Division of Health Benefits (NC Medicaid) PROPOSED STATE PLAN AMENDMENTS (SPAs) and WAIVERS LIST

SPA COUNT	SPA ≉	NAME	EFFECTIVE DATE	DESCRIPTION	CMS DEADLINE	RECEIVED AT CMS	APPROVED DATE
1	22-0001	Special Assistance (SA)	7/1/2022	This SPA change will also include full Medicaid coverage for Special Assistance In-Home beneficiaries who receive a state supplement payment.	9/30/2022	9/28/2021	Pending
2	22-0003	Certified Registered Nurse Anesthetists Services (CRNA's)	1/1/2022	This amendment will adjust CRNA rates to 100% of the North Carolinas' Medicaid Physician Services Fee Schedule.	3/31/2022	3/29/2022	6/15/2022
3	22-0004	Medical Home Management Fees	1/1/2022	The intent of the SPA is to increase the per member per month management fees for Carolina ACCESS/AMH tier 1, 2, and 3 practices with assigned Tailored Care Management-eligible beneficiaries. For primary care providers with assigned Tailored Care Management eligible beneficiaries, the payments will change from \$2.50 for non-Aged, Blind and Disabled/\$5.00 for Aged, Blind and Disabled beneficiaries to \$20 regardless of Age, Blind and Disabled status.	3/31/2022	3/29/2022	Pending
4	22-0005	COVID Vaccine Administration and Treatment DSPA	4/1/2021	The purpose of the SPA is to increase the reimbursement for COVID-19 vaccines and boosters from \$40 to \$65, effective back to April 1, 2021. Secondly, the SPA allows pharmacists to administer Monoclonal Antibodies (mAbs) therapy for COVID-19 to possibly avoid hospitalization. This part is effective September 30, 2021.	N/A	3/6/2022	Pending
5	22-0007	Private Duty Nursing	3/1/2022	The purpose of this SPA is to to increase Medicaid Direct rates from the pre-COVID rate level for Private Duty Nursing service providers, enrolled in the Medicaid or NC Health Choice program.	3/31/2022	3/29/2022	6/15/2022
6	22-0008	Select Rehabilitative Services	3/1/2022	The purpose of this SPA is to increase rates for Child/Adolescent Day Treatment, Community Support Team, High-Risk Intervention, Partial Hospitalization, Peer Support Services, Psychosocial Rehabilitation, Substance Abuse Intensive Outpatient Treatment, and Substance Abuse Comprehensive Outpatient Treatment, as proposed in the HCBS Spending Plan.	3/31/2022	3/29/2022	6/15/2022
7	22-0025	Family Planning Services	7/1/2022	The purpose of this SPA is to allow coverage for six family planning inter-periodic visits in addition to an annual assessment and comprehensive preventive medicine exam per 365 days. These changes are designed to increase STI screening services to high-risk beneficiaries and decrease barriers to contraceptive services, while still encouraging an annual preventive medicine exam each year.	9/30/2022	9/6/2022	Pending
8	22-0011	ICF-IID Therapeutic Leave	1/1/2022	The purpose of this SPA is to increase the increase Therapeutic Leave in an ICF-IID to 90 in any calendar year. This is an increase from 60 days.	3/31/2022	3/29/2022	Pending
9	22-0012	12-Month Postpartum for Pregnant Women	4/1/2022	This state plan amendment will allow Medicaid to provide continuous eligibility to pregnant individuals who were eligible and enrolled under the state plan while pregnant (including during a period of retroactive eligibility) through the last day of the month in which a 12-month postpartum period (beginning on the last day of the pregnancy) ends. The 12-month postpartum continuous eligibility option applies for the period beginning on April 1, 2022 and is available through March 21, 2027.	6/30/2022	5/3/2022	9/22/2022
10	22-0013	CHIP Managed Care	7/1/2021	This SPA shows compliance with the Medicaid Managed Care final rule as it relates to the Children's Health Insurance Program (CHIP).	6/30/2022	6/21/2022	Pending
11	22-0014	CHIP 12-Month Postpartum for Pregnant Women	4/1/2022	This SPA will add 12 months of postpartum coverage for CHIP beneficiaries. North Carolina has elected the extended postpartum option in Medicaid, and per $2107(e)(1)(J)$ as added by ARP, states are required to provide a 12 month postpartum period that begins at the end of the pregnancy for CHIP beneficiaries.	6/30/2022	6/28/2022	9/22/2022
12		Combined Disaster SPAs		SPA 22-0015 (Replace Covid Rate), SPA 22-0016 (HCBS Temp COVID rate increase) and SPA 22-0017 (Non-HCBS COVID Temp rate increase). The changes will end date the DSPAs on June 30, 2021, and a second DSPA that restarts the rates effective July 1, 2021. 22-0015 restarts the rates effective July 1, 2021, through the dates that these rates were in effect before being replaced by permanent SPAs or being end dated.	N/A	5/23/2022	Pending
13	22-0010	Qualifying Clinical Trials	1/1/2022	The purpose of this SPA is to cover routine patient costs while a beneficiary is in a qualifying clinical trial.	3/31/2022	3/29/2022	4/8/2022
14	22-0018	Physician Services- Eligible Medical Professionals	7/1/2022	This State Plan Amendment is an annual adjustment to reflect the component of the payment limit cap applicable to the Fee-for Service activity for the State Fiscal Year beginning July 1, 2022.	9/30/2022	6/21/2022	8/17/2022
15		Medically Monitored Inpat Withdrawal Services	4/1/2023	The purpose of this SPA is to update Non-Hospital Medical Detoxification to Medically Monitored Inpatient Withdrawal Services to align with The ASAM Criteria.	6/30/2023	Pending	Pending
16		Clinically Managed Residential Withdrawal Services	4/1/2023	The purpose of this SPA is to add Clinically Managed Residential Withdrawal services to the State Plan and be a service covered by Medicaid.	6/30/2023	Pending	Pending
17		(ICF-IID) Rates Increase		The SPA will increase rates for (ICF/IIDs), including ICF/IID-level group homes, enrolled in the Medicaid or NC Health Choice program. This rate increase will be implemented as intended by the General Assembly to assist in increasing the hourly wages of direct care workers in this State towards a minimum of fifteen dollars (\$15.00) per hour.	Pending	Pending	Pending

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18	22-0019	Mobile Crisis Management	7/1/2022	The SPA is being updated to align with the MH Parity and Addiction Equity Act of 2008. Prior approval language is being changed and maximum length of service is be removed.	9/30/2022	8/9/2022	10/26/2022
19	22-0021	Coverage of New Mandatory Benefits Under Section 9811 of the American Rescue Plan (ARP)	3/11/2021	The SPA also ensures the state will provide coverage of COVID-19 treatments described as medically necessary for COVID-19 treatment in section 1905(a) of the Social Security Act. This change codifies COVID-19 testing, vaccination, and treatment availability to tribal members enrolled in Medicaid without cost-sharing through a year following the end of the public health emergency described in section 1135(g)(1)(B) of the Social Security Act.	N/A	10/24/2022	Pending
20	22-0026	1915 (i) option	12/1/2022	NC Medicaid uses 1915(b)(3) authority to cover a set of home and community-based services (HCBS) provided by LME/MCOs to Medicaid beneficiaries with significant behavioral health needs, I/DDs, and TBI. With the managed care transition to a Section 1115 demonstration, NC Medicaid will no longer be able to use the 1915(b)(3) authority to cover these HCBS. As a result, NC Medicaid is requesting CMS approval for the implementation of 1915 (i) option services.	12/31/2022	10/24/2022	Pending
21	22-0020	Managed Care Cost Sharing	7/1/2022	This State Plan Amendment requests authority for a change to the State Plan to increase co-pays to \$4.00 for the State Fiscal Year beginning July 1, 2022.	9/30/2022	9/6/2022	Pending
22	22-0022	FQHC	7/1/2022	The State Plan Amendment requests authority for an amendment to revise the FQHC Cost Based Alternate Payment Methodology (APM) for State Fiscal Year 2022-2023 dates of service for the State Fiscal Year beginning July 1, 2022.	9/30/2022	9/27/2022	Pending
23	22-0023	Physician Services - Eligible Medical Professionals-ECU	7/15/2022	This State Plan Amendment states ECU Health Physicians shall be subject to the same limit on payments that applies to eligible providers affiliated with the East Carolina University Brody School of Medicine.	9/30/2022	8/23/2022	10/12/2022
24	22-0024	Tailored Care Management - Health Home	12/1/2022	This State Plan Amendment authorizes North Carolina's Health Home benefit, called Tailored Care Management. The Health Home benefit will be available to NC Medicaid beneficiaries with a significant behavioral health condition (including both mental health and severe substance use disorders), intellectual/developmental disability (I/DD), or traumatic brain injury (TBI).	12/31/2022	9/16/2022	Pending
25	22-0029	Care Management for At-Risk Children- (CMARC)	7/1/2022	This State Plan Amendment describes the CMARC program and returns previous language related to CMARC. This SPA does not change services in the program or impact utilization for the State Fiscal Year beginning July 1, 2022.	9/30/2022	9/26/2022	Pending
26	22-0030	Care Management for High-Risk Pregnancies- (CMHRP)	7/1/2022	This State Plan Amendment describes the CMHRP program and returns previous language related to CMHRP. This SPA does not change services in the program or impact utilization for the State Fiscal Year beginning July 1, 2022.	9/30/2022	9/26/2022	Pending
27	22-0033	Pharmacy POS /PADP	12/1/2022	This state plan change is to revise the North Carolina Pharmacy Point of Sale (POS) and Physician Administered Drug Program (PADP) reimbursement policies and titles to: Change the Pharmacy POS reimbursement methodology to a flat professional dispensing fee (PDF).	12/31/2022	10/31/2022	Pending
				CURRENT WAIVERS SUBMISSION PENDING			
1			10/1/2022	Community Alternatives Program for Medically Fragile Children - HCBS waiver	Pending	Pending	Pending
2			4/1/2023	1915(b) Mental Health, Intellectual/Developmental Disability (IDD) and Substance Use Disorder (SUD) Waiver Amendment for Tailored Plan Launch	Pending	Pending	Pending
3			4/1/2023	1915(C) NC Innovations Waiver Amendment for Tailored Plan Launch	Pending	Pending	Pending
4			4/1/2023	1915(C) NC TBI waiver amendment for Tailored Plan Launch	Pending	Pending	Pending
5			11/1/2022	Community Alternatives Program for Disabled Adults (CAP/DA)	N/A	9/26/2022	Pending