



HOUSE BILL 478: Required Experience for MH/DD/SAS QPs.

2017-2018 General Assembly

Committee:

Introduced by:

Analysis of: S.L. 2017-32

Date:

July 19, 2017

Prepared by:

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OVERVIEW: S.L. 2017-32 requires the Department of Health and Human Services (DHHS) to amend the qualifications for Qualified Professionals in the mental health, developmental disabilities, and substance abuse services (MH/DD/SAS) system of care to count all years of full-time MH/DD/SAS experience toward the required number of years' experience, regardless of when the experience was obtained. This act became effective June 8, 2017, however, any changes to clinical coverage policies and any changes to rules adopted by DHHS relating to the qualifications of Qualified Professionals required under Section 1 are not effective until DHHS has received CMS approval of the State Plan amendment required by Section 1.

CURRENT LAW: Administrative rule 10A N.C.A.C. 27G .0104 and the Medicaid State Plan state the qualifications for Qualified Professionals within the MH/DD/SAS system of care. Currently, Qualified Professionals must have either one, two, or four years of full-time MH/DD/SAS experience after completing educational requirements. The number of years of MH/DD/SAS experience required depends on the whether the level of education attained is a master's degree or a bachelor's degree and whether the degree is in a human services field.

BILL ANALYSIS:

S.L. 2017-32 directs the Commission for Mental Health, Developmental Disabilities, and Substance Abuse Services within DHHS to amend the qualifications for Qualified Professionals that are established in rule, Medicaid clinical coverage policy, and in the Medicaid State Plan, to count all years of full-time MH/DD/SAS experience toward the number of years of MH/DD/SAS experience required based on the type of degree held and the field of study, regardless of whether the experience was obtained before or after completion of the degree. DHHS must submit any necessary State Plan amendments to the Centers for Medicare and Medicaid Services (CMS) by December 1, 2017. The Commission has no longer than six months from the date that DHHS receives CMS approval to amend the rules.

EFFECTIVE DATE: This act became effective June 8, 2017, however, any changes to clinical coverage policies and any changes to rules adopted by DHHS relating to the qualifications of Qualified Professionals required under Section 1 are not effective until DHHS has received CMS approval of the State Plan amendment required by Section 1.

Staff attorney Jennifer Hillman contributed substantially to the preparation of this summary.

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