## **GENERAL ASSEMBLY OF NORTH CAROLINA** SESSION 2011

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## HOUSE BILL 1055\*

	Short Title:	Eliminate LME Provider EndorsementAB (Public)
	Sponsors:	Representatives Burr and Dollar (Primary Sponsors). For a complete list of Sponsors, see Bill Information on the NCGA Web Site.
	Referred to:	Health and Human Services.
		May 23, 2012
1		A BILL TO BE ENTITLED
2		RELATING TO PROVIDER ENDORSEMENT FUNCTIONS OF LOCAL
3		EMENT ENTITIES, AS RECOMMENDED BY THE JOINT LEGISLATIVE GHT COMMITTEE ON HEALTH AND HUMAN SERVICES.
4 5		Assembly of North Carolina enacts:
5 6		ECTION 1. G.S. 122C-114 reads as rewritten:
7		. Powers and duties of the Commission.
8	0	he Commission shall have authority as provided by this Chapter, Chapters 90 and
9		eneral Statutes, and by G.S. 143B-147.
10		he Commission shall adopt rules regarding all of the following:
11	(1	
12	<sup>×</sup>	uniform portal process, for implementation by the Secretary as required
13		under G.S. 122C-112.1(14).
14	(2	2) LME monitoring and endorsement of providers of mental health,
15		developmental disabilities, and substance abuse services.
16	(3	B) LME provision of technical assistance to providers of mental health,
17		developmental disabilities, and substance abuse services.
18	(4	
19		used in G.S. 122C-141. In adopting rules under this subsection, the
20		Commission shall take into account the need to ensure fair competition
21	a	among providers."
22		ECTION 2. 122C-115.4(b)(2) reads as rewritten:
23	(	2) Provider endorsement, monitoring, technical assistance, capacity
24		development, and quality control. An LME may remove a provider's
25 26		endorsement if a provider fails to do any of the following:
20 27		<ul> <li>a. Meet defined quality criteria.</li> <li>b. Adequately document the provision of services.</li> </ul>
28		<ul> <li>b. Adequately document the provision of services.</li> <li>c. Provide required staff training.</li> </ul>
28 29		d. Provide required data to the LME.
30		e. Allow the LME access in accordance with rules established under
31		G.S. 143B-139.1.
32		f. Allow the LME access in the event of an emergency or in response to

- a complaint related to the health or safety of a client. If at anytime the LME has reasonable cause to believe a violation of
- licensure rules has occurred, the LME shall make a referral to the Division



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1		of Health Service Regulation. If at anytime the LME has reasonable cause	e to
2		believe the abuse, neglect, or exploitation of a client has occurred, the LN	мE
3		shall make a referral to the local Department of Social Services, Ch	nild
4		Protective Services Program, or Adult Protective Services Program."	
5		<b>SECTION 3.</b> G.S. 122C-151.4(a) reads as rewritten:	
6	"(a)	Definitions. – The following definitions apply in this section:	
7		(1) "Appeals Panel" means the State MH/DD/SA Appeals Panel establish	ned
8		under this section.	
9		(1a) "Client" means an individual who is admitted to or receiving public servi	ces
10		from an area facility. "Client" includes the client's personal representative	; or
11		designee.	
12		(1b) "Contract" means a contract with an area authority or county program	to
13		provide services, other than personal services, to clients and other recipie	nts
14		of services.	
15		(2) "Contractor" means a person who has a contract or who had a contr	act
16		during the current fiscal year, or whose application for endorsement has be	<del>een</del>
17		denied by an area authority or county program.year.	
18		(3) "Former contractor" means a person who had a contract during the previo	ous
19		fiscal year."	
20		<b>SECTION 4.</b> This act is effective when it becomes law.	