



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Office of the Controller

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
LAKETHA M. MILLER • Controller

December 19, 2023

Dear County Director of Social Services:

Subject: Reporting Procedures for Medicaid Expansion – State Funding under Session Law 2023-7 funds (“75% MED EXP” and “50% MED EXP”)

Effective with December 2023 services reimbursed January 2024, all Counties including NAM counties will use the following coding information to report to claim reimbursement “75% MED EXP” and “50% MED EXP” expenditures on their DSS-1571 reports:

Part IB (Income Maintenance) Please activate Function Code 63 with

<u>Column</u>	<u>Description</u>	<u>App Code</u>	<u>FFP</u>	<u>CFDA#</u>
11	75% MED EXP	426	75% Federal 25% State	93.778

<u>Column</u>	<u>Description</u>	<u>App Code</u>	<u>FFP</u>	<u>CFDA#</u>
12	50% MED EXP	481	50% Federal 50% State	93.778

Part II: (Administrative Expenditures and/or Purchased Services)

<u>Program Code</u>	<u>Fund</u>	<u>App Code</u>	<u>Description on XS315 & reimb. reports</u>	<u>% Shares</u>	<u>CFDA #</u>
426	1	426	75% MED EXP	75% Federal 25% State	93.778
481	1	481	50% MED EXP	50% Federal 50% State	93.778

Part IV (There are no Part IV coding requirements)

The related costs are capped funds, the *state* share will be tracked on the XS 411C report. This program will draw overhead in your NC-CoReLS software in Income Maintenance.

For additional instruction regarding SIS change notice information, please refer to the following links: <https://policies.ncdhhs.gov/divisional/social-services/services-information-system-sis/change-notices/2023> or [Dear Director Letters | NCDHHS](#). **As a reminder the E&E requirements do apply to these Medicaid Expansion funding.** If you have any questions concerning these reporting procedures, please contact your Local Business Liaison or the OOC Subsystems County Administration Accounting Unit at (919) 527-6150 or by email at CNTY.ADMIN@dhhs.nc.gov.

Sincerely,

DocuSigned by:
Laketha M. Miller
423C6C605E08405
Laketha M. Miller

LMM/pt

cc: Carla West Richard Stegenga Myra K. Dixon Kanasha Bradsher
Suzanne Beasley Lem Harris Pricillia Tabon Tiffiney Newton
Local Business Liaison DSS-1571 Contact Personnel

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • OFFICE OF THE CONTROLLER

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