

**DMA Rulemaking Update**  
**Periodic Review and Expiration of Existing Rules Project**  
MCAC Meeting, 9/22/2017

**DMA Rulemaking Coordinator:** Virginia Niehaus, JD, MPH - [virginia.niehaus@dhhs.nc.gov](mailto:virginia.niehaus@dhhs.nc.gov)

**Periodic Review and Expiration of Existing Rules Project** (required by NCGS § 150B-21.3A)

- Requires *all* State agencies to review and readopt administrative rules every 10 years
  - Phase 1 – Review and classification of rules
  - Phase 2 – Readoption (*or* repeal) of rules

**Rule Readoption Deadlines for DMA Administrative Rules**

- Chapters 21 and 22 – March 31, 2018
- Chapters 23 and 25 – March 31, 2019

**Project Status Overview**

- SFY 2018 readoption work: 82 rules in Chapters 21 and 22
- SFY 2019 readoption work: 42 rules in Chapters 23 and 25

There are two phases to the periodic review process:

- **Phase 1** (which DMA has already completed for all four Chapters) was:
  - To review the rules and classify them in 3 groups
    - Necessary with substantive public interest
    - Necessary without substantive public interest
    - Unnecessary
  - Rules deemed unnecessary expired from the administrative code.
  - Rules deemed necessary *without* substantive public interest remain in the code.
  - Rules deemed necessary *with* substantive public interest remain in the code, but must be readopted *even if we do not amend them*.
- **Phase 2** is the readoption of rules deemed necessary *with* substantive public interest.

During the readoption process, staff:

- Amended rules to reflect current law and practices;
- Repealed rules that are no longer useful or that are now covered in State Plan or Clinical Coverage policy (both additional authorities have the force and effect of rule); and
- Assessed the fiscal impact of rules and drafted fiscal notes for OSBM review.

Next Steps in SFY 2018:

- Publish notice in the NC register in mid-December of 2017 for Chapter 21 and 22 readoption
- Accept comments from mid-December to mid-February (60 days)
- Readopt Chapter 21 and 22 rules by the end of March 2018
- Begin reviewing rules for readoption in Chapters 23 and 25 in Spring 2018

**NOTE:** *DMA rules are not being amended to align with Medicaid Transformation at this time. The contractor Manatt will assist with developing Medicaid Transformation rules for the Division of Health Benefits (DHB).*

**DHB Rulemaking Coordinator:** Tabitha Bryant, JD, MPA – [Tabitha.Bryant@dhhs.nc.gov](mailto:Tabitha.Bryant@dhhs.nc.gov)

## Overview of DMA Administrative Rules

### Chapter 21 – Medical Assistance Administration

- Subchapter 21A – General Program Administration (Eligibility Appeals)
- Subchapter 21B – Eligibility Determination (Eligibility Rules)
- Subchapter 21D – Estate Recovery

### Chapter 22 – Medical Assistance Eligibility

- Subchapter 22A – Identifying Information (Scope)
- Subchapter 22B – Provider Issues (Enrollment, Standards, Claim Filing, etc.)
- Subchapter 22C – Amount, Duration, and Scope of Assistance (Amount of Services and Cost Sharing)
- Subchapter 22D – Recipient Issues (Copayment)
- Subchapter 22E – Cooperative Agreements (with other Divisions)
- Subchapter 22F – Program Integrity
- Subchapter 22G – Reimbursement Plans
- Subchapter 22H – Appeals Procedures (Beneficiary appeals)
- Subchapter 22I – Medicaid Reimbursement and Administrative Review Process
- Subchapter 22J – Medicaid Appeals Procedures (Provider appeals)
- Subchapter 22K – Qualified Providers (Presumptive eligibility determinations)
- Subchapter 22L – Managed Care and Prepaid Plans
- Subchapter 22N – Provider Enrollment
- Subchapter 22O – Medical Assistance Provided

### Chapter 23 – Medical Assistance Administration

- Subchapter 23A – General Program Administration
- Subchapter 23B – Benefits (MID card)
- Subchapter 23C – Application for Medicaid Benefits
- Subchapter 23D – Medicaid Eligibility Groups and Classification
- Subchapter 23E – Medicaid Eligibility Requirements
- Subchapter 23G – Medicaid Certification, Correction of Eligibility, and Redetermination of Eligibility
- Subchapter 23H – Confidentiality and Access to Client Records

### Chapter 24 – Reserved for future codification

### Chapter 25 – Medical Assistance Provided

- Subchapter 25A – General (Medical Services)
- Subchapter 25C – Behavioral Health/Substance Abuse
- Subchapter 25H – Dental Services
- Subchapter 25K – Drugs/Pharmacy
- Subchapter 25M – Facilities
- Subchapter 25P – Medical-Surgical