



MEMORANDUM

TO: DHB Management & State Plan E-mail Subscribers

FROM: Cecilia Williams, State Plan and Amendments Coordinator

SUBJECT: Update to State Plan for Health Benefits (308)

DATE: April 18, 2022

The following changes were made in the NC Medicaid State Plan Manual. You may view the Plan on DHB's website at <https://medicaid.ncdhhs.gov/meetings-and-notice/medicaid-state-plan-public-notice>.

SPA 21-0021 (CCP 8A SUD SPA) This State Plan Amendment change allows Medicaid to amend Substance Abuse Medically Monitored Residential Treatment service, Substance Abuse Non-Medical Community Residential Treatment service and Non-Hospital Medical Detoxification service to allow for service to be provided for more than 45 days in a 12-month period. This is a change and increase from the previous 30 days of service.

OLD PAGE(S): Attachment 3.1-A.1, Pages 15a.11, 15a.11-A, 15a.12-A

NEW PAGE(S): Attachment 3.1-A.1, Pages 15a.11, 15a.11-A, 15a.12-A

SPA 21-0022 (Medicaid Premiums and Cost Sharing) This State Plan Amendment change allows health plans to require cost sharing for certain beneficiaries under managed care. This carries over a policy for the same group under the state's fee-for-service programs, and as such will not increase costs or utilization.

OLD PAGE(S): Section 4.18, Page 54, 55, 56, 56a, 56b, 56c, 56d, 56e, 56f; Attachment 4.18-A, Page 1,3; Attachment 4.18-C, Page 1,3

NEW PAGE(S): Medicaid Premiums Cost Sharing Templates G1 - G3

SPA 21-0023 (RBI-BHT)

This State Plan amendment change allows Medicaid to amend the state plan to add Research-Based Intensive Behavioral Health Treatment (RBI-BHT) that prevent or minimize the disabilities and behavioral challenges associated with Autism Spectrum Disorder (ASD) and promote, to the extent practicable, the adaptive functioning of a beneficiary under the Preventative Care suggestion.

OLD PAGE(S): Attachment 3.1-A.1, Page 15-A.1 and Attachment 4.19-B, Section 13, Page 29

NEW PAGE(S): Attachment 3.1-A.1, Page 15-A.1 and Attachment 4.19-B, Section 13, Page 29

SPA 21-0024 (SNF) This State Plan Amendment change allows Medicaid to revise the Skilled Nursing Facility reimbursement section in Attachment 4.19-B of the Medicaid State Plan. This amendment will include (a) revision of the methodology used to calculate fair rental value (FRV) rate components and (b) to initiate the transition from the Point -in-Time Case Mix Index (CMI) reporting method to the Time Weighted CMI reporting methodology.

OLD PAGE(S): Attachment 4.19-D Pages 2a, 3, 4, 4a, 4b, 4c, 5, 20, and 21

NEW PAGE(S): Attachment 4.19-D Pages 2a, 3, 4, 4a, 4b, 4c, 5, 20, and 21

SPA 21-0026 (TPL) This State Plan Amendment change allows Medicaid to incorporate the changes mandated by CFR 433.138. We changed our policies to cost avoid prenatal services instead of paying for these claims and chasing recoveries from liable third parties. We also changed policy to require providers to submit claims to the liable insurance carrier within 90 days. This is a policy only change and will have no financial impact.

OLD PAGE(S): Attachment 4.22-B, Pages 1-2 Section 4, Pages 69-70

NEW PAGE(S): Attachment 4.22-B, Pages 1-2 Section 4, Pages 69-70

SPA 21-0027 (NEMT) This State Plan Amendment change allows Medicaid to incorporate a description of the method that the Medicaid agency will use to ensure transportation for beneficiaries to and from providers. The change also includes provider and individual driver requirements. 1902 (a)(87) of the Act, requires the Medicaid state plan to provide for a mechanism, which may include attestation, that ensures any provider or individual driver of non-emergency transportation to medically necessary services receiving payments under the plan, meet specified minimum requirements. The guidance was provided to states in the CMCS Informational Bulletin dated July 12, 2021.

OLD PAGE(S): Attachment 3.1-D, Page 4

NEW PAGE(S): Attachment 3.1-D, Page 4

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