



HOUSE BILL 70: Delay NC HealthConnex for Certain Providers.

2019-2020 General Assembly

Committee:		Date:	December 4, 2019
Introduced by:		Prepared by:	Jason Moran-Bates Staff Attorney
Analysis of:	S.L. 2019-23		

OVERVIEW: S.L. 2019-23 amends G.S. 90-414.4 to (1) extend the deadline by which providers not mentioned elsewhere in the statute have to connect to the Health Information Exchange (HIE) to June 1, 2020, (2) allow psychiatrists and the State Laboratory of Public Health until June 1, 2021, before they are required to connect, (3) allow State health care facilities until June 1, 2021, until they are required to submit claims data, (4) allow DHHS to extend the connection deadline for providers making a good faith effort to connect to June 1, 2020, (5) allow the Secretary of Health and Human Services to exempt classes of providers from connecting to the HIE through December 31, 2022, and (6) make connection to the HIE voluntary for several types of providers.

This act became effective June 6, 2019.

CURRENT LAW: Currently, G.S. 90-414.4(a1) requires most providers who provide services to Medicaid beneficiaries to submit demographic and clinical data through the HIE by June 1, 2019. G.S. 90-414.4(a2) allows DHHS and DIT to grant extensions to most providers through June 1, 2020. All providers of Medicaid or State-funded care are required to connect to the HIE.

The current HIE Advisory Board has 12 members, including three ex-officio, non-voting members.

BILL ANALYSIS: S.L. 2019-23 amends the Statewide Health Information Exchange Act in the following ways:

- Extends the deadline for most providers to connect to the HIE through June 1, 2020.
- Extends the connection deadline for psychiatrists and the State Laboratory of Public Health until June 1, 2021.
- Allows all providers to request an extension deadline of June 1, 2020, from DHHS.
- Allows State healthcare facilities until June 1, 2021 before they begin submitting claims data.
- Allows the Secretary of HHS to exempt classes of providers from connecting to the HIE until December 31, 2022, if connection would be an undue hardship for those providers.
- Makes connection to the HIE voluntary for the following providers:
 - Community-based, long-term services and supports providers.
 - Intellectual and developmental disability services and supports providers.

Karen Cochrane-Brown
Director



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- Community Alternatives Program waiver services (including CAP/DA, CAP/C, and Innovations) providers.
- Eye and vision services providers.
- Speech, language, and hearing services providers.
- Occupational and physical therapy providers.
- Durable medical equipment providers.
- Emergency and non-emergency medical transportation service providers.
- Local education agencies and school based health providers.

EFFECTIVE DATE: This act became effective June 6, 2019.

BACKGROUND: The North Carolina Health Information Exchange was first authorized and funded in S.L. 2015-241 (the 2015 Appropriations Act). Deadlines for certain providers were set forth in that Act. The deadlines were updated in S.L. 2017-57 (the 2017 Appropriations Act) and S.L. 2018-41.