PUBLIC NOTICE
Spa 18-0007
(Adult Optical Services)

The Department of Health and Human Services, Division of Medical Assistance hereby provides notice of its intent to amend the Medicaid State Plan to increase the rates for metabolic formula (DME).

This amendment will become effective January 1, 2019.

The annual estimated state fiscal impact of this change is

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFY 2019</td>
<td>$3,463,883</td>
</tr>
<tr>
<td>SFY 2020</td>
<td>$4,927,528</td>
</tr>
</tbody>
</table>

A copy of the proposed public notice 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 Medical Assistance at the address listed below.

Dave Richard
Division of Medical Assistance
2501 Mail Service Center
Raleigh, NC 27699-2501

Posted on the Division of Health Benefits Website: October 29, 2018
https://dma.ncdhhs.gov/get-involved/nc-health-choice-state-plan