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State/Territory Name: NORTH CAROLINA

State Plan Amendment (SPA) #: NC-23-0040

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

January 19, 2024

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 (SPA) Transmittal Number SPA # NC-23-0040

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 December 5, 2023. This plan amendment updates the Opioid Treatment Program (OTP).

Based upon the information provided by the State, we have approved the amendment with an effective date of October 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,



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 <u>2 3 — 0 0 4 0</u>	2. STATE <u>NC</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 01, 2023	
5. FEDERAL STATUTE/REGULATION CITATION 42 C.F.R. §8.12	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>24</u> \$ <u>17,266,050</u> b. FFY <u>25</u> \$ <u>15,462,486</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B Section 13, Page 15	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B Section 13, Page 15	


9. SUBJECT OF AMENDMENT
Opioid Treatment Program (OTP)

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 	15. RETURN TO Office of the Deputy Secretary Department of Health and Human Services 2001 Mail Service Center Raleigh, NC 27699-20014
12. TYPED NAME Jay Ludlam	
13. TITLE Deputy Secretary	
14. DATE SUBMITTED 11/20/23 12:11 PM EST	

FOR CMS USE ONLY	
16. DATE RECEIVED December 5, 2023	17. DATE APPROVED January 19, 2024
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL Todd McMillion	21. TITLE OF APPROVING OFFICIAL Director, Division of Reimbursement Review
22. REMARKS	

MEDICAL ASSISTANCE

State: North Carolina

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICE

15) Opioid Treatment Program (OTP) (H0020)

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Opioid Treatment. OTP services are provided by an RN, LPN, Pharmacist or MD. Services and therapies offered include: individualized assessment and treatment, person-centered and recovery focused treatment planning; individual, group, and family therapy, and counseling; medical monitoring, medication administration and preparation and distribution of take-home medications; presumptive drug screens and definitive drug tests; laboratory and diagnostic tests (pregnancy testing, tuberculosis testing); psychoeducation, and coordination of on and off-site treatment, recovery support, and medical services.

The service bundle payment unit is a weekly rate. Behavioral health providers enrolled with NC Medicaid as an Opioid Treatment Program Provider may bill the bundled service. Any provider delivering Opioid Treatment Program services through a bundle will be paid through the bundle payment rate and cannot bill separately. Medicaid Opioid Treatment Program Providers delivering separate services outside of the bundle may bill for services in accordance with the state's Medicaid billing procedures. At least one of the services included in the bundle must be provided within the weekly service payment unit to bill the bundled rate.

The agency's fee schedule rate of \$221.88 per week was set as of April 1, 2023 and is effective for services provided on or after that date. Effective October 1, 2023, the agency's fee schedule rate will be set at 100% of the Medicare fee schedule rate. The fee schedule is published on the agency's website at https://ncdhhs.servicenowservices.com/fee_schedules.

This service will be provided by direct enrolled Medicaid providers who may be either private or governmental. This service is not cost settled for any provider.

I.H.S. (Indian Health Services) shall be reimbursed at the federally established OMB/AIR (all Inclusive rate) outpatient rate for OTP Program services.

NC Medicaid is not reimbursing room and board for this service. The State will periodically monitor the actual provision of services paid under a bundled rate through the PHPs and PIHPs to ensure that beneficiaries receive the types, quantity, and intensity of services required to meet their medical needs and to ensure that the rates remain economic and efficient based on the services that are provided as part of the bundle.

TN No: 23-0040

Supersedes

TN No: 23-0006

Approval Date: January 19, 2024

Effective Date: 10/01/2023