

Table of Contents

State/Territory Name: North Carolina

State Plan Amendment (SPA) #: 22-0025

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Summary Page
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

601 E. 12th St., Room 355

Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

November 29, 2022

Dave Richard
Deputy Secretary of Medical Assistance
Division of Medical Assistance
2501 Mail Service Center
1985 Umstead Drive
Raleigh, NC 27699

Re: North Carolina State Plan Amendment (SPA) 22-0025

Dear Deputy Secretary Richard:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) NC-22-0025. This amendment allows Medicaid to cover and reimburse six family planning inter-periodic visits in addition to an annual assessment and comprehensive preventive medicine exam per 365 days.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 1974 of the Act. This letter is to inform you that North Carolina Medicaid SPA 22-0025 was approved on November 29, 2022, with an effective date of July 1, 2022.

Enclosed are copies of the approved CMS-179 summary page and approved SPA Page to be incorporated in the North Carolina State Plan.

If you have any questions, please contact Robert Townes at (215) 861-4716 or via email at Robert.Townes@cms.hhs.gov

Sincerely,

A black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

Enclosures

cc: Betty J Staton, NC DHHS
Cecilia Williams, NC DHHS
Emma Sandoe, NC DHHS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 2 — 0 0 2 5

2. STATE

NC

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT



XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 01, 2022

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 441.201

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 22 \$ 14,328

b. FFY 23 \$ 58,820

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A, Page 9

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 3.1-A, Page 9

9. SUBJECT OF AMENDMENT

Family Planning Services

10. 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

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

12. TYPED NAME

Kody H. Kinsley

13. TITLE

Secretary

14. DATE SUBMITTED

08/26/22 | 6:04 PM EDT

15. RETURN TO

Office of the Secretary
Department of Health and Human Services
2001 Mail Service Center
Raleigh, NC 27699-20014

FOR CMS USE ONLY

16. DATE RECEIVED

09/06/2022

17. DATE APPROVED

11/29/2022

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

07/01/2022

19. SIGNATURE OF APPROVING OFFICIAL

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

State/Territory: North Carolina

Citation

Family Planning Benefits

1905(a)(4)(C)

4.c.(i) Family planning services and supplies for individuals of child-bearing age and for individuals eligible pursuant to Att. 2.2-A, B, if this eligibility option is elected by the State.

Provided: ☐ No limitations ☒ With limitations
Please describe any limitations:

The State of North Carolina will cover a total of six family planning inter-periodic visits annually, not including the annual assessment and comprehensive preventive medicine exam and will cover FDA-approved family planning supplies. Under the State Eligibility Option for Family Planning Services, the State will cover the same family planning services received by all traditional Medicaid beneficiaries.

4.c.(ii) Family planning-related services provided under the above State Eligibility Option

Of the six inter-periodic visits allowed under the program, the State of North Carolina will cover medically necessary family planning-related services, pursuant to or in conjunction with an annual assessment or preventive medicine exam. Family planning-related services will include screening for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and screening and treatment for other sexually-transmitted infections.