

PUBLIC NOTICE
(SPA 19-0003)
Laboratory

The Department of Health and Human Services, Division of Health Benefits hereby provides notice of its intent to amend the Medicaid State Plan under Title XIX, Attachment 4.19-B, Section 3, Page 1, to remove cost report settlement of covered laboratory services rendered by Local Health Departments to Medicaid beneficiaries, not to exceed the Medicare Laboratory Fee Schedule. Effective July 1, 2019, Local Health Departments will be reimbursed the Medicare Laboratory Fee Schedule rate for covered laboratory services to Medicaid beneficiaries.

This amendment will become effective July 1, 2019.

The annual estimated state fiscal impact of this change is:

- a. SFY 2020 \$ 52,840
- b. SFY 2021 \$ 52,840

A copy of the proposed amendment may be viewed at the County Department of Social Services. Questions, comments and requests for copies of the proposed State Plan amendment should be directed to the Division of Health Benefits at the address listed below:

Dave Richard
Deputy Secretary, NC Medicaid
Division of Health Benefits
2501 Mail Service Center
Raleigh, NC 27699-2501

Posted on the Division of Health Benefits Website: April 17, 2019
<https://medicaid.ncdhhs.gov/get-involved/nc-health-choice-state-plan>