State Plan Under Title XIX of the Social Security Act Medical Assistance Program

State: North Carolina

Payments for Medical and Remedial Care and Services

c. Services provided by licensed Ambulatory Surgical Centers are reimbursed at ninety-five percent of the Medicare Ambulatory Surgical Centers fee schedule in effect on January of each year.

Additional ancillary services, such as laboratory, x-ray and general anesthesia services, are reimbursed at the comparable fees paid to other providers. Notwithstanding any other provision, if specified, these rates will be adjusted as shown on Attachment 4.19-B, Supplement 2, Page 1d of the State Plan.

Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private providers of licensed Ambulatory Surgical Centers and the fee schedule and any annual/periodic adjustments to the fee schedules are published on the NC Division of Medical Assistance Web site http://www.ncdhhs.gov/dma/fee/fee.htm.

TN. No.: <u>09-016</u>
Supersedes Approval Date: 12-18-09 Effective Date: 07/01/2009

TN. No.: <u>08-002</u>

State Plan Under Title XIX of the Social Security Act

Medical Assistance Program State: North Carolina

Payments for Medical and Remedial Care and Services

Payment for Transportation:

SFY 2003 – No adjustment.

SFY 2004 – No Adjustments for Transportation effective October 1, 2003.

SFY 2005 and 2006 – No rate increase from the June 30, 2005 rate for all Medicaid private and public providers with the following exceptions: federally qualified health clinics, rural health centers, state institutions, outpatient hospital, pharmacy and the non-inflationary components of the case-mix reimbursement system for nursing facilities.

NC General Assembly legislation mandates that effective July 1, 2005, reimbursement rates for Transportation for the state fiscal years 2005-2006 and 2006-2007 will remain at the rate in effect as of June 30, 2005.

SFY 2010 – No inflationary adjustment.

SFY 2011- No inflationary adjustment.

Reference: Attachment 4.19-B, Section 23, Page 1

TN. No: <u>09-016</u> Supersedes TN. No: <u>NEW</u>

Approval Date: <u>12-18-09</u> Eff. Date <u>07/01/2009</u>

State Plan Under Title XIX of the Social Security Act

Medical Assistance Program State: North Carolina

Payments for Medical and Remedial Care and Services

Payment for Dialysis Centers:

SFY 2003 - No adjustment.

SFY 2005 and 2006 – No rate increase from the June 30, 2005 rate for all Medicaid private and public providers with the following exceptions: federally qualified health clinics, rural health centers, state institutions, outpatient hospital, pharmacy and the non-inflationary components of the case-mix reimbursement system for nursing facilities.

SFY 2007 – Effective July 1, 2006 an inflationary increase of 6.883% was applied.

SFY 2010 – No inflationary adjustment allowed.

SFY 2011- No inflationary adjustment allowed.

Reference: Attachment 4.19-B, Section 9, Page 2.

TN. No: <u>09-016</u> Supersedes TN. No: <u>NEW</u>

Approval Date: <u>12-18-09</u> Eff. Date <u>07/01/2009</u>

State Plan Under Title XIX of the Social Security Act

Medical Assistance Program State: North Carolina

Payments for Medical and Remedial Care and Services

Payment for Ambulatory Surgical Centers:

SFY 2003 – No adjustment.

SFY 2004 - No Adjustments for Ambulatory Surgical Centers effective October 1, 2003.

SFY 2005 and 2006 – No rate increase from the June 30, 2005 rate for all Medicaid private and public providers with the following exceptions: federally qualified health clinics, rural health centers, state institutions, outpatient hospital, pharmacy and the non-inflationary components of the case-mix reimbursement system for nursing facilities.

NC General Assembly legislation mandates that effective July 1, 2005, reimbursement rates for Ambulatory Surgical Centers for the state fiscal years 2005-2006 and 2006-2007 will remain at the rate in effect as of June 30, 2005.

SFY 2007 – Effective July 1, 2006 an inflationary increase of 9.169% was applied.

SFY 2010 – The rates for SFY 2010 are frozen as of the rates in effect at July 1, 2009, except Medicaid rates may be adjusted downward in accordance with the current year's downward adjustments to the Medicare fee schedule. Effective October 1, 2009, an overall negative rate adjustment of 4.095% was applied. There will be no further annual adjustment.

SFY 2011 – The rates for SFY 2011 will be frozen at the rates in effect on June 30, 2010.

Reference: Attachment 4.19-B, Section 9, Page 2.

TN. No: <u>09-016</u> Supersedes TN. No: <u>NEW</u>

Approval Date: <u>12-18-09</u> Eff. Date <u>07/01/2009</u>