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State/Territory Name: NORTH CAROLINA

State Plan Amendment (SPA) #: 23-0025

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

December 19, 2023

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

RE: NORTH CAROLINA STATE PLAN AMENDMENT TN # 23-0025

Dear Deputy Secretary Ludlam,

We have reviewed the proposed North Carolina State Plan Amendment (SPA) to Attachment 4.19-B which was submitted to the Centers for Medicare & Medicaid Services (CMS) on September 29, 2023. This plan amendment updates the Personal Care Services (PCS).

Based upon the information provided by the State, we have approved the amendment with an effective date of July 1, 2023. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Ysabel Gavino at maria.gavino@cms.hhs.gov

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

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

1. TRANSMITTAL NUMBER 2 3 — 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, 2023

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 440.167

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 23 \$ 41,246,224 **32,433,840**
b. FFY 24 \$ 156,003,796

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 4.19-B Section 23, Page 6

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Attachment 4.19-B Section 23, Page 6

9. SUBJECT OF AMENDMENT
Personal Care Services (PCS)

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 AGENCY OFFICIAL
Jay Ludlam
12. TYPED NAME
Jay Ludlam
13. TITLE
Deputy Secretary
14. DATE SUBMITTED **09/18/23 | 2:17 PM EDT**

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

FOR CMS USE ONLY

16. DATE RECEIVED
September 29, 2023

17. DATE APPROVED
December 19, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
July 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL
[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL
Todd McMillion

21. TITLE OF APPROVING OFFICIAL
Director, Division of Reimbursement Review

22. REMARKS
**Pen and Ink change approved by the State and processed by CMS on the following field:
Box 6 - Federal Budget Impact
Change FFY 23 from \$ 41,246,224 to \$ 32,433,840**

MEDICAL ASSISTANCE
STATE NORTH CAROLINA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

23. Any other Medical Care and any other type of remedial care recognized under State law, specified by the Secretary.

PERSONAL CARE SERVICES

Personal Care Services are reimbursed under the authority of 42 CFR 440.167 and when provided as defined in Attachment 3.1-A.1, Page 19, of this State Plan.

Effective January 1, 2021, providers subject to Electronic Visit Verification (EVV) as required by Section 12006 1903(l) of the 21st Century CURES Act, must be registered with the State's EVV solution or procure an alternative compliant EVV solution to receive reimbursement, as per PCS Clinical Coverage Policy No: 3L.

The agency's fee schedule rate of \$3.88 per 15 minutes was set as of August 1, 2017. Effective January 1, 2018 the fee schedule rate is \$3.90 per 15 minutes. Effective January 1, 2021, in adherence to EVV, payment for Personal Care Services (PCS) reimbursement shall be increased by ten percent (10%) above the rate in effect per fifteen (15) minute increment.

Effective July 1, 2023, the PCS fee schedule rate is established at \$5.96 per 15-minute increment.

Effective January 1, 2024, the fee schedule rate for PCS provided in an in-home residential setting shall be reimbursed in 15- minute increment units. Adult Care Homes (ACH) shall be reimbursed on a daily per diem basis. The ACH rate shall be the hourly equivalent to the 15-minute increment rate in effect on January 1, 2024, over a 24-hour period, with a maximum of 130 hours per month.

Rates are published on the North Carolina Medicaid Fee Schedule site https://ncdhhs.servicenowservices.com/fee_schedules, and are effective for services provided on or after the published date.

Except as otherwise noted in the plan, the state-developed fee schedule rate is the same for both governmental and non-governmental providers of Personal Care Services.

TN. No. 23-0025
Supersedes
TN. No. 21-0002

Approval Date: December 19, 2023

Eff. Date: 07/01/2023