

## HOUSE BILL 631: Reduce Admin. Duplication MH/DD/SAS Providers.

2017-2018 General Assembly

Committee: Date: April 20, 2017
Introduced by: Reps. Stone, Dobson, Murphy
Analysis of: Second Edition Prepared by: Augustus D. Willis Committee Counsel

OVERVIEW: House Bill 631 would create a workgroup to examine the requirements of physical health providers and mental health, intellectual/developmental disability, and substance abuse disorder providers. The PCS would require a report to the General Assembly with recommendations on how to avoid duplication and enhance efficiency in the provision of health care services.

**BILL ANALYSIS:** House Bill 631 would require the Secretary of the Department of Health and Human Services to establish a workgroup to examine the current administrative requirements for mental health, intellectual/developmental disability, and substance use disorder providers and how best to integrate those requirements with similar administrative requirements for physical health providers in order to avoid duplication and enhance efficiency.

The workgroup would have to consist of representatives from the following:

- Division of Mental Health, Developmental Disabilities, and Substance Abuse Services;
- Division of Medical Assistance;
- Division of Health Benefits:
- Division of Health Service Regulation;
- Local management entity/managed care organizations;
- Providers:
- Stakeholders.

The following categories of requirements imposed on mental health, intellectual/developmental disability, and substance use disorder providers and physical health providers would be required to be reviewed:

- Training
- Service delivery
- Documentation
- Claims processing
- Reporting

- Monitoring
- Oversight
- Facility licensure
- Medicaid enrollment
- Credentialing

- Accreditation
- Contracts
- Investigations
- Audits

In conducting the examination, the workgroup would be required to identify the federal or State entity that created each requirement examined by the workgroup, and recommend whether that requirement should remain, be eliminated, or be redesigned. The work group would have to consider any

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requirement imposed on mental health, intellectual/developmental disability, and substance use providers that:

- Is not federally mandated;
- Exceeds what is required for physical health;
- Does not add value to the delivery of behavioral health services;
- Is unable to be incorporated into standard electronic health records or does not align with meaningful use of electronic health records.

DHHS would be required to report the findings and recommendations of the workgroup to the Joint Legislative Oversight Committee on Health and Human Services, the Joint Legislative Oversight Committee on Medicaid and NC Health Choice, and the Fiscal Research Division by March 31, 2018.

**EFFECTIVE DATE:** This act would be effective when it becomes law.