

**GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2015**

**S**

**1**

**SENATE BILL 701**

Short Title: Discontinue Medicaid Contract for PCCM. (Public)

---

Sponsors: Senators Brown and Hise (Primary Sponsors).

---

Referred to: Rules and Operations of the Senate.

---

March 30, 2015

A BILL TO BE ENTITLED  
AN ACT TO DISCONTINUE THE MEDICAID AND HEALTH CHOICE PRIMARY CARE  
CASE MANAGEMENT PROGRAM AND CONTRACT.

The General Assembly of North Carolina enacts:

**SECTION 1.** Effective January 1, 2016, the current Medicaid and Health Choice primary care case management (PCCM) program is discontinued. The Department of Health and Human Services shall not renew or extend the contract for PCCM services with North Carolina Community Care Networks, Inc. (NCCCN), beyond December 31, 2015.

**SECTION 2.** The Department of Health and Human Services shall take all actions necessary to discontinue the current Medicaid and Health Choice PCCM program as implemented by NCCCN. As soon as reasonably possible, but no later than October 1, 2015, the Department shall submit to the Centers for Medicare and Medicaid Services (CMS) a Medicaid State plan amendment eliminating the PCCM program. If CMS has not approved the State plan amendment by January 1, 2016, the Department of Health and Human Services nevertheless shall discontinue all payments related to the PCCM program beginning January 1, 2016.

**SECTION 3.** Nothing in this act shall be construed to prohibit the Department of Health and Human Services from developing or utilizing contracts for managed care other than PCCM after January 1, 2016.

**SECTION 4.** The General Assembly finds that discontinuation of the PCCM program will result in estimated annual savings to the Medicaid and Health Choice programs of one hundred seventy-two million dollars (\$172,000,000) of State and federal funds for fiscal year 2016-2017. The General Assembly intends that the additional availability of funds resulting from elimination of the Medicaid PCCM program be used to mitigate the lost reimbursement to primary care providers for PCCM participation.

**SECTION 5.** G.S. 108A-70.21(b) reads as rewritten:

"(b) Benefits. – All health benefits changes of the Program shall meet the coverage requirements set forth in this subsection. Except as otherwise provided for eligibility, fees, deductibles, copayments, and other cost sharing charges, health benefits coverage provided to children eligible under the Program shall be equivalent to coverage provided for dependents under North Carolina Medicaid Program except for the following:

...

No benefits are to be provided for services and materials under this subsection that do not meet the standards accepted by the American Dental Association.



1        ~~The Department shall provide services to children enrolled in the NC Health Choice~~  
2 ~~Program through Community Care of North Carolina (CCNC) and shall pay Community Care~~  
3 ~~of North Carolina providers the per member, per month fees as allowed under Medicaid."~~

4            **SECTION 6.** Section 5 of this act becomes effective January 1, 2016. The  
5 remainder of this act is effective when it becomes law.