

**NOTICE AND OPPORTUNITY FOR PUBLIC COMMENT:
NC MEDICAID CHANGES PURSUANT TO S.L. 2021-180 S. 9D-10.(a)
(SPA 22-0020)**

Pursuant to 42 CFR 447.57(c), the Department of Health and Human Services, Division of Health Benefits hereby provides notice of its intent to increase Medicaid co-payments for the below services for all eligibility groups with the exception of BCCM Beneficiaries as mandated under S.L. 2021-180 Section 9D.10.(a). As intended by the General Assembly, this increase will be implemented to reduce over-utilization. Existing copayment exemptions will continue to apply.

This change will become effective July 1, 2022.

The estimated anticipated fiscal impact of this change is a. SFY 2023 -\$1,346,498

b. SFY 2024 -\$1,422,821

Proposed Co-Payment Schedule

Service	Current Co-Payment	Proposed Co-Payment
Physician (Not to include inpatient services)	\$3.00	\$4.00
Generic and Brand Prescriptions	\$3.00	\$4.00
Chiropractic Services and Supplies	\$2.00	\$4.00
Optometrist and Optical Services	\$2.00	\$4.00
Dental Services	--	\$4.00
Outpatient	\$3.00	\$4.00
Podiatrist	\$3.00	\$4.00
Non-Emergency and Emergency Department Visits	\$3.00	\$4.00

Questions, comments, and requests for copies of the proposed State Plan amendment should be directed to the Division of Health Benefits via email to MedicaidRulesComments@dhhs.nc.gov or to the address listed below.

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Posted on the Division of Health Benefits Website: June 03, 2022
<https://medicaid.ncdhhs.gov/get-involved/nc-health-choice-state-plan>