

## **Table of Contents**

**State/Territory Name: North Carolina**

**State Plan Amendment (SPA) #: 23-0036**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

**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

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December 4, 2023

Jay Ludlam

Deputy Secretary of Medical Assistance

Division of Medical Assistance

2001 Mail Service Center

1985 Umstead Drive

Raleigh, NC 27699-20014

Re: North Carolina State Plan Amendment (SPA) 23-0036

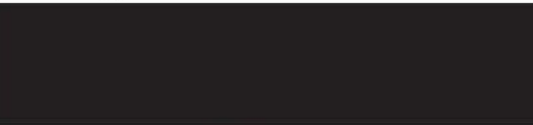
Dear Deputy Secretary Ludlam:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under Transmittal Number 23-0036. This amendment proposes to add Preventive Services to cover all vaccines for adults and their administration recommended by the Advisory Committee on Immunization Practices (ACIP).

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that North Carolina's SPA 23-0036 was approved on December 4, 2023, with an effective date of October 1, 2023.

If you have any questions, please contact Morlan Lannaman at (470) 890-4232 or via email at [Morlan.Lannaman@cms.hhs.gov](mailto:Morlan.Lannaman@cms.hhs.gov).

Sincerely,



James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Betty J. Staton, 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 3 — 0 0 3 6

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

October 01, 2023

5. FEDERAL STATUTE/REGULATION CITATION

Section 1861. [42 U.S.C. 1395x]

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 23 \$ 0  
b. FFY 24 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A Page 6  
Supplement 5 to Attachment 3.1-A Page 1(NEW)

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  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

Attachment 3.1-A Page 6-

9. SUBJECT OF AMENDMENT

Adult CoPay Vaccine – Preventive 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. SIGN [Redacted] AGENCY OFFICIAL

12. TYPED NAME  
Jay Ludlam

13. TITLE  
Deputy Secretary

14. DATE SUBMITTED 09/18/23 | 10:04 AM 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  
09/29/2023

17. DATE APPROVED  
12/04/2023

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL  
10/01/2023

19. SIGN [Redacted]

20. TYPED NAME OF APPROVING OFFICIAL  
James G. Scott

21. TITLE OF APPROVING OFFICIAL  
Director, Division of Program Operations

22. REMARKS

NC authorized Pen and Ink to update Box 7, CMS 179, to include Supplement 5 to Attachment 3.1-A Page 1 (NEW).

NC authorized Pen and Ink to update Box 7 and Box 8, CMS 179, to strike out Attachment 3.1-A Page 6.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Preventive Services

State/Territory: North Carolina

13. c Preventive Services

In addition to services contained in other sections of this document, North Carolina Medicaid covers all ACIP recommended vaccines for adults and the administration of these vaccines. The state has methods to ensure that its coverage and billing codes of approved vaccines and their administration are updated as necessary to reflect changes to ACIP recommendations. The state also assures that changes to ACIP recommendations will be incorporated into coverage and billing codes as necessary.

TN No. 23-0036  
Supersedes  
TN No. NEW

Approval Date: 12/04/2023

Eff. Date: 10/01/2023