GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

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SENATE BILL 608*

	Short Title:	I/DD Services Waiting List Transparency. (Public	c)
	Sponsors:	Senators Tucker, Krawiec, and Horner (Primary Sponsors).	
	Referred to:	Rules and Operations of the Senate	
	April 5, 2017		
1		A BILL TO BE ENTITLED	
2	AN ACT TO PROVIDE GREATER TRANSPARENCY REGARDING THE REGISTRY OF		
3	UNMET NEEDS FOR THE NORTH CAROLINA INNOVATIONS WAIVER AND THE		
4	WAITING LIST FOR STATE-FUNDED INTELLECTUAL AND DEVELOPMENTAL		
5	DISABILITY SERVICES.		
6	The General Assembly of North Carolina enacts:		
7	SECTION 1. Beginning October 1, 2017, twice yearly, each Local Management		
8	Entities/Managed Care Organization (LME/MCO) shall provide to the Department of Health		
9	and Human Services (DHHS) the number of individuals within the LME/MCO's catchment		
10	area who are on the Registry of Unmet Needs for the North Carolina Innovations Waiver and		
11	who are on the waiting list for State-funded intellectual and developmental disability (I/DD)		
12	services. The following detailed information shall be provided for the individuals on either or		
13	both of these waiting lists:		
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16	(3	•	
17	(4)		ø
18		lists.	0
19	(5)		e
20		individual first requested services, as well as the documented services an	
21		supports currently needed by the individual.	
22	(6		ie
23		individual may have.	
24	(7		d
25		secondary disabilities that the individual may have.	
26	(8		of
27		residence for Medicaid eligibility.	/1
28	Each LME/MCO shall provide the information to the DHHS no later than April 1		1
29	and October 1 of each year. No later than January 1 of each year, in order to assist with funding		
30	priorities, the DHHS shall submit a report that consolidates all information received during the		-
31	previous calendar year from the LME/MCOs regarding individuals who are waiting for I/DD		
32	services, and that removes any personally identifiable information, to the Joint Legislative		
33	Oversight Committee on Medicaid and NC Health Choice and the Fiscal Research Division.		
24	Deports from I ME/MCOs and from DIIIIS shall be required under this section until		

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.