

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

JAY LUDLAM • Deputy Secretary, NC Medicaid

SIGNATURE REQUEST MEMORANDUM

TO: Jay Ludlam ()

FROM: Ashley Blango, SPA Coordinator

RE: State Plan Amendment

Title XIX, Social Security Act Transmittal #2024-0017

Purpose

Attached for your review and signature is a Medicaid State Plan Amendment (Substance Abuse Intensive Outpatient Program (SAIOP) summarized below, and submitted on September 12, 2024, with a due date of September 17, 2024.

Clearance

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

Ashley Blango, Betty J. Staton, Kathryn Horneffer, Lotta Crabtree, Adam Levinson, Melanie Bush

Background and Summary of Request

It is recommended that you sign this 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 a State Plan Amendment (SPA) that includes the Substance Abuse Intensive Outpatient Program (SAIOP), The American Society of Addiction Medicine (ASAM) Criteria, Level 2.1 (2013), is a service included in the 1115 Substance Use Disorder Demonstration Waiver approved in October 2018 by the Centers for Medicare and Medicaid. The State Plan for SAIOP is being amended to apply an inflationary percentage increase to the current reimbursement rate. This rate increase is intended to sustain provider participation within the Medicaid program, address some of the increased cost of the service, and support access to care statewide.

The proposed effective date of the SPA is August 01, 2024.

Your approval of this State Plan Amendment is requested. If you have any questions or concerns, please contact me at (919) 812-6145.

Attachment 4.19-B Section 13, Page 8

MEDICAL ASSISTANCE State: North Carolina

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

8) Substance Abuse Intensive Outpatient Program (SAIOP) H0015

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Substance Abuse Intensive Outpatient Program (SAIOP). The agency's fee schedule rate of \$131.56 per diem was set as of July 1, 2012. The fee schedule is published on the Division of Heath Benefits website at https://ncdhhs.servicenowservices.com/fee schedules

Effective May 1, 2024, the agency's published Enhanced Mental Health Services fee schedule rates are effective for services provided on or after that date. The Enhanced Mental Health Services fee schedule is published on the Division of Health Benefits website at https://ncdhhs.servicenowservices.com/fee schedules

This service will be provided by direct enrolled Medicaid providers who may be either private or governmental. This service is not cost settled for any provider. This service is provided in accordance with Attachment 3.1-

A.1 Page 7c.8, Paragraph 4.b., subparagraph (i).

The facilities providing this service are not IMD facilities and NC Medicaid is not reimbursing room and board for this service.

In the event this service is operated by a 638 Compact or Indian Health Service Provider, the rate of reimbursement shall be the All-Inclusive Rate (AIR) established on an annual basis as published in the Federal Register.

In the event this service is operated by a 638 Compact or Indian Health Service Provider and is not covered under the criteria to receive the All-Inclusive Rate (AIR), the provider is subject to the NC Medicaid Fee Schedule or other agreed upon rate(s) by the payor.

TN No: 24-0017

Supersedes Approval Date: Effective Date: <u>08/01/2024</u> TN No: <u>22-0008</u>