November 21, 2018

Shantrina Roberts
Associate Regional Administrator
Division of Medicaid
Centers for Medicare and Medicaid Services
Region IV
Atlanta Federal Center
61 Forsyth Street, SW Suite 4T20
Atlanta, GA 30303-8909

SUBJECT: State Plan Amendment
Title XIX, Social Security Act
Transmittal #2018-0006

Dear Ms. Roberts:

Please find attached an amendment for North Carolina’s State Plan under Title XIX of the Social Security Act for the Medicaid Program. The affected clinical page is Attachment 3.1-A.1, Page 13c.2. The affected financial page is Attachment 4.19-B, Section 9, Page 1. This state plan change is to include Medicaid coverage and to increase the State Maximum Allowable Cost for lead investigations. This amendment is effective November 1, 2018.

Your approval of this state plan amendment is requested. If you have any questions or concerns, please contact me or Lakia Gilmore at 919-855-4116.

Sincerely,

Mandy Cohen, MD, MPH
Secretary

Enclosures
Lead Investigation Services

Lead Investigation services are performed by a Certified Lead Risk Assessor in accordance with state law and provided by the Local Health Department (LHD).
9.a. Clinic Services provided by Health Departments

(a) Interim payments for Clinic Services covered under Attachment 3.1-A.1 are equal to the lower of the submitted charge or the appropriate fee from the North Carolina Medicaid Health Department Fee Schedule. The agency’s interim rates were set as of March 1, 2011 and are effective on or after that date. All rates are published on the website at http://www.necdhs.gov/dma/fee/index.htm. Except as otherwise noted in the plan, State developed fee schedule rates are the same for all governmental and non-governmental providers. Payments will be based on settled cost, while interim rates will be based on the March 1, 2011 North Carolina fee schedule.

To assure payments do not exceed the upper payment limits set forth at 42 CFR 447.321, Health Department services reimbursed under a fee schedule and furnished to Medicaid recipients will be cost settled annually to Medicaid allowable costs. Effective for cost reporting periods beginning on or after July 1, 2011, Medicaid-allowable cost will be determined by the Division of Medical Assistance using a CMS approved cost reporting methodology.

(b) Lead Investigation Services (T1029):

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of lead investigations. The agency’s fee schedule rate of $1,200.00 per investigation was set as of November 1, 2018 and is effective for services provided on or after that date.

This service will be provided by a Certified Lead Risk Assessors in accordance with state law. This service is provided in accordance with Attachment 3.1-A.1 Page 13c.2.