




NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Health Benefits

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
DAVE RICHARD • Deputy Secretary, NC Medicaid

SIGNATURE REQUEST MEMORANDUM

TO: Dave Richard ^{DS}

FROM: Cecilia Williams, SPA Coordinator

RE: State Plan Amendment

Title XIX, Social Security Act
Transmittal #2022-0037

Purpose

Attached for your review and signature is a Medicaid State Plan amendment, summarized below, and submitted on December 15, 2022, with a due date of December 15, 2022.

Clearance

This amendment has been reviewed for both accuracy and completeness by:

Cecilia Williams, Betty J. Staton, Emma Sandoe, Melanie Bush, Lotta Crabtree, Adam Levinson

Background and Summary of Request

It is recommended that you sign the State Plan Amendment submission per Centers for Medicare and Medicaid Services (CMS) protocol as head of the Single State Agency administering the Medicaid program.

Please find attached an amendment for North Carolina's State Plan under Title XIX of the Social Security Act for the Medical Assistance Program. The affected page is Attachment 4.19-B, Section 5, Page 1b. This State Plan change will modify the PMPM for medical home payments for the period 12/8/2022-6/30/2023. 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.

Your approval of this State Plan Amendment is requested. If you have any questions or concerns, please contact me or Cecilia Williams at (919) 270-2530.

State Plan Under Title XIX of the Social Security Act
Medical Assistance Program
State: North Carolina

Medical Home Fee for Carolina ACCESS and Advanced Medical Home (AMH) Program

This program will be administered under Physician Services and will be provided by Medicaid primary care providers (PCPs) who are enrolled in the Carolina ACCESS/AMH program.

Under Authority of 4.19-B, Section 5 page 1, DHB shall set forth medical home fees to providers enrolled in the Carolina ACCESS/AMH program.

Effective January 1, 2022, all Carolina ACCESS/AMH practices will receive a per member per month (PMPM) payment to support care management services for all not-partial benefit eligibility groups who are eligible for all state plan services and assigned to that practice:

The Medical Home Rates for this program will be as follows:

- For non-Cherokee Indian Hospital Authority (CIHA) practices:
 - For all non-Aged, Blind, and disabled enrolled beneficiaries: \$2.50 PMPM
 - For all Aged, Blind, and disabled enrolled beneficiaries: \$5.00 PMPM
- For Cherokee Indian Hospital Authority (CIHA) practices: \$61.65 PMPM

Effective December 1, 2022, all Carolina ACCESS/AMH tier 1, 2, and 3 practices will receive a per member per month (PMPM) payment to support care management services for all Tailored Care Management eligible, not-partial benefit eligibility groups who are eligible for all state plan services and assigned to that practice:

The Medical Home Rates for this program will be as follows:

- For non-Cherokee Indian Hospital Authority (CIHA) practices:
 - For all non-Aged, Blind, and disabled enrolled beneficiaries not eligible for Tailored Care Management: \$2.50 PMPM
 - For all Aged, Blind, and disabled enrolled beneficiaries not eligible for Tailored Care Management: \$5.00 PMPM
 - For all Tailored Care Management eligible enrolled beneficiaries, regardless of Age, Blind, and Disabled (ABD) status: \$20.00 PMPM
- For Cherokee Indian Hospital Authority (CIHA) practices: \$61.65 PMPM

TN. No. 22-0037
Supersedes
TN. No. 18-0012

Approval Date:

Eff. Date: 12/08/2022