



HOUSE BILL 70: Delay NC HealthConnex for Certain Providers.

2019-2020 General Assembly

Committee:	Senate Rules and Operations of the Senate	Date:	May 23, 2019
Introduced by:	Reps. Dobson, White, Murphy, Lambeth	Prepared by:	Jason Moran-Bates
Analysis of:	Third Edition		Staff Attorney

OVERVIEW: House Bill 70 would amend 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 until June 1, 2021, before they are required to connect, (3) allow DHHS to extend the connection deadline for providers making a good faith effort to connect to June 1, 2020, (4) allow the Secretary of Health and Human Services to exempt classes of providers from connecting to the HIE through December 31, 2022, and (5) make connection to the HIE voluntary for several types of providers.

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: House Bill 70 would amend G.S. 90-414.4 in the following ways:

- Extend the deadline for most providers to connect to the HIE through June 1, 2020.
- Extend the connection deadline for psychiatrists until June 1, 2021.
- Allow all providers to request an extension deadline of June 1, 2020, from DHHS.
- Allow 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.
- Make 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.
 - 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.

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- Emergency and non-emergency medical transportation service providers.
- Local education agencies and school based health providers.

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

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.

**Samantha Yarborough, Staff Attorney, substantially contributed to this summary.*