NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Health Benefits

JOSH STEIN • Governor
DEVDUTTA SANGVAI • Secretary
MELANIE BUSH • Deputy Secretary, NC Medicaid

SIGNATURE REQUEST MEMORANDUM

TO: Melanie Bush DS MB

FROM: Ashley Blango, SPA Manager

RE: State Plan Amendment

Title XIX, Social Security Act
Transmittal #2026-0004

Purpose
Attached for your review and signature is a Medicaid State Plan Amendment (
(Child Welfare Trauma-Informed Assessment (CWTIA)) summarized below, and submitted on August 31, 2026 with a due date of September 4, 2026.

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

Ashley Blango, Kathryn Horneffer, Todd Baustert, Tabitha Evans, Chris Gordon, Sarah Gregosky, 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.

The purpose of the revisions to the State Plan Amendment will allow Medicaid to reimburse an enhanced rate for the Child Welfare Trauma-Informed Assessment (CWTIA). This is an assessment service under the Psychiatric Diagnostic Evaluation benefit category. This state plan change establishes coverage and reimbursement for the assessment under the existing Medicaid dialogistic assessment benefit structure.

The proposed effective date for the SPA is January 1, 2027.

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

MEDICAL ASSISTANCE
State: North Carolina

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

40) Psychiatric Diagnostic Evaluation (90791-90792, and H2000)

The agency's fee schedule rate was set on January 1, 2024, based on 120% of the 2023 Medicare rate, and is effective for services provided on or after that date. Rates are based on the appropriate behavioral health provider type. The provider type fee schedules are published on the NC Division of Health Benefits website at https://ncdhhs.servicenowservices.com/fee_schedules.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Psychiatric Diagnostic Evaluation. 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. The facilities providing this service are not IMD facilities and NC Medicaid is not reimbursing room and board for this service.

The Child Welfare Trauma-Informed Assessment is reimbursed by HCPCS code H2000. It is a specialized assessment service within the Psychiatric Diagnostic Evaluation benefit category. This service will be provided by direct enrolled Medicaid providers who may be either private or governmental, that meet Department-established training requirements applicable to the service. The provider type fee schedules are published on the NC Division of Health Benefits website at https://ncdhhs.servicenowservices.com/fee_schedules.

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.