



North Carolina Department of Public Safety

Juvenile Justice

Roy Cooper, Governor
Erik A. Hooks, Secretary

Timothy D. Moose, Chief Deputy Secretary
William L. Lassiter, Deputy Secretary

MEMORANDUM

TO: Joint Legislative Oversight Committee on Justice and Public Safety
Chairs of Senate Appropriations Committee on Justice and Public Safety
Chairs of House Appropriations Committee on Justice and Public Safety

FROM: Erik A. Hooks, Secretary *EAH*
Timothy D. Moose, Chief Deputy Secretary *T.D. Moose*

RE: Medical Cost Containment Report for Juvenile Justice

DATE: February 1, 2021

Pursuant to NC General Statute 143B-707.3(c), the Department of Public Safety shall report November 1, 2016 and quarterly thereafter 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 number of total inmates and 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 non-contracted 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 non-contracted providers.*
- (4) The volume of inpatient medical services provided to Medicaid-eligible inmates and 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 inmates and juvenile offenders served, the number of claims, and whether the hospital was a contracted or non-contracted facility.*
- (7) The total cost and volume for the previous fiscal quarter for emergency room visits originating from Central Prison and NCCIW Hospitals to UNC Hospital, UNC Rex Healthcare, and WakeMed Hospital.*
- (8) The total payments for Medicaid and non-Medicaid eligible inmates to UNC Hospitals, UNC Rex Healthcare, and WakeMed Hospital, including the number of days between the date the claim was filed and the date the claim was paid.*
- (9) A list of hospitals under contract.*
- (10) The reimbursement rate for contracted providers.*

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Juvenile Justice: 2020-21 2nd Quarter

The following data is based on available information for the period starting October 1, 2020 and ending December 31, 2020.

(1) The number of total juvenile offenders requiring hospitalization or hospital services who receive that treatment at each hospital.

During this quarter, there was one juvenile with billing claims for treatment or diagnostics at a community hospital or affiliated setting. There were two claims submitted from hospitals and related facilities specific to this quarter. 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.

Please note, due to the COVID-19 pandemic, hospital services during this quarter were limited to urgent only.

(2) The volume of scheduled and emergent services and, of that volume, the *number* of those services that are provided by contracted and non-contracted providers.

Figure 1 below indicates the number of hospitals and related facilities providing emergent services and observational services during the defined cycle- October 1, 2020 through December 31, 2020.

Figure 1

10-01-2020 through 12-31-2020	Emergent/ER	Scheduled	Total	Percentage
CONTRACT HOSPITALS	1	0	1	100%
NON-CONTRACT HOSPITALS	0	0	0	0%
Grand Total	1	0	1	100%

(3) The volume of scheduled and emergent admissions listed by and, of that volume, the percentage of those services that are provided by contracted and non-contracted providers.

Juvenile Justice had no hospital admissions billed during the quarter.

(4) The volume of inpatient medical services provided to Medicaid-eligible inmates and 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.

As reported in question (3), there were no juveniles receiving hospital related visits of greater than 24 hours.

(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 is providing on-going 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 non-contracted facility.

Hospital/Facility	Contracted	Claims Paid	Number of Juveniles Served	Number of Claims Submitted	Total Charged	Total Paid
UNC Hospitals	Y	2	1	2	\$589.00	\$450.61
Total	N	2	1	2	\$589.00	\$450.61

Juveniles who required hospital related services in the 4th quarter resulted in \$589.00 billed (total charged) and \$450.61 costs paid (total paid) this quarter. The visit was for emergent services. Services were conducted by contracted providers.

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) The total cost and volume for the previous fiscal quarter for emergency room visits originating from Central Prison and NCCIW Hospitals to UNC Hospital, UNC Rex Healthcare, and Wake Med Hospital.

This item does not apply to Juvenile Justice.

(8) The total payments for Medicaid and non-Medicaid eligible inmates to UNC Hospitals, UNC Rex Healthcare, and Wake Med Hospital, including the number of days between the date the claim was filed and the date the claim was paid.

This item does not apply to Juvenile Justice.

(9) A list of hospitals under contract.

Currently, PGBA confirms ACJJ contracted hospitals and affiliates with ACJJ Purchasing and Contracts. The quarterly data submitted by PGBA confirms payment at the legislatively mandated rate of two times Medicaid or 70% of prevailing charges.

(10) The reimbursement rate for contracted providers

Please refer to the following pages for rate tables.

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 EYE 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 MAUZY 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	not
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	not
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)

Institutional Providers		
BEAUFORT HOSPITAL	452436270	70% of billed or 200% Medicare (lesser of)
BERTI MEMORIAL HOSPITAL	562072002	70% of billed or 200% Medicare (lesser of)
CALDWELL MEMORIAL HOSPITAL	560554202	240% Medicare
CAROLINA DIGESTIVE CARE	020777195	70% of billed or 200% Medicare (lesser of)
CATAWBA VALLEY MEDICAL CENTER	560789196	Outpatient: 70% of billed or 200% Medicaid Inpatient: 31% of billed charges
CHATHAM HOSPITAL	560611546	240% Medicare
CHS BLUE RIDGE MORGANTON	560529976	70% of billed or 200% Medicare (lesser of)
DUPLIN GENERAL HOSPITAL	566011594	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)
HERITAGE HOSPITAL	562093700	70% of billed or 200% Medicare (lesser of)
KINDRED HOSPITAL GREENSBORO	522085555	53% of billed charges
MH BLUE RIDGE MED CENTER	832048759	70% of billed or 200% Medicare (lesser of)
NEW HANOVER REGIONAL MEDICAL CENTER	560887181	70% of billed or 200% Medicare (lesser of)
PENDER HOSPITAL	560653348	70% of billed or 200% Medicare (lesser of)
PITT COUNTY MEMORIAL HOSPITAL	560585243	70% of billed or 200% Medicare (lesser of)
Provider Name	TIN	Contract Rate
REX HOSPITALS INC	561509260	240% Medicare
ROANOKE CHOWAN HOSPITAL	562003393	70% of billed or 200% Medicare (lesser of)
THE OUTER BANKS HOSPITAL INC	562112733	70% of billed or 200% Medicare (lesser of)
UNIV OF NC HOSPLITALS	561118388	240% Medicare