

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2013

FILED SENATE
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SENATE DRS35247-ME-65 (03/14)

Short Title: Public Paid Claims Data/Health Info Exchange. (Public)

Sponsors: Senator Hise (Primary Sponsor).

Referred to:

A BILL TO BE ENTITLED

AN ACT TO PROVIDE GREATER TRANSPARENCY AND ACCOUNTABILITY THROUGH ACCESS TO DATA ON MENTAL HEALTH CLAIMS PAID BY THE STATE AND FEDERAL GOVERNMENTS UNDER THE MEDICAID PROGRAM.

Whereas, public discourse has identified a critical need for better control of escalating tax paid health care costs; and

Whereas, the North Carolina General Assembly understands the valuable role that health plan claims data can play in promoting lower costs and better health; and

Whereas, the State needs timely access to claims information in order to assess performance, pinpoint medical expense trends, identify beneficiary health risks, and evaluate how the State is spending health care dollars; and

Whereas, to control health costs paid for with tax dollars, the State must be able to examine how they are currently spending health care funds and must have ready access to claims information or loss experience that demonstrates how much is being spent and what it is being spent on; and

Whereas, by utilizing an organization that complies with the requirements of the North Carolina Health Information Exchange Act, Article 29A of Chapter 90 of the General Statutes, the State can protect an individual beneficiary's privacy while allowing the exchange of loss experience information for legitimate health care decisions paid for with tax dollars to the State; Now, therefore,

The General Assembly of North Carolina enacts:

SECTION 1. All local management entities (LMEs), as defined in G.S. 122C-3, that are approved by the Department of Health and Human Services to operate a prepaid health insurance program (PHIP) in accordance with 42 C.F.R. Part 438 shall monthly report to North Carolina Community Care Networks, Inc., (CCNC) all client specific paid claims, encounter data, and shadow claims necessary to track and analyze State and federal mental health expenditures. Claims and data shall be submitted within two business days of the last business day of a month. CCNC shall ensure access to and use of the reported data in compliance with the Health Information Portability and Accountability Act of 1996, P.L. 104-191, as amended, (HIPAA) medical privacy rule, 45 C.F.R. Parts 160 and 164, and any other applicable medical privacy laws. Privileged medical information or protected health information received by CCNC pursuant to this section shall be confidential and is not a public record under G.S. 132-1.

SECTION 2. This act becomes effective January 1, 2014.

