

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Atlanta Regional Office  
61 Forsyth Street, Suite 4T20  
Atlanta, Georgia 30303



**DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS**

---

September 6, 2012

Mr. Michael Watson  
Director  
Division of Medical Assistance  
North Carolina Department of Health and Human Services  
2501 Mail Service Center  
Raleigh, North Carolina 27699-2501

Attention: Teresa Smith

RE: North Carolina Title XIX State Plan Amendment, Transmittal # NC 12-008

Dear Mr. Watson:

We reviewed the proposed amendment to the North Carolina Medicaid State Plan Amendment (SPA) NC 12-008 that was received in the Regional Office on June 6, 2012. The amendment provides clarification concerning the number of units of HIV Case Management that are allowed per Medicaid recipient, per month.

Based on the information provided, we are now ready to approve the Medicaid State Plan Amendment NC 12-008. This SPA was approved on September 6, 2012. The effective date of this amendment is November 1, 2012. We are enclosing the approved form HCFA-179 and plan pages.

If you have any questions or need any further assistance, please contact Elaine Elmore at (404) 562-7408 or Yvette Moore at (404) 562-7327.

Sincerely,

/s/

Jackie Glaze  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Enclosures