10A NCAC 27G .7004 is amended as published in 38:12 NCR 810 as follows.

1 2 3

4

10A NCAC 27G .7004 APPEALS REGARDING UTILIZATION REVIEW DECISIONS FOR NON-MEDICAID SERVICES

- 5 (a) This Rule governs appeals by a client, or the client's legally responsible person, made to the Local Management
- 6 Entity (LME) Entity-Managed Care Organization (LME-MCO) Director of utilization review (UR) decisions made
- by the LME to deny, reduce, suspend or terminate a client's non-Medicaid funded services.
- 8 (b) A client may appeal to the LME Director the utilization review decision of a LME to deny, reduce suspend, or
- 9 terminate a non-Medicaid state funded service.
- 10 (e)(b) The LME LME-MCO shall send to the client or client's legally responsible person legal representative(s)
- 11 notification letters regarding utilization review decisions for non-Medicaid funded services. The letter shall be dated
- and mailed no later than the next work business day following the review UR decision to deny, reduce, suspend, or
- 13 terminate a non-Medicaid state funded service. The <u>LME LME-MCO</u> shall separately notify the provider regarding
- 14 the service authorization.
- 15 (d)(c) The letter shall include information regarding the reason for the <u>UR</u> decision and any available <u>service</u> options
- or considerations while the appeal is under review.
- 17 (e)(d) An appeal regarding a non-Medicaid services utilization review decision must be filed only by a client or legal
- 18 representative. Only the client, or the client's legally responsible person, may file an appeal of the non-Medicaid UR
- 19 <u>decision.</u> The appeal must be <u>in writing and</u> received <u>in writing</u> by the <u>LME LME-MCO</u> within 15 <u>working business</u>
- days of the date of the notification letter. The <u>LME LME-MCO</u> shall provide help to an appellant a client who requests
- 21 assistance in filing the appeal.
- 22 (f)(e) The LME LME-MCO shall acknowledge receipt of the appeal in writing in a letter to the appellant client, or
- 23 the client's legally responsible person, dated the next working business day after receipt of the appeal.
- 24 (g)(f) The LME may authorize interim services until the final review decision, as set forth in 10A NCAC 27I .0609,
- 25 is reached.
- 26 (g) The LME-MCO Director shall assign staff to conduct a clinical review of the UR decision.
- 27 (h) The clinical review shall be conducted by an employee(s) or contractor(s) of the LME not involved in the
- 28 <u>utilization review UR</u> decision that is the subject of the appeal. The clinical reviewer(s) clinical credentials shall be at
- least comparable to those of the person who rendered the initial utilization review <u>UR</u> decision.
- 30 (i) The clinical reviewer(s) shall complete a clinical review of the appeal and shall issue a written decision to uphold
- or overturn the original <u>UR</u> decision.
- 32 (j) The LME shall notify the appellant client, or the client's legally responsible person, in writing of the clinical review
- decision in a letter dated and mailed within seven working business days from receipt of the appeal request and shall
- separately notify the provider regarding the service authorization.
- 35 (k) If the clinical review overturns the initial utilization review <u>UR</u> decision, the decision letter shall state the date on
- 36 which the denied service shall be authorized or the date on which the suspended, reduced or terminated service shall
- 37 be reinstated.

1 (l) In cases in which the decision clinical review decision upholds the previous original UR decision, the LME shall 2 inform appellants the client, or the client's legally responsible person, in writing of the opportunity to appeal a decision 3 regarding a non Medicaid service the clinical review decision to the State Division of Mental Health, Developmental 4 Disabilities and Substance Abuse Services Non-Medicaid Appeals Panel according pursuant to 10A NCAC 27I .0600 5 and G.S. 143B 147(a)(9). .0600. 6 7 History Note: Authority G.S. 122C-112.1(a)(29); 143B-147; 8 Eff. July 1, 2008; 9 Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 10 2019. <u>2019;</u> Amended Eff. May 1, 2024. 11

1	10A NCAC 27I	.0601 is amended as published in 38:12 NCR 811 as follows.
2		
3	10A NCAC 27I	.0601 SCOPE
4	(a) The rules of	this Section shall govern appeals made to the Division of decisions made by an area authority or
5	county program	affecting a non-Medicaid eligible client.
6	(b) A non-Medicaid eligible elient client, or the client's legally responsible person, may appeal to the Division Director	
7	the <u>clinical</u> review decision of an area authority or county program to deny, reduce, suspend, or terminate a non	
8	Medicaid state funded service.	
9	(c) An appeal sh	all be filed with the Division only after a client has received a review decision from the area authority
10	or county progra	n.
11	(d)(c) Nothing	in these Rules shall be interpreted as granting a non-Medicaid eligible client the right to appeal
12	decisions of third	party payers to the Division.
13	(e)(d) Non-Medicaid services shall be provided in accordance with G.S. 122C-2. As set forth in G.S. 143B-147(a)(9)	
14	nothing in these	Rules shall be interpreted as granting a non-Medicaid eligible client the right to appeal the findings
15	of the Division by requesting a contested case hearing pursuant to G.S. 150B.	
16	(f)(e) There shall be no reprisal or retaliation to anyone who is a party to an appeal.	
17	(g)(f) The area authority or county program may authorize interim services until the final written decision as set forth	
18	in Rule .0609 of	this Section is reached.
19		
20	History Note:	Authority G.S. 143B-147;
21		Eff. October 1, 2006;
22		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24,
23		2017. <u>2017:</u>

Amended Eff. May 1, 2024.

24

1	10A NCAC 27I	.0602 is amended as published in 38:12 NCR 811 as follows.
2		
3	10A NCAC 27I	.0602 DEFINITIONS
4	As used in the ru	les in this Section, the following terms shall have the meanings specified:
5	(1)	"Director" means the Director of the Division of Mental Health, Developmental Disabilities and
6		Substance Abuse Services.
7	(2)	"Division" means the Division of Mental Health, Developmental Disabilities and Substance Abuse
8		Services.
9	<u>(3)</u>	"Legally Responsible Person" means the same as defined in G.S. 122C-3.
10	<u>(4)</u>	"Within Available Resources" means the same as defined in G.S. 122C-2.
11		
12	History Note:	Authority G.S. 143B-147;
13		Eff. October 1, 2006;
14		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24,
15		2017. <u>2017;</u>
16		Amended Eff. May 1, 2024.
17		

1	10A NCAC 27I .0605 is amended as published in 38:12 NCR 811 as follows.		
2			
3	10A NCAC 27I .0605 <u>DIVISION'S</u> INITIAL RESPONSE TO A DMH/DD/SAS <u>NON-MEDICAID</u>		
4	APPEAL		
5	(a) The Director shall screen the request for appeal to the Division to determine:		
6	(1) if the appeal was reviewed by the area authority or county program according to the area authority		
7	or county program policy and procedures; and		
8	(2) if the appeal includes the denial, reduction, suspension or termination of a non-Medicaid state		
9	funded service:		
10	(3) if the appeal falls within the scope of Rule .0601 of this Section; and		
11	(4) if the appeal was filed in accordance with the requirements of Rule .0603 of this Section.		
12	(b) The Director shall send an acknowledgement letter to the elient, or the client's legally responsible person		
13	and the area authority or county program within 5 business days of receipt of the request for appeal to the Division.		
14	(c) The acknowledgement letter shall specify whether the appeal has been accepted or not. The Division shall accept		
15	an appeal if it meets the standards as set forth in Paragraph (a) of this Rule.		
16	(d) The Director shall notify the area authority or county program and the elient client, or the client's legally		
17	responsible person, whose appeal is accepted for review to forward all documentation considered during the are		
18	authority or county program review to the Division no later than 10 calendar days from the date of the		
19	acknowledgement letter. The acknowledgment letter shall advise the parties that a panel will be convened to Heari		
20	Officer will conduct a hearing.		
21	(e) An appeal that does not meet the criteria as set forth in Paragraph (a) of this Rule shall be returned to the client as		
22	disqualified denied with an explanation of the basis for disqualification. denial.		
23	(f) If the appeal is denied on the basis of Subparagraph (a)(1) of this Rule, the The area authority or county program		
24	shall review the appeal, if the appeal made to the Division is disqualified on the basis of not having been reviewed		
25	according to the area authority or county program's policy and procedures. appeal in accordance with the requirements		
26	of Rule 10A NCAC 27G .7004.		
27	(g) The client shall have 11 calendar days from the date of the area authority or county program clinical review		
28	decision to resubmit the appeal to the Division.		
29			
30	History Note: Authority G.S. 143B-147;		
31	Eff. October 1, 2006;		
32	Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24		
33	2017. <u>2017;</u>		
34	Amended Eff. May 1, 2024.		

1	10A NCAC 27I	.0606 is amended as published in 38:12 NCR 811 as follows.	
2			
3	10A NCAC 27I	.0606 HEARING SCHEDULE AND COMPOSITION OF THE PANEL	
4	(a) The Director	shall convene a five member panel to conduct a hearing for an ensure the Hearing Officer condu	cts
5	appeal that is acc	repted in accordance with the requirements of Rule .0605 of this Section.	
6	(b) The panel m	embers shall consist of the following:	
7	(1)	a provider agency representative who meets the following requirements:	
8		(A) the representative shall be from a provider agency that is not be a party to the appeal; an	ıd
9		(B) the representative shall have clinical expertise in the disability area pertinent to the appe	al;
10	(2)	an employee of an area authority or county program who meets the following requirements:	
11		(A) the employee shall be from an area authority or county program that is not a party to t	he
12		appeal; and	
13		(B) the employee shall have clinical expertise in the disability area pertinent to the appeal;	
14	(3)	two individuals who are members of a consumer and family advisory committee who is not a pa	rty
15		to the appeal; and	
16	(4)	an employee of the Division.	
17	(e)(b) The Hearing Officer shall be an employee of the Division. Division shall serve as the chairperson of the pan		1el
18	and shall be a vo	ting member in the case of a tie.	
19	(d)(c) The Direct	ctor shall forward the record on appeal and all supplemental documentation to the Hearing Office	<u>er</u>
20	chairperson of th	e panel within five days of receipt thereof.	
21	(e)(d) The Direct	tor shall provide a copy of applicable law and rules to the Hearing Officer. chairperson of the pan	el.
22	(f)(e) The Heari	ng Officer chairperson shall schedule a panel hearing including designation of a time and place.	
23	(g)(f) The Hear	ing Officer chairperson shall notify the client, or the client's legally responsible person, other par	1el
24	members and the	e area authority or county program of the time and place no less than 15 calendar days prior to t	he
25	date of the hearing	ng.	
26	(g) The hearing	may be conducted in person or virtually taking into account reasonable accommodations, includi-	ng
27	but not limited to	o, the following:	
28	<u>(1)</u>	compliance with HIPAA requirements;	
29	<u>(2)</u>	accommodation needs of the client;	
30	<u>(3)</u>	State mandated travel restrictions.	
31			
32	History Note:	Authority G.S. 143B-147;	
33		Eff. October 1, 2006;	
34		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 2	24,
35		2017. <u>2017;</u>	
36		Amended Eff. May 1, 2024.	

1	10A NCAC 27I	.0607 is amended as published in 38:12 NCR 811 as follows.
2		
3	10A NCAC 27I	.0607 PANEL HEARING PROCEDURES
4	(a) The chairper	eson of the panel: Hearing Officer:
5	(1)	shall convene the hearing at the prearranged time and place;
6	(2)	may afford the opportunity for rebuttal and summary comments to either of the presenting parties;
7		and
8	(3)	shall conduct proceedings in an orderly manner.
9	(b) The panel: <u>I</u>	Hearing Officer:
10	(1)	may limit the total number of persons presenting for the client and area authority or county program;
11		and
12	(2)	may impose time limits for presentations.
13	(c) Either party	may be represented by a person or attorney of their choice.
14	(d) Prior to the	hearing, the client and the area authority or county program shall:
15	(1)	specify by name and position all individuals who will be present for the hearing;
16	(2)	provide the panel Hearing Officer with requested information; and
17	(3)	when applicable, ensure that representatives of the parties shall be present at the hearing.
18	(e) Any membe	r of the panel The Hearing Officer may address questions to either party.
19	(f) The panel <u>H</u>	earing Officer may obtain any form of technical assistance or consultation relevant to the appeal.
20	(g) No transcrip	ot shall be made and no party shall be allowed to record the proceeding. The panel Hearing Officer
21	may choose to 1	ecord the proceeding for its his or her own use. A tape so made shall be destroyed after the panel
22	Hearing Officer	issues it's the Hearing decision.
23	(h) Witnesses sl	nall not be sworn before testifying.
24		
25	History Note:	Authority G.S. 143B-147;
26		Eff. October 1, 2006;
27		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24,
28		2017. 2017:

Amended Eff. May 1, 2024.

29

1 10A NCAC 27I .0608 is amended as published in 38:12 NCR 811 as follows. 2 3 10A NCAC 27I .0608 PANEL HEARING OFFICER DECISION FINDINGS AND DECISION 4 (a) The panel Hearing Officer's findings and decisions are based on the record and any new evidence that would be 5 material to the issues on appeal. 6 (b) The standard of review for the panel Hearing Officer is whether the decision of the LME-MCO, area authority or 7 county program is supported by evidence presented. 8 (c) The panel shall vote on each specific item being appealed. The Hearing Officer shall consider all issues under 9 appeal. 10 (d) Findings and decisions of the panel shall be by majority vote. 11 (e)(d) Any decision may be rescheduled for a subsequent meeting if the panel Hearing Officer determines that it he 12 or she lacks sufficient information to render a decision at the initial hearing. 13 (f)(e) All panel The Hearing Officer's findings and decisions shall be reached and sent in writing to the client or the 14 client's legally responsible person, and to the LME-MCO, area authority or county program Director within 60 15 calendar days of the written request for appeal to the client, the area authority or county program and the Director. an 16 appeal. 17 18 Authority G.S. 143B-147; History Note: 19 Eff. October 1, 2006; 20 Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24, 21 2017. <u>2017;</u> 22

Amended Eff. May 1, 2024.

1	10A NCAC 27	I .0609 is amended as published in 38:12 NCR 811 as follows.
2		
3	10A NCAC 27	I .0609 FINAL WRITTEN DECISION
4	(a) Upon recei	pt of the panel's Hearing Officer's findings and decisions, the LME-MCO, area authority or county
5	program shall is	ssue a final decision based on those findings. The LMEarea authority or county program shall issue the
6	decision in writ	ing <u>findings</u> within 10 <u>business</u> days of receipt of the panel's <u>Hearing Officer's</u> findings and decisions
7	(b) Neither the	panel Hearing Officer's findings and decisions nor the LME-MCO, area authority or county program
8	final decision sl	nall be interpreted as an agency decision granting a non-Medicaid eligible client the right to appeal by
9	requesting a con	ntested case hearing pursuant to G.S. 150B.
10	(c) The Divis	ion shall report annually to the Commission for Mental Health, Developmental Disabilities and
11	Substance Abus	se Services the number of appeals filed and conducted.
12		
13	History Note:	Authority G.S. 143B-147;
14		Eff. October 1, 2006;
15		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 24
16		2017. <u>2017;</u>
17		Amended Eff May 1 2024

10A NCAC 28F .0101 REGIONS FOR DIVISION INSTITUTIONAL ADMISSIONS

- (a) Except as otherwise provided in rules codified in this Chapter and Chapters 26 through 29 of this Title and except for State-wide programs and cross-regional admissions approved by the Division Director based upon the clinical need of the individual or for the purpose of accessing available beds or services, a person seeking admission to a regional institution of the Division shall be admitted only to the institution which serves the region of the state which includes the person's "county of residence" as defined in G.S. 122C-3.
- (b) For state operated facilities, hospitals and developmental centers, the regions of the state and the counties which constitute the regions are as follows:
 - (1) Western Region: Broughton Hospital, Julian F. Keith Alcohol and Drug Abuse Treatment Center (ADATC), and J. Iverson Riddle Developmental Center shall serve Alleghany, Alexander, Ashe, Avery, Buncombe, Burke, Cabarrus, Caldwell, Catawba, Cherokee, Clay, Cleveland, Davidson, Gaston, Graham, Haywood, Henderson, Iredell, Jackson, Lincoln, Macon, Madison, McDowell, Mecklenburg, Mitchell, Polk, Rowan, Rutherford, Stanly, Surry, Swain, Transylvania, Union, Watauga, Wilkes, Yadkin, and Yancey County;
 - (2) Central Region: Central Regional Hospital, Murdoch Developmental Center, R. J. Blackley ADATC, Whitaker School, Psychiatric Residential Treatment Program (PRTF), and Wright School shall serve Alamance, Anson, Caswell, Chatham, Davie, Durham, Forsyth, Franklin, Granville, Guilford, Halifax, Harnett, Hoke, Lee, Montgomery, Moore, Orange, Person, Randolph, Richmond, Rockingham, Stokes, Vance, Wake, and Warren County; and
 - (3) Eastern Region: Cherry Hospital, Caswell Developmental Center, and Walter B. Jones ADATC shall serve Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Hertford, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson County.
- (c) For state-operated Alcohol and Drug Abuse Treatment Centers (ADATCs) the regions of the state and the counties which constitute the regions are as follows:
 - Western Region: Julian F. Keith ADATC shall serve Alexander, Alleghany, Anson, Ashe, Avery, Buncombe, Burke, Cabarrus, Caldwell, Catawba, Cherokee, Clay, Cleveland, Davidson, Davie, Forsyth, Gaston, Graham, Guilford, Haywood, Henderson, Iredell, Jackson, Lincoln, Macon, Madison, McDowell, Mecklenburg, Mitchell, Montgomery, Polk, Randolph, Rowan, Rutherford, Stanly, Stokes, Surry, Swain, Transylvania, Union, Watauga, Wilkes, Yadkin, and Yancey County;
 Eastern Region: Walter B. Jones ADATC shall serve Alamance, Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Caswell, Chatham, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Durham, Edgecombe, Franklin, Gates, Granville, Greene, Halifax, Harnett,

Hertford, Hoke, Hyde, Johnston, Jones, Lee, Lenoir, Martin, Moore, Nash, New Hanover,

1		Northampton, Onslow, Orange, Pamlico, Pasquotank, Pender, Perquimans, Person, Pitt, Richmond
2		Robeson, Rockingham, Sampson, Scotland, Tyrrell, Vance, Wake, Warren, Washington, Wayne
3		and Wilson County.
4		
5	History Note:	Authority G.S. 122C-3; 143B-147; <u>S.L. 2023-3;</u>
6		Eff. February 1, 1976;
7		Amended Eff. June 1, 2009; April 1, 1990; July 1, 1983;
8		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24
9		2019. <u>2019:</u>
10		Amended Eff. May 1, 2024.
11		