



NC Department of Public Safety  
JUVENILE JUSTICE AND DELINQUENCY PREVENTION



Josh Stein, Governor

Eddie M. Buffaloe Jr., Secretary  
William L. Lassiter, Deputy Secretary

MEMORANDUM

TO: Chairs of the Joint Legislative Oversight Committee on Justice and Public Safety  
Chairs of the Senate Appropriation Subcommittee on Justice and Public Safety  
Chairs of the House Appropriation Subcommittee on Justice and Public Safety  
Fiscal Research Division

FROM: Eddie M. Buffaloe, Jr., Secretary  
William L. Lassiter, Deputy Secretary

RE: Medical Cost Containment Report for Juvenile Justice [2nd Quarter,  
2025 April through June]

DATE: September 15, 2025

Pursuant to NC General Statute § 143B-802 (c), "The Department of Public Safety shall report quarterly to the Joint Legislative Oversight Committee on Justice and Public Safety and the chairs of the House of Representatives and Senate Appropriations Committees on Justice and Public Safety on:

- (1) The percentage of the total juvenile offenders requiring hospitalization or hospital services who receive that treatment at each hospital.
- (2) The volume of scheduled and emergent services listed by hospital and, of that volume, the number of those services that are provided by contracted and noncontracted providers.
- (3) The volume of scheduled and emergent admissions listed by hospital and, of that volume, the percentage of those services that are provided by contracted and noncontracted providers.
- (4) The volume of inpatient medical services provided to Medicaid-eligible juvenile offenders, the cost of treatment, the estimated savings of paying the nonfederal portion of Medicaid for the services, and the length of time between the date the claim was filed and the date the claim was paid.
- (5) The status of the implementation of the claims processing system and efforts to address the backlog of unpaid claims.
- (6) The hospital utilization, including the amount paid to individual hospitals, the number of juvenile offenders served, the number of claims, and whether the hospital was a contracted or noncontracted facility.
- (7) A list of hospitals under contract.
- (8) The reimbursement rate for contracted providers. The Department shall randomly audit high-volume contracted providers to ensure adherence to billing at the contracted rate."

**Mailing Address:**  
4212 Mail Service Center  
Raleigh, NC 27699-4212

[www.ncdps.gov](http://www.ncdps.gov)



**Office Location:**  
3010 Hammond Business Place  
Raleigh, NC 27603  
Phone: 919-733-3388

An Equal Opportunity Employer

The following data is based on available information for the period starting April 1, 2025, and ending on June 30, 2025.

**1. The percentage of the total juvenile offenders requiring hospitalization or hospital services who receive that treatment at each hospital.**

During this quarter, there were 50 juveniles with billing claims for treatment or diagnostics at a community hospital or affiliated setting with 4 claims submitted for payment. All hospitals comply with the mandated rates of two times Medicaid rate or seventy percent of prevailing rates. All claims were processed in a timely manner by PBGA.

**2. The volume of scheduled and emergent services listed by hospital and, of that volume, the number of those services that are provided by contracted and noncontracted providers.**

Figure 1 below indicates the number of hospitals and related facilities providing emergent services and observational services during the quarter.

**Figure 1**

4-01-2025 thru 6-30-25	Emergent/ER	Scheduled	Total	Percentage
CONTRACT HOSPITALS	2	10	12	24%
NON-CONTRACT HOSPITALS	11	27	38	76%
<b>Grand Total</b>	<b>13</b>	<b>37</b>	<b>50</b>	<b>100%</b>

**3. The volume of scheduled and emergent admissions listed by hospital and, of that volume, the percentage of those services that are provided by contracted and noncontracted providers.**

Juvenile Justice had 50 juveniles receive hospital services during the 2nd quarter. Twelve juveniles were served by contracted providers and 38 were served by non-contracted providers.

**4. The volume of inpatient medical services provided to Medicaid-eligible juvenile offenders, the cost of treatment, the estimated savings of paying the nonfederal portion of Medicaid for the services, and the length of time between the date the claim was filed and the date the claim was paid.**

Of the 50 juveniles who received hospital services during the 2nd quarter, two juveniles received inpatient hospital services. Claims were paid in the 2nd quarter cycle that were posted in prior cycles.

**5. The status of the implementation of the claims processing system and efforts to address the backlog of unpaid claims.**

The DPS Controller's Office provides ongoing updates regarding the resolution of any remaining backlogged claims.

**6. The hospital utilization, including the amount paid to individual hospitals, the number of juvenile offenders served, the number of claims, and whether the hospital was a contracted or noncontracted facility.**

Hospital/Facility	Contracted	Claims Paid	Number of Juveniles Served	Number of Claims Submitted	Total Charged	Total Paid
Atrium Health University	N	2	2	2	\$4800.40	\$1309.95
Carolina Medical Center	N	1	1	1	\$251.00	\$119.92
UNC Rockingham Health Center	N	1	1	1	\$1082.90	\$649.74
<b>Total</b>		<b>4</b>	<b>4</b>	<b>4</b>	<b>\$6134.30</b>	<b>\$2079.61</b>

Due to the size and staff structure of Juvenile Justice, there is not a comparable system, i.e., OPUS or Utilization Review Section. All medical claims are processed via paper claims by business officers at each Youth Development Center location. PGBA and DPS have created a workflow to accommodate the submission of hard copy claims.

## 7. A list of hospitals under contract.

Currently, PGBA confirms contracted hospitals and affiliates with DPS Purchasing and Contracts. The quarterly data submitted by PGBA confirms payment at the legislatively mandated rate of two times Medicaid or 70% of prevailing charge, or at the contractually agreed upon rate due a shortage of providers in the area.

## 8. The reimbursement rate for contracted providers.

Professional Service Providers		
Provider Name	TIN	Contract Rate
BERTIE MEMORIAL HOSPITAL	562072002	70% of billed or 200% Medicare (lesser of)
BLUE RIDGE HEALTHCARE	560529976	70% of billed or 200% Medicare (lesser of)
BOYLAN BROWNING PLACE	461416986	76.5% of billed charges
CALDWELL MEMORIAL HOSPITAL	560554202	76.5% of billed charges
CAROLINA DIGESTIVE HEALTH	020777195	70% of billed or 200% Medicare (lesser of)
CAROLINA EVE CARE OF LINCOLN	020625277	70% of billed or 200% Medicaid (lesser of)
CAROLINA ONCOLOGY ASSOCIATES	561279668	70% of billed or 200% Medicare (lesser of)
CATAWBA VALLEY MEDICAL CENTER	560789196	70% of billed or 200% Medicaid (lesser of)
DURHAM DIAGNOSTIC IMAGING LLC	562272517	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH	562003393	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH BEAUFORT	452436270	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH CHOWAN	562101090	70% of billed or 200% Medicare (lesser of)
FIRSTHEALTH	561936354	62% of billed or 260% Medicaid (lesser of)
FOOT AND ANKLE ASSOCIATES	830339604	70% of billed or 235% Medicaid (lesser of)
GLOBAL DIAGNOSTICS	582182663	95% of billed charges
HANGER P & O INC	232582601	100% of Medicaid
KINSTON COMMUNITY HEALTH CTR	561833275	70% of billed or 200% Medicaid (lesser of)
MISSION HEALTH MAUZV PHILLIPS	832048759	70% of billed or 200% Medicaid (lesser of)
NAPHCARE	581823464	100% of Contractual Fee Schedule
NC HEART AND VASCULAR	561509260	76.5% of billed charges
NEW HANOVER REGIONAL MEDICAL CENTER	560887181	70% of billed or 200% Medicare (lesser of)
OUTER BANKS HOSPITAL FAMILY MEDICINE	270484506	70% of billed or 200% Medicare (lesser of)
PITT GREENE CENTER FOR HEARING	200708208	70% of billed or 200% Medicaid (lesser of)
RALEIGH MEDICAL GROUP	561166754	70% of billed or 260% Medicaid (lesser of)
REHAB REVOLUTION	274460800	70% of billed or 260% Medicaid (lesser of)
ROYAL OAK DENTAL GROUP	810865814	90% of billed charges
UNC CARDIOLOGY	271081647	76.5% of billed charges
UNC CH HEMOPHILIA TREATMENT CENTER	383747383	76.5% of billed charges
UNC FACULTY PHYSICIANS	561732213	76.5% of billed charges
UNC FERTILITY LLC	455174142	70% of billed or 200% Medicaid (lesser of)
UNC HEALTH CARE	352412005	76.5% of billed charges
UNC ORAL AND MAXILLOFACIAL	561883003	N/A
UNC PHYSICIANS GROUP PRACTICES II LLC	852823886	76.5% of billed charges
UNC PHYSICIANS NETWORK	271081647	76.5% of billed charges
UNC SCHOOL OF DENTISTRY	561319745	N/A
UNC VASCULAR ACCESS CENTER	800818882	76.5% of billed charges
UNIV OF NC HOSPITALS	561118388	76.5% of billed charges
VIDANT MEDICAL GROUP	383740839	70% of billed or 200% Medicare (lesser of)