NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Health Benefits

JOSH STEIN • Governor
DEV SANGVAI • Secretary
MELANIE BUSH • Deputy Secretary, NC Medicaid

June 15, 2026

Dear County DSS Director:

The Department of Health and Human Services, Division of Health Benefits (DHB) hereby provides notice of its intent to amend the Medicaid State Plan Clinically Managed Residential Services (formerly Substance Abuse Non-Medical Community Residential Treatment) to align with the ASAM Criteria, Third Edition, 2013 and expand access to include the adolescent and adult (non-pregnant or parenting) populations.

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,

Ashley Blango

Ashley Blango
State Plan and Amendments Manager

Attachment: Revised Public Notice SPA 25-0023
Clinically Managed Residential Services (formerly Substance Abuse Non-Medical Community Residential Treatment) (ASAM Level 3.5 Adolescent, Adult, Pregnant and Parenting)

NC MEDICAID
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES •
DIVISION OF HEALTH BENEFITS

LOCATION: 1915 Health Services Way, Raleigh,
NC 27607 MAILING ADDRESS: 2501 Mail Service
Center, Raleigh, NC 27699-2001 www.ncdhhs.gov •
TEL: 919-855-4100 • FAX: 919-733-6608

REVISED PUBLIC
NOTICE
(SPA 25-0023)

Clinically Managed Residential Services (formerly Substance Abuse Non-Medical Community Residential Treatment) (ASAM Level 3.5 Adolescent, Adult, Pregnant and Parenting)

The Department of Health and Human Services Division of Health Benefits hereby provides notice of its intent to amend the Medicaid State Plan Clinically Managed Residential Services (formerly Substance Abuse Non-Medical Community Residential Treatment) to align with the ASAM Criteria, Third Edition, 2013 and expand access to include the adolescent and adult (non-pregnant or parenting) populations.

The reimbursement rate for Adult Services will be established at $425.00 per diem. The rate for Pregnant and Parenting Women Services will be established at $308.97 per diem; and the rate for Adolescent Services will be established at $427.68 per diem.

This amendment will become effective January 1, 2026.

The annual estimated State Fiscal Impact of this change is:

a. **SFY 2026 $3,020,947**
b. **SFY 2027 $6,181,202**

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 Health Benefits at the address listed below:

Melanie Bush
Deputy Secretary for NC Medicaid
Division of Health Benefits
2501 Mail Service Center
Raleigh, NC 27699-2501
medicaidrulescomments@dhhs.nc.gov

Posted on the Division of Health Benefits Website: June 11, 2026
https://medicaid.ncdhhs.gov/get-involved/nc-health-choice-state-plan