

§ 108A-54.1A. Amendments to Medicaid State Plan and Medicaid Waivers.

(a) The Department of Health and Human Services is expressly authorized and required to take any and all necessary action to amend the State Plan and waivers in order to keep the program within the certified budget, except as provided in G.S. 108A-54(f). For purposes of this section, the term "amendments to the State Plan" includes State Plan amendments, Waivers, and Waiver amendments.

(b), (c) Repealed by Session Laws 2015-245, s. 18, effective September 23, 2015.

(d) No fewer than 10 days prior to submitting an amendment to the State Plan to the federal government, the Department shall post the amendment on its website and notify the members of the Joint Legislative Oversight Committee on Medicaid and the Fiscal Research Division that the amendment has been posted. For any amendments to the State Plan that add or eliminate an optional service, the notice required by this subsection shall be 90 days. This notice requirement shall not apply to draft or proposed amendments submitted to the federal government for comments but not submitted for approval.

(e) Repealed by Session Laws 2015-245, s. 18, effective September 23, 2015.

(f) Any public notice required under 42 C.F.R. 447.205 shall, in addition to any other posting requirements under federal law, be posted on the Department's website. Upon posting such a public notice, the Department shall notify the members of the Joint Legislative Oversight Committee on Medicaid and the Fiscal Research Division that the public notice has been posted. Public notices shall remain posted on the Department's website. (2013-360, s. 12H.2(a); 2014-100, s. 12H.21(a); 2015-245, s. 18; 2022-74, s. 9D.15(z), (bb); 2025-25, s. 29(5).)