

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

DAVE RICHARD • Deputy Secretary, NC Medicaid

June 10, 2022

Dear County DSS Director:

Attached is a public notice representing a proposed change to amend the Medicaid State Plan the proposed change will increase Medicaid co-payments for the below services for all eligibility groups except for BCCM beneficiaries as mandated under S.L. 2021-180 Section 9D.10.(a). As intended by the General Assembly, this increase will be implemented to reduce over-utilization. Existing co-payment exemptions will continue to apply.

Please post this notice in your facility so that interested parties may be made aware of this proposed change and may comment as necessary. The posting can be removed after ninety days from the date of this letter.

Sincerely,

Cecília Williams

Cecilia Williams State Plan and Amendments Coordinator

Attachment: Public Notice SPA 22-0020 (Coverage of New Mandatory Benefits Under Section 9811 of the American Rescue Plan-ARP)

NC MEDICAID NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH BENEFITS

LOCATION: 1985 Umstead Drive, Kirby Building, Raleigh, NC 27603
MAILING ADDRESS: 2501 Mail Service Center, Raleigh, NC 27699-2001
www.ncdhhs.gov • TEL: 919-855-4100 • FAX: 919-733-6608

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

NOTICE AND OPPORTUNITY FOR PUBLIC COMMENT: NC MEDICAID CHANGES PURSUANT TO S.L. 2021-180 S. 9D-10. (a) (SPA 22-0020)

Pursuant to 42 CFR 447.57(c), the Department of Health and Human Services, Division of Health Benefits hereby provides notice of its intent to increase Medicaid co-payments for the below services for all eligibility groups with the exception of BCCM Beneficiaries as mandated under S.L. 2021-180 Section 9D.10.(a). As intended by the General Assembly, this increase will be implemented to reduce over-utilization. Existing copayment exemptions will continue to apply.

This change will become effective July 1, 2022.

The estimated anticipated fiscal impact of this change is a. SFY 2023 -\$1,346,498

b. SFY 2024 -\$1,422,821

Proposed Co-Payment Schedule

Service	Current Co-Payment	Proposed Co-Payment
Physician (Not to include inpatient services)	\$3.00	\$4.00
Generic and Brand Prescriptions	\$3.00	\$4.00
Chiropractic Services and Supplies	\$2.00	\$4.00
Optometrist and Optical Services	\$2.00	\$4.00
Dental Services		\$4.00
Outpatient	\$3.00	\$4.00
Podiatrist	\$3.00	\$4.00
Non-Emergency and Emergency Department Visits	\$3.00	\$4.00

Questions, comments, and requests for copies of the proposed State Plan amendment should be directed to the Division of Health Benefits via email to MedicaidRulesComments@dhhs.nc.gov or to the address listed below.

Dave Richard Deputy Secretary for NC Medicaid Division of Health Benefits 2501 Mail Service Center Raleigh, NC 27699-2501

Posted on the Division of Health Benefits Website: June 03, 2022 https://medicaid.ncdhhs.gov/get-involved/nc-health-choice-state-plan