

Date: September 25, 2009

To: North Carolina Public Schools, EC Directors and School Finance Officers

From: Sandy Frederick, Division of Medical Assistance

Subject: ***FFS Certification of Non-Federal Match Form***

Please be sure to complete the *Certification of Non-Federal Match Form* correctly and completely following the instructions on page 2 of the form. While each area of the form is equally important, special emphasis should be placed on the state and/or local match area as this is the main purpose of the form. It is important to identify the entire DPI account code for state and local funds designated to match the federal funds received from Medicaid. Please refer to number four (4) of the attached form-**Non-Federal Match Funds**. In order to correctly identify the matching funds please state whether the funds are State, Local or both. **For example, State funds – 1.5100.001.121.000.** This is only an example. The School Finance Officer or other duly authorized person is responsible to ensure the same source of funds is not being used to match any other federal funds the school district is receiving unless expressly allowed by federal regulation. Please write the matching amount of state and/or local funds in the designated area on the form.

As always, please be sure to maintain a file for each claiming quarter which contains all claim backup documentation as this will be required when either the Fee-for-Service or Medicaid Administrative Claiming (MAC) programs are audited and/or reviewed.

Should you have questions or concerns, please do not hesitate to contact me at: [Sandy.Frederick@dhhs.nc.gov](mailto:Sandy.Frederick@dhhs.nc.gov) or by phone at: 919-855-4153.

Thank you in advance for your cooperation to ensure program compliance.