PUBLIC NOTICE (SPA 24-0030) Medicaid Program Services

The Department of Health and Human Services, Division of Health Benefits hereby provides notice of its intent to amend the Medicaid State Plan for the purpose of increasing the rates for the Medicaid Program services included in the list below. These rate increases are intended to sustain provider participation within the Medicaid program, supporting access to care statewide. The specific amount of the rate increases for the identified Medicaid Program services are contingent on legislative appropriations to support them.

Services:

Ambulatory Surgery Centers	Dialysis			
Ventilator SNF beds	Independent Laboratory Services			
Home Infusion Therapy	Freestanding Birthing Centers			
Orthotics & Prosthetics	Occupational Therapy Services			
Physical Therapy	Respiratory Therapy Services			
Dental	Local Health Departments			
Podiatry	Portable X-Ray			
Clinical Pharmacist Practitioner	Nurse Midwives			
Chiropractic	HIV Case Management			
Home Health				
Speech Services				
Speech-Audiology Services without Code 92507 Independent				
Diagnostic Testing Facilities (IDTFs)				
Durable Medical Equipment (DME) Incontinence, Ostomy and Urinary Catheter Supplies Durable				
Medical Equipment (DME) Nutrition - Formula and Supplies				
Durable Medical Equipment (DME) Trach Supplies Durable				
Medical Equipment (DME) OTHER Physician/Physician				
Assistants/Nurse Practitioners				

This amendment will become effective July 1, 2024.

The annual estimated State fiscal impact of these changes are:

a.	SFY	2025	\$ 265,108,491
b.	SFY	2026	\$ 265,108,491

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 Health Benefits at the address listed below:

> Jay Ludlam Deputy Secretary Division of Health Benefits 2501 Mail Service Center Raleigh, NC 27699-2501 medicaidrulescomments@dhhs.nc.gov