



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

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Robin Gary Cummings, M.D.
Deputy Secretary for Health Services
Director, Division of Medical Assistance

April 7, 2015

Dear County DSS Director:

Attached is a Public Notice representing a proposed change to the North Carolina Health Choice Program. The Amendment will become effective October 1, 2015.

Please post this notice in your facility so that interested parties may be made aware of this proposed change and may comment as necessary. The posting can be removed after ninety days from the date of this letter.

Sincerely,

Teresa Smith

Teresa Smith
Administrative Service Manager

Attachment: Public Notice (NC-15-0001-EBCI)

www.ncdhhs.gov

Tel 919-855-4100 • Fax 919-733-6608

Location: 1985 Umstead Drive • Kirby Building • Raleigh, NC 27603

Mailing Address: 2501 Mail Service Center • Raleigh, NC 27699-2501

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PUBLIC NOTICE
(NC-15-0001-EBCI-Health Choice)

The Department of Health and Human Services, Division of Medical Assistance hereby provides notice of its intent to amend the North Carolina Health Choice state plan pages to make the following changes.

- To add the Eastern Band of Cherokee Indians (EBCI) an entity (referred to as “federally recognized tribe”) able to perform the functions currently assigned to local county divisions of social services in the administration of the North Carolina Health Choice program, including North Carolina Health Choice eligibility determination, and administrative services.
- To establish the co-payment for nonemergency visits to the emergency room for children whose family income is at or below 150% of the federal level at \$10.00
- To establish the co-payment for nonemergency visits to the emergency room for children whose family income is between 151% and 200% of the federal poverty level at \$25.00.
- To establish for families covered under the Program whose family income is above 150% of the federal poverty level a \$20.00 co-payment each emergency room visit.

This amendment will become effective October 1, 2015. The annual estimated state fiscal impact of this change is:

- a. SFY 2015 \$0.00
- b. SFY 2016 \$0.00

A copy of the proposed public notice may be viewed at the County Department of Social Services. Questions, comments and requests for copies of the proposed State Plan amendment should be directed to the Division of Medical Assistance at the address listed below:

Robin G. Cummings, MD
Director
Division of Medical Assistance
2501 Mail Service Center
Raleigh, NC 27699-2501