GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

FILED SENATE
Apr 4, 2017
S.B. 608
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SENATE BILL DRS45361-MR-99* (03/15)

Short Title: I/DD Services Waiting List Transparency. (Public) Senators Tucker, Krawiec, and Horner (Primary Sponsors). Sponsors: Referred to: A BILL TO BE ENTITLED AN ACT TO PROVIDE GREATER TRANSPARENCY REGARDING THE REGISTRY OF UNMET NEEDS FOR THE NORTH CAROLINA INNOVATIONS WAIVER AND THE WAITING LIST FOR STATE-FUNDED INTELLECTUAL AND DEVELOPMENTAL DISABILITY SERVICES. The General Assembly of North Carolina enacts: **SECTION 1.** Beginning October 1, 2017, twice yearly, each Local Management Entities/Managed Care Organization (LME/MCO) shall provide to the Department of Health and Human Services (DHHS) the number of individuals within the LME/MCO's catchment area who are on the Registry of Unmet Needs for the North Carolina Innovations Waiver and who are on the waiting list for State-funded intellectual and developmental disability (I/DD) services. The following detailed information shall be provided for the individuals on either or both of these waiting lists: Age of each individual. (1) (2) Ethnicity of each individual. (3) Current living arrangement of the individual. (4) Length of time the individual has been on at least one of the two waiting lists. (5) The documented services and supports needed by the individual when the individual first requested services, as well as the documented services and supports currently needed by the individual. Any documented co-occurring mental health or substance abuse needs the (6) individual may have.

Each LME/MCO shall provide the information to the DHHS no later than April 1 and October 1 of each year. No later than January 1 of each year, in order to assist with funding priorities, the DHHS shall submit a report that consolidates all information received during the previous calendar year from the LME/MCOs regarding individuals who are waiting for I/DD services, and that removes any personally identifiable information, to the Joint Legislative Oversight Committee on Medicaid and NC Health Choice and the Fiscal Research Division.

secondary disabilities that the individual may have.

residence for Medicaid eligibility.

The documented primary disability of the individual and any documented

The county where the individual lives and, if applicable, the county of

Reports from LME/MCOs and from DHHS shall be required under this section until behavioral health services for Medicaid recipients are no longer excluded from capitated Prepaid Health Plan contracts, as defined by S.L. 2015-245, as amended.



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SECTION 2. This act is effective when it becomes law.