

SUBCHAPTER 22K - QUALIFIED PROVIDERS

10A NCAC 22K .0101 DEFINITION

A provider qualified to make presumptive determinations of Medicaid eligibility for pregnant women shall meet the conditions required by Section 1920 of the Social Security Act, which is adopted and incorporated by reference with subsequent changes or amendments and available free of charge at <http://uscode.house.gov/>, and sign a written agreement with the Division of Health Benefits (Division).

History Note: Authority G.S. 108A-25(b); 42 U.S.C. 1396r-1; 42 C.F.R. 435.1103;
Eff. June 1, 1998;
Readopted Eff. July 1, 2018;
Amended Eff. March 1, 2020.

10A NCAC 22K .0102 AGREEMENT

(a) The provider shall participate in training offered by the Division or its agents and make presumptive eligibility determinations in accordance with 42 C.F.R. 435.1103, which is adopted and incorporated by reference with subsequent changes or amendments and available free of charge at <https://www.ecfr.gov/>, and the Medicaid State Plan.

(b) The Division shall terminate the provider's Medicaid Participation agreement and authority to make presumptive determinations if the provider fails to make required notifications to the county department of social services in the pregnant woman's county of residency within five business days or fails to follow procedures set forth in the Medicaid State Plan, resulting in eligibility denials for a majority of the provider's referrals.

(c) Termination of the agreement shall occur 30 calendar days following notification when termination is initiated by the Division.

History Note: Authority G.S. 108A-25(b); 42 U.S.C. 1396r-1; 42 C.F.R. 435.1103;
Eff. June 1, 1988;
Readopted Eff. July 1, 2018.

10A NCAC 22K .0103 PRESUMPTIVE DETERMINATIONS

(a) Presumptive determinations of eligibility shall apply only to pregnant women whose family income does not exceed the federal poverty guidelines issued in the Federal Register by the US Department of Health and Human Services and revised annually, which are adopted and incorporated by reference with subsequent changes or amendments and available free of charge at <https://aspe.hhs.gov/poverty-guidelines>.

(b) Only one presumptive determination of eligibility during a single pregnancy shall be made by the same qualified provider.

(c) A presumptive determination of eligibility may be made by a different qualified provider if the provider has no knowledge of a prior determination.

History Note: Authority G.S. 108A-25(b); 42 U.S.C. 1396r-1; 42 CFR 435.1103;
Eff. June 1, 1988;
Readopted Eff. July 1, 2018.