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State/Territory Name: North Carolina

State Plan Amendment (SPA) #: 14-016

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

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

August 5, 2014

Dr. Robin Cummings, Director
Division of Medical Assistance
Department of Health and Human Services
2501 Mail Service Center
Raleigh, NC 27699-2501

Re: North Carolina State Plan Amendment, 14-016

Dear Dr. Cummings:

We have reviewed the state plan amendment (SPA) 14-016 that was received in the Regional Office on June 19, 2014. This amendment modifies the physician's attestation date from June 30, 2013 to June 30, 2014. This modification will allow physicians who successfully attest as of the new cut-off date to receive Enhanced Affordable Care Act payments for any claim with dates of service on or after January 1, 2013. The requested effective date is June 1, 2014.

Based on the information provided, the Medicaid State Plan Amendment NC-14-016 was approved on August 5, 2014. The effective date of this SPA is June 1, 2014. We are enclosing the approved Form HCFA-179 and the approved plan page.

If you have any additional questions or need further assistance, please contact Clarence Lewis at 803-898-7647, or Donald Graves at 919-828-2999.

Sincerely,

//s//

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

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

**TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

1. TRANSMITTAL NUMBER:
14-016

2. STATE
NC

3. PROGRAM IDENTIFICATION:
TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE
June 1, 2014

5. TYPE OF PLAN MATERIAL (*Check One*):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 447.400, 447.410, and 447.415

7. FEDERAL BUDGET IMPACT:

a. FFY 2014 \$21,389,528
b. FFY 2015 \$ 5,347,963

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 4.19-B, Section 5, Page 1b

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (*If Applicable*):

Attachment 4.19-B, Section 5, Page 1b

10. SUBJECT OF AMENDMENT:

Physician Enhanced Payments

11. GOVERNOR'S REVIEW (*Check One*):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED: Secretary

12. SIGNATURE OF STATE AGENCY OFFICIAL:
//s//

13. TYPED NAME:
Aldona Z. Wos, M.D.

14. TITLE:
Secretary

15. DATE SUBMITTED: 06-19-14

16. RETURN TO:
Office of the Secretary
Department of Health and Human Services
2001 Mail Service Center
Raleigh, NC 27699-20014

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 06-19-14

18. DATE APPROVED: 08-05-14

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:
06-01-14

20. SIGNATURE OF REGIONAL OFFICIAL:
//s//

21. TYPED NAME: Jackie Glaze

22. TITLE: Associate Regional Administrator
Division of Medicaid & Children Health Opns

23. REMARKS:

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

Increased Primary Care Service Payment 42 CFR 447.405, 447.410, 447.415

- (3) If attesting to Board Certification, the certification must remain valid for the entire time these supplemental payments are received by the physician.
- (4) Physician Assistants and Nurse Practitioners must identify their supervising physician who qualifies for the enhanced payment.
- (5) Payments will begin on or after January 1, 2013, but not prior to physician, physician assistant, or nurse practitioner's attestation. EXCEPTION: Physicians who attest on or before ~~by~~ June 30, 2014 will be eligible for payments retroactive to the later of January 1, 2013, or the date upon which they met all requirements for higher payment under the Federal regulations

Primary Care physicians enrolling in calendar year 2013 or 2014 without board certification with attestation will require verification of 60% billed and paid primary care services as defined in section 1902 for the prior month of calendar year 2012.

ACA physician's billing history will be reviewed at the end of 2013 and 2014 to confirm that 60 percent of codes billed and paid during CY 2013 and 2014 were primary care services eligible for payment under sections 1902(a)(13)(C) and 1902(jj) of the Act.

Federally Qualified Health Centers, Rural Health Centers, School Based Health Centers, Health Departments and CABHA providers are not eligible for enhanced primary care services payments.

There shall be no cost settlement for any Primary Care Services provider in any setting for these services reimbursed at the enhanced ACA rates.

These payments will terminate on December 31, 2014.