

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2009

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SENATE DRS85068-LN-92 (2/24)

Short Title: MH/National Accred. Benchmarks.

(Public)

Sponsors: Senator Berger of Franklin.

Referred to:

1 A BILL TO BE ENTITLED
2 AN ACT TO MAKE CHANGES TO NATIONAL ACCREDITATION BENCHMARK
3 REQUIREMENTS FOR CERTAIN MEDICAID ENROLLED FACILITIES.

4 The General Assembly of North Carolina enacts:

5 **SECTION 1.** G.S. 122C-81(d) reads as rewritten:

6 "(d) Providers enrolled in the Medicaid program or contracting for State-funded services
7 on or after July 1, 2008, and providing services which require national accreditation shall
8 successfully complete all accreditation requirements and be awarded national accreditation
9 within ~~one year~~ 18 months of enrollment in the Medicaid program or within two years
10 following the provider's first contract to deliver a State-funded service requiring national
11 accreditation. Providers providing services that require national accreditation shall be required
12 to discontinue service delivery and shall have their Medicaid enrollment and any service
13 contracts terminated if they do not meet the following benchmarks for demonstrating sufficient
14 progress in achieving national accreditation following the date of enrollment in the Medicaid
15 program or initial contract for State-funded services:

- 16 (1) ~~Three-Six~~ Six months – On-site accreditation review scheduled by accrediting
17 agency as documented by a letter from the agency to the provider and
18 completion of self-study and self-evaluation protocols distributed by the
19 selected accrediting agency.
- 20 (2) ~~Six-Twelve~~ Twelve months – On-site accreditation review scheduled by accrediting
21 agency as documented by a letter from the agency to the provider.
- 22 (3) ~~Nine-Fifteen~~ Fifteen months – Completion of on-site accreditation review, receipt of
23 initial feedback from accrediting agency, plan to address any deficiencies
24 identified developed.
- 25 (4) If a provider's Medicaid enrollment or service delivery contracts are
26 terminated as a result of failure to meet accreditation benchmarks or failure
27 to continue to be nationally accredited, the provider will work with the LME
28 to transition consumers served by the provider to other service providers in
29 an orderly fashion within 60 days of notification by the LME of such failure.
- 30 (5) A provider that has its Medicaid enrollment or service delivery contracts
31 terminated as a result of failure to meet accreditation benchmarks or failure
32 to continue to be nationally accredited may not reapply for enrollment in the
33 Medicaid program or enter into any new service delivery contracts for at
34 least one year following enrollment or contract termination."

35 **SECTION 2.** This act is effective when it becomes law.



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