

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2011

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SENATE BILL 245
Health Care Committee Substitute Adopted 3/17/11
PROPOSED HOUSE COMMITTEE SUBSTITUTE S245-PCS55302-TK-16

Short Title: Medicaid Billing by Local Health Departments.

(Public)

Sponsors:

Referred to:

March 8, 2011

1 A BILL TO BE ENTITLED
2 AN ACT TO AUTHORIZE LOCAL PUBLIC HEALTH DEPARTMENTS, DISTRICT
3 HEALTH DEPARTMENTS, AND CONSOLIDATED HUMAN SERVICES AGENCIES
4 TO BILL MEDICAID THROUGH AN APPROVED MEDICAID CLEARINGHOUSE
5 OR THROUGH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES,
6 DIVISION OF PUBLIC HEALTH.

7 The General Assembly of North Carolina enacts:

8 **SECTION 1.** Part 1A of Article 2 of Chapter 130A of the General Statutes is
9 amended by adding a new section to read:

10 **"§ 130A-34.2. Billing of Medicaid.**

11 (a) Local health departments, district health departments, and consolidated human
12 services agencies shall have the following two options to bill public health program services to
13 Medicaid:

14 (1) Submit claim data to HIS and manage 837/835 billing files within HIS.

15 (2) Submit claim data to any approved Medicaid clearinghouse and manage
16 837/835 billing files within that system.

17 (b) The Division of Public Health may require local health departments, district health
18 departments, and consolidated human services agencies, regardless of how those entities
19 choose to bill public health program services to Medicaid, to submit aggregate data to the
20 Division of Public Health. These data shall be provided in a format specified by the Division of
21 Public Health.

22 (c) Local health departments, district health departments, and consolidated human
23 services agencies shall make available encounter-level data for the Division of Public Health as
24 necessary to comply with federal grant reporting requirements. These data shall be provided in
25 a format specified by the Division of Public Health. However, local health departments shall
26 not be required to use Common Name Data System (CNDS) for any purpose.

27 (d) Local health departments, district health departments, and consolidated human
28 services agencies that bill services through a Medicaid clearinghouse shall be entitled to the
29 same reimbursement rates negotiated for agencies classified as public health entities and the
30 same Medicaid cost settlement reimbursement as those agencies that bill services through HIS.

31 (e) The Division of Public Health shall provide aggregate data requirements for the
32 purposes of Medicaid cost study reimbursement on behalf of the local health departments,



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1 district health departments, and consolidated human services agencies that choose to bill
2 services through a Medicaid clearinghouse. Those local health departments, district health
3 departments, and consolidated human services agencies shall submit to the Division of Public
4 Health the data required for the purposes of Medicaid cost study reimbursement and shall retain
5 responsibility to supply the Division of Medical Assistance and/or Centers for Medicare and
6 Medicaid Services (CMS) documentation to support audit processes and procedures to confirm
7 and validate cost study reimbursement data, as defined by CMS cost find regulations.

8 (f) As used in this section, unless otherwise specified, the following definitions apply:

9 (1) "Aggregate data" means high-level reports about services provided by local
10 health departments, district health departments, and consolidated human
11 services agencies, such as the number of patients meeting particular criteria
12 served by a health department or consolidated human service agency or the
13 count of and dollars received for each particular service being performed by
14 a health department or consolidated human service agency, by funding
15 source program and appropriate service code and that comply with
16 appropriate State and federal regulations.

17 (2) "Encounter-level data" means patient-identified data specific to each medical
18 encounter used to bill medical services.

19 (3) "Health Information System" or "HIS" means the system operated by the
20 North Carolina Division of Public Health and used by local health
21 departments to record information about services the local health
22 departments provide.

23 (4) "Public health program services" means services normally provided by a
24 local health department under agreements with the North Carolina Division
25 of Public Health or the North Carolina Division of Medical Assistance."

26 **SECTION 2.** This act is effective when it becomes law and applies to Medicaid
27 claims arising on and after that date. Local health departments, district health departments, and
28 consolidated human services agencies may rebill outside of the HIS system any unpaid
29 Medicaid claims submitted to HIS between the time period of December 1, 2010, and the
30 effective date of this act.