

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2013**

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SENATE BILL 321

Short Title: Contain Counties' Inmate Medical Costs. (Public)

Sponsors: Senators J. Davis, Newton, Goolsby (Primary Sponsors); Bingham, Clark, and Rabin.

Referred to: Health Care.

March 14, 2013

A BILL TO BE ENTITLED
AN ACT TO CAP REIMBURSEMENT BY COUNTIES FOR MEDICAL SERVICES PROVIDED TO INMATES IN COUNTY JAILS AND TO ALLOW COUNTIES TO UTILIZE MEDICAID FOR ELIGIBLE PRISONERS.

The General Assembly of North Carolina enacts:

SECTION 1. Counties shall reimburse those providers and facilities providing approved inmate medical services to inmates in local confinement facilities the lesser amount of either a rate of seventy percent (70%) of the provider's then-current prevailing charge or two times the then-current Medicaid rate for any given service. Each county shall have the right to audit any given provider to determine the actual prevailing charge to ensure compliance with this provision.

This section does apply to vendors providing services that are not billed on a fee-for-service basis, such as temporary staffing. Nothing in this section shall preclude a county from contracting with a provider for services at rates that provide greater documentable cost avoidance for the county than do the rates contained in this section or at rates that are less favorable to the county but that will ensure the continued access to care.

SECTION 2. G.S. 153A-225(a) reads as rewritten:

"(a) Each unit that operates a local confinement facility shall develop a plan for providing medical care for prisoners in the facility. ~~The plan plan:~~

- (1) Shall be designed to protect the health and welfare of the prisoners and to avoid the spread of contagious disease;
- (2) Shall provide for medical supervision of prisoners and emergency medical care for prisoners to the extent necessary for their health and welfare;
- (3) Shall provide for the detection, examination and treatment of prisoners who are infected with tuberculosis or venereal ~~diseases.~~diseases; and
- (4) May utilize Medicaid coverage for eligible prisoners, provided that the plan includes a reimbursement to the State of the State portion of the costs, including the costs of the services provided and any administrative costs to the State's Medicaid program.

The unit shall develop the plan in consultation with appropriate local officials and organizations, including the sheriff, the county physician, the local or district health director, and the local medical society. The plan must be approved by the local or district health director after consultation with the area mental health, developmental disabilities, and substance abuse authority, if it is adequate to protect the health and welfare of the prisoners. Upon a



1 determination that the plan is adequate to protect the health and welfare of the prisoners, the
2 plan must be adopted by the governing body.

3 As a part of its plan, each unit may establish fees of not more than twenty dollars (\$20.00)
4 per incident for the provision of nonemergency medical care to prisoners. In establishing fees
5 pursuant to this section, each unit shall establish a procedure for waiving fees for indigent
6 prisoners."

7 **SECTION 3.** This act becomes effective July 1, 2013.