




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

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
JAY LUDLAM • Deputy Secretary, NC Medicaid

SIGNATURE REQUEST MEMORANDUM

TO: Jay Ludlam ^{DS}
FROM: Ashley Blango, SPA Coordinator
RE: State Plan Amendment

Title XIX, Social Security Act
Transmittal #2025-0002

Purpose

Attached for your review and signature is a Medicaid State Plan Amendment (**Medically Monitored or (ADATC) Alcohol Drug Addiction Treatment Center Detoxification Crisis Stabilization ASAM 4-WM**) summarized below, and submitted on December 2, 2024, with a due date of December 9, 2024.

Clearance

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

Ashley Blango, 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.

This SPA will terminate Medically Monitored or (ADATC) Alcohol Drug Addiction Treatment Center Detoxification Crisis Stabilization Services. As part of the 1115 SUD Demonstration Waiver, approved by CMS (Center for Medicare and Medicaid Services), Medically Managed Intensive Inpatient Withdrawal (ASAM Level 4-WM) has been incorporated and implemented into Clinical Coverage Policy 8B, Inpatient Behavioral Health Services. The Medically Monitored or (ADATC) Alcohol Drug Addiction Treatment Center Detoxification Crisis Stabilization benefit is being terminated and removed from the Medicaid State Plan. Termination of this benefit will not impact providers of this level of care as they should be adhering to Clinical Coverage Policy 8B, Inpatient Behavioral Health Services.

The proposed effective date for the SPA is January 1, 2025.

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

Staff Qualifications for Each Specific Service (Continued)

Service	Agency Qualifications		Staff Qualifications					
			Authorization	See Definitions for QP, AP, PP in Attachment 3.1-A.1 Pages 15a.14-15:		Medical Coverage		
	Licensed	Credentialed	Service Ordered by: MD, Nurse Practitioner, Physicians Assistant or PhD Psychologist licensed in NC	Qualified Professional (QP), includes SA Professionals	Under Supervision of a Qualified Professional:		Medical Oversight/ Participation by:	
					Associate Professional	Para-Professional	Psychiatrist/ MD	Registered Nurse* RNs are considered QPs as well
SA Comprehensive Output. Treatment	X	X	X	X	X	X	Recipients must have access to MD assessment and tx.	
SA Non-Medical Community Residential Tx	X	X	X	X	X	X		
SA Medically Monitored Residential Tx	X	X	X	X	X	X	X	X
Ambulatory Withdrawal Management Without Extended Onsite Monitoring	X	X	X	X	X	X	X (provides assessment w/n 24 hrs.)	X (provides admission assessment /monitors tx
Ambulatory Withdrawal Management With Extended Onsite Monitoring	X	X	X	X	X	X	X	X
Clinically Managed Residential Withdrawal Services	X	X	X	X	X	X	X	X
Medically Monitored Inpatient Withdrawal Service	X	X	X	X	X	X	X (provides assessment w/n 24 hrs.)	X (provides admission assessment /monitors tx

TN No: 25-0003
Supersedes
TN No: 23-0020

Approval Date:

Effective Date: 01/01/2025

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TN No: 25-0002
Supersedes
TN No: 07-003

Approval Date:

Effective Date: 01/01/2025

MEDICAL ASSISTANCE

State: North Carolina

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

13. D. OTHER DIAGNOSTIC SCREENING PREVENTIVE AND REHABILITATIVE SERVICES

- 1). Medically Monitored or Alcohol Drug Addiction Treatment Center Detoxification/Crisis Stabilization (Adult – H2036) An individual facility rate will be determined as follows:

Reimbursement rates are determined on the basis of provider specific pro forma cost information. Providers submit cost templates, and a reimbursement rate is established utilizing cost modeling. The cost model is based on agency estimates. The residential facility cost model recognizes direct care service costs for staff salaries and fringe benefits and includes qualified, associate and paraprofessionals. Other direct service costs recognized include accreditation, communications, training, and travel costs. Facility overhead costs are recognized at 11% of total direct care service costs. A calculated per diem is determined by dividing total estimated days of service provided to recipients. This service is provided in accordance with Attachment 3.1-A.1 Page 15a.13, paragraph 13.D., subparagraph (xvii).

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

This service is not cost settled for any provider.

The Medically Monitored or (ADATC) Alcohol Drug Addiction Treatment Center Detoxification Crisis Stabilization benefit will be terminated effective 01/01/2025.

Accordingly, this service is removed from Staff Qualifications for Each Specific Service grid, Attachment 3.1-A.1 Page 15a.2-C.

TN No: 25-0002
Supersedes
TN No: 14-0032

Approval Date:

Effective Date: 01/01/2025