GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

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SENATE BILL 383 PROPOSED COMMITTEE SUBSTITUTE S383-PCS45412-TR-4

Short Title: Behav. Health Crisis EMS Transports/Medicaid. (Public)

Sponsors:

Referred to:

March 27, 2017

A BILL TO BE ENTITLED

AN ACT TO ESTABLISH MEDICAID REIMBURSEMENT FOR AMBULANCE

TRANSPORTS OF MEDICAID RECIPIENTS IN BEHAVIORAL HEALTH CRISIS TO

BEHAVIORAL HEALTH CLINICS OR ALTERNATIVE APPROPRIATE CARE

LOCATIONS.

The General Assembly of North Carolina enacts:

SECTION 1. It is the intent of the General Assembly to provide opportunities to divert individuals in behavioral health crisis from hospital emergency departments to alternative appropriate care locations. Consistent with Option 1 outlined in the Department of Health and Human Services' (Department) March 1, 2015, legislative report entitled "Ambulance Transports to Crisis Centers," the Department shall design a plan for adding Medicaid coverage for ambulance transports of Medicaid recipients in behavioral health crisis to behavioral health clinics or other alternative appropriate care locations. The plan shall ensure the following:

- (1) Medicaid reimbursement is contingent upon an Emergency Medical Services (EMS) System's ability to demonstrate its EMS providers have received appropriate education in caring for individuals in behavioral health crisis and that the EMS System has at least one partnership with a receiving facility that is able to provide care appropriate for those individuals.
- (2) An EMS System shall be required to include in its EMS System Plan a report on patient experiences and outcomes in accordance with rules adopted by the Department of Health and Human Services, Division of Health Regulation, Office of Emergency Medical Services.

SECTION 2. No later than December 1, 2017, the Department shall report to the Joint Legislative Oversight Committee on Medicaid and NC Health Choice on the plan for adding Medicaid coverage for ambulance transports of Medicaid recipients in behavioral health crisis to behavioral health clinics or other alternative appropriate care locations. The report shall include the following:

- (1) The proposed reimbursement methodology to be utilized.
- (2) An analysis of the financial impact of adding the coverage, including any anticipated costs to the Medicaid program.
- (3) Whether the Department intends to add this coverage pursuant to its authority under G.S. 108A-54(e), or whether additional appropriations are required.
- (4) If the Department intends to add this coverage pursuant to its authority under G.S. 108A-54(e), a time line for submission of any State Plan amendments



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1 2 3 or any waivers necessary for implementation and expected implementation date.

SECTION 3. This act is effective when it becomes law.