TO: DMA Management & State Plan E-mail Subscribers
FROM: Teresa J. Smith, Administrative Service Manager
SUBJECT: Update to State Plan for Medical Assistance (284)
DATE: November 28, 2017

The following changes were made in the NC Medicaid State Plan Manual. You may view the Plan on DMA’s website at http://dma.ncdhhs.gov/get-involved/nc-health-choice-state-plan.

**SPA 15-005 (Dental):** The purpose of this state plan amendment (SPA) was to implement Session Law 2015 – 241, Section 12H.20, which requires all State-operated dental schools receive the same reimbursement for dental services provided to North Carolina Medicaid beneficiaries, therefore we are adding East Carolina University Dental School.

**OLD PAGE(S):** Attachment 4.19-B, Section 10, Page 1

**NEW PAGE(S):** Attachment 4.19-B, Section 10, Page 1

**SPA 17-0007 (DSH):** The purpose of this state plan amendment (SPA) revises the methodology for calculating the Upper Payment Limit for inpatient hospitals. Total Uncompensated Care Payments on Exhibit 1, Step 1, Item 1d will be relocated to Step 1, Item 3. This will move the Total Uncompensated Care from Portions of Medicare payments for most recent year subject to Case Mix Index (Step 1) to the Medicare Payments not subject to case mix index (Step 3).


**SPA 17-0010 (DRGs):** The purpose of this state plan amendment (SPA) revises the reimbursement methodology inpatient hospital to add eleven Diagnosis Related Groups (DRGs)
to the rate setting methodology for inpatient hospitals. The new DRGs are specific
to deliveries with the insertion of a long-acting reversible contraception (LARC).
The new DRG codes are 1765, 1766, 1767, 1768, 1769, 1770, 1774, 1775, 1776,
1777, and 1779.