- [ABP1: Alternative Benefit Plan Populations](#)
- [ABP2a: Voluntary Benefit Package Selection Assurances](#)
- [ABP2c: Enrollment Assurances](#)
- [ABP3: Selection of Benchmark Benefit Package or Benchmark-Equivalent Benefit Package](#)
- [ABP4: Alternative Benefit Plan Cost-Sharing](#)
- [ABP5: Benefits Description](#)
- [ABP7: Benefits Assurances](#)
- [ABP8: Service Delivery Systems](#)
- [ABP9: Employer Sponsored Insurance and Payment of Premiums](#)
- [ABP10: General Assurances](#)
- [ABP11: Payment Methodology](#)
- [S32: Eligibility Groups – Mandatory Coverage Adult Group](#)

DMA is committed to developing solutions that are right for North Carolina, and encourages feedback on the State Plans. Please submit your comments to the following email address: [DMARulesComments@dhhs.nc.gov](mailto:DMARulesComments@dhhs.nc.gov) by Sunday, January 15, 2017.