



North Carolina Department of Health and Human Services

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Beverly Eaves Perdue, Governor

October 25, 2011

Lanier M. Cansler, Secretary

Andy Willis, State Budget Director
Office of State Budget and Management
Room 5200, Administration Building
Raleigh, NC 27603-8005

Dear Mr. Willis:

Session Law 2009-451, Section 10.58(b)(4), and Session Law 2011-145, Section 10.31(b)(4) titled "Medical Policy" requires the Department of Health and Human Services to provide a quarterly report to the Office of State Budget and Management and the Fiscal Research Division that itemizes all Medicaid policy changes with total requirements of less than three million dollars.

If you have questions or would like additional information, please contact Tara Larson, Assistant Director for Division of Medical Assistance at (919) 855-4103.

Sincerely,

A handwritten signature in black ink, appearing to read "Lanier", written over a large, stylized loop.

Lanier M. Cansler

LMC:tl

cc: Michael Watson
Sharnese Ransome
Jim Slate
John Dervin
Craig Gray, MD, MBA, JD
Pam Kilpatrick
Lisa Hollowell



DIVISION OF MEDICAL ASSISTANCE						
PROJECTED ANNUAL IMPACT OF CLINICAL POLICY PROGRAM CHANGES TO THE MEDICAID PROGRAM						
SFY 2010-2011 4th Quarter Legislative Report on Fiscal Impact of \$3M or Less						
CLINICAL POLICY DESCRIPTION	FISCAL YR 12	FISCAL YR 13	FISCAL YR 14	FISCAL YR 15	FISCAL YR 16	
Antipsychotic Drug Safety for Children - A-6 CP2011.80: The policy change is designed to help ensure adverse effects monitoring and clinical assessment monitoring are done for the Medicaid population aged 17 and under who are prescribed an antipsychotic for an off label indication. Fiscal Impact: The fiscal impact analysis indicates there will be a reduction in requirements.	(\$862,500)	(\$4,657,500)	(\$8,048,160)	(\$8,692,013)	(\$9,387,374)	
Intellectual and Developmental Disabilities TCM (Billing unit change) 8-N CP 2010:38: The policy has been revised to address the consolidation/reduction of targeted case management (TCM) as mandated by SL 2010-31 and to reflect changes in the Medicaid State Plan (SPA 10-015). Fiscal Impact: The fiscal impact analysis indicates there will be a reduction in requirements.	(\$6,282,033)	(\$9,125,479)	(\$9,444,871)	(\$9,775,441)	(\$10,117,582)	
Hyperbaric Oxygen Therapy - Policy # 1 A-8 (CP2010.48): Updated policy to cover the use of Hyperbaric Oxygen Therapy (HBOT) for the pre-treatment and post-treatment of patients undergoing dental surgery. Fiscal Impact: The fiscal impact analysis of the policy information presented has been determined to be zero.	\$0	\$0	\$0	\$0	\$0	
Total	(\$7,144,533)	(\$13,782,979)	(\$17,493,031)	(\$18,467,454)	(\$19,504,956)	

DIVISION OF MEDICAL ASSISTANCE						
PROJECTED ANNUAL IMPACT OF CLINICAL POLICY PROGRAM CHANGES TO THE MEDICAID PROGRAM						
SFY 2011-2012 1st Quarter Legislative Report on Fiscal Impact of \$3M or Less						
CLINICAL POLICY DESCRIPTION	FISCAL YR 12	FISCAL YR 13	FISCAL YR 14	FISCAL YR 15	FISCAL YR 16	
Case Conference for Sexually Abused Children - 1A-5 CP2010:37 This policy describes services provided by physicians who work with health professionals or community agency representatives to coordinate patient care of a sexually abused child. This service is limited to one medical team conference per day. Fiscal Impact: The fiscal impact analysis of the policy information presented has been determined to be zero.	\$0	\$0	\$0	\$0	\$0	
Rituxan(Rituximab) - 1B-2 (CP2010.31): The rituximab antibody is a genetically engineered chimeric murine/human monoclonal antibody directed against the CD20 antigen found on the surface of normal and malignant B lymphocytes. Fiscal Impact: The fiscal impact analysis of the policy information presented has been determined to be zero.	\$0	\$0	\$0	\$0	\$0	
Total	\$0	\$0	\$0	\$0	\$0	