



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

DAVE RICHARD
DEPUTY SECRETARY FOR MEDICAL ASSISTANCE

MEMORANDUM

TO: Office of State Budget and Management

FROM: Virginia R. Niehaus, DMA Rulemaking Coordinator

DATE: October 25, 2017

RE: Federal Certification for N.C. Department of Health and Human Services,
Division of Medical Assistance (DMA) Rule Readoption
Subchapter 22J – Title XIX Appeals Procedure

Rule-making Coordinator's Certificate

As Required by GS 150B-19.1(g)
For Proposed Permanent and Temporary Rules Adopted to
Implement a Federal Law or which upon Receipt of Federal Funds is Conditioned

The following rules within 10A NCAC 22J are proposed for readoption to be compatible with federal law governing provider appeals:

1. 10A NCAC 22J .0102, .0103, and .0104 apply to provider reconsideration reviews and petitions for contested case hearings. Regulation by the State of North Carolina of these provider appeal matters is subject to the provisions of 42 USC 1396b (Payment to States) and 42 CFR 455.512 (Medicaid RAC provider appeals). The readoption of 10A NCAC 22J .0102, .0103 and .0104 is necessary to comply with these federal laws.
2. 10A NCAC 22J .0105 applies to recoupment of overpayments and erroneous payments. Regulation by the State of North Carolina of recoupment of overpayments and erroneous payments is subject to the provisions of 42 USC 1396b(d)(2) (Payment to States). The readoption of 10A NCAC 22J .0105 is necessary to comply with this federal law.

3. 10A NCAC 22J .0106 applies to provider billing of patients who are Medicaid recipients. Regulation by the State of North Carolina of provider billing of patients who are Medicaid recipients is subject to the provisions of 42 CFR 433.139 (Payment of claims), 42 CFR 447.15 (Acceptance of State payment as payment in full), and 42 CFR 447.52(e) (Cost sharing). The readoption of 10A NCAC 22J .0106 is necessary to comply with these federal laws.