



North Carolina Department of Health and Human Services
Division of Medical Assistance

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Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Michael Watson, Director

MEMORANDUM

TO: DMA Management & State Plan E-mail Subscribers

FROM: Teresa J. Smith, Administrative Service Manager

SUBJECT: Update to State Plan for Medical Assistance (232)

DATE: September 18, 2012

The following changes were made in the NC Medicaid State Plan manual. You may view the Plan on DMA's website at <http://www.ncdhhs.gov/dma/plan/index.htm>.

SPA# 12-002 The state plan changes was originated per Centers for Medicare and Medicaid (CMS) with the request for a corrective action plan that comprehensively describes the payment rates for dialysis services.

OLD PAGE(S): Attachment 4.19-B, Section 9, Page 1a

NEW PAGE(S): Attachment 4.19-B, Section 9, Page 1a

SPA 12-008 The state plan changes was originated per Centers for Medicare and Medicaid (CMS) approval of a companion letter to correct language to be consistent with 42 CFR 440.230 concerning the amount of HIV Case Management service that may be billed to Medicaid per recipient, per month.

OLD PAGE(S): Supplement 1 to Attachment 3.1-A, Part G, Page 15 and Attachment 4.19-B, Supplement 5, Page 4.

NEW PAGE(S): Supplement 1 to Attachment 3.1-A, Part G, Page 15 and Attachment 4.19-B, Supplement 5, Page 4.

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