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10A NCAC 22G .0109, Provider Assessment, is proposed for permanent adoption as follows:

10A NCAC 22G .0109 PROVIDER ASSESSMENT

(a) Effective October 1, 2003 a nursing facility assessment is imposed on all nursing facility bed days of services except

- (1) Any nursing facility bed day of service provided by a federal or public nursing facility;
- (2) Any nursing facility bed day of service paid for under the Medicare program established under Title XVIII of the Social Security Act, and
- (3) Any nursing facility bed day of service provided by a nursing facility whose patients days of service to individuals eligible for benefits under the medical assistance program established under Title XIX of the Social Security Act during the State fiscal year for which the tax is imposed constitute fewer than ten percent of the nursing facility's total non-Medicare patients days of service during the fiscal year.

(b) For purposes of paragraph (a)(i) and for purposes of 42 CFR Part 433 Subpart B, the term "public nursing facility" means any nursing facility that is

- (1) Owned or operated by the State or any department or instrumentality of the State or by county, city, hospital district, or hospital authority, or
- (2) Is operated by a nonprofit corporation or association, a majority of whose board of directors or trustees are appointed by the State or any department or instrumentality of the State or by the governing body of a county, city, city, hospital district, or hospital authority, or
- (3) Is operated by a hospital that is a "public hospital" under N.C. General Statute 159-39(a), or
- (4) Is operated by a hospital that has verified its status by certifying State, local, hospital district or authority governmental control on the most recent version of the Form CMS 1514, or
- (5) On whose behalf the State or any department or instrumentality of the State or a county or city has issued and has outstanding general obligation or revenue bonds, or to which the State or any department or instrumentality of the State or a county or city make current appropriations (other than appropriations for the cost of medical care to prisoners or indigents).

(c) Effective October 1, 2003, the assessment is payable monthly and due the Department of Health and Human Services or designate of the Department within 15 days of the last day of the reporting month. Facilities shall submit payment and an account of all actual patient days during the month. Failure to provide accurate and timely reporting of days and payment of assessment shall result in a 10% reduction in facility rates and recoupment per the Department Cash Management Plan.

History Note: Authority 42 CFR Part 433, SubpartB; S.L. 2003-284, Sec. 10.28; Eff. May 1, 2004.