

# North Carolina Medicaid Special Bulletin

An Information Service of the Division of  
Medical Assistance

Visit DMA on the Web at  
<http://www.ncdhhs.gov/dma>



**August 2016**

---

**Attention  
All Providers**

## **Limited Reimbursement for Qualified and Undocumented Aliens**

*Providers are responsible for informing their billing agency of information in this bulletin.  
CPT codes, descriptors, and other data only are copyright 2016 American Medical  
Association.  
All rights reserved. Applicable FARS/DFARS apply*

In accordance with [42 CFR 440.255](#); N.C. Division of Medical Assistance (DMA) will reimburse for those services provided by an enrolled Medicaid provider to a Qualified Alien as defined in [8 U.S.C. 1641](#) and is subject to the five-year bar ([8 U.S.C. 1613](#)); and limited emergency services provided to an Undocumented Alien ([42 CFR 440.255 \(c\)](#)).

**This reimbursement methodology will be applied to services rendered on or after Oct. 1, 2016.** The provider can determine the Qualified or Undocumented Alien by the fourth character (class code) of the benefit code printed on the N.C. Medicaid card. The services covered by eligibility class codes are as follows:

**I. Qualified Aliens subject to the 5-year bar (Class Code H, R):**

- 1) As defined in [42 CFR 489.24](#), an emergency medical condition is, after sudden onset, a medical condition (including emergency labor and delivery) “manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in:
  - (i) Placing the patient’s health in serious jeopardy;
  - (ii) Serious impairment to bodily functions; or
  - (iii) Serious dysfunction of any bodily organ or part”
- 2) Services for pregnant women which are included in the approved North Carolina State Plan. These services include routine prenatal care, labor and deliver, and routine post-partum care. Reimbursement for State Plan services for pregnant women shall be at the effective Medicaid fee schedule at the time the service is rendered.

**II. Undocumented Aliens (Class Code F, O):**

- 1) As defined in [42 CFR 489.24](#), an emergency medical condition is, after sudden onset, a medical condition (including emergency labor and delivery) “manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in:
  - (i) Placing the patient’s health in serious jeopardy;
  - (ii) Serious impairment to bodily functions; or
  - (iii) Serious dysfunction of any bodily organ or part”

**III. Reimbursement Methodology for Emergency Services**

The N.C. Medicaid program will pay for medically necessary services of both undocumented and qualified aliens covered under this reimbursement policy, up to the point at which a medical emergency condition no longer exists. Aliens covered under this policy are those Medicaid recipients whose eligibility benefit code has a fourth character (Medicaid Class Code) equal to F; H; O; or R. The provider’s claim shall be reimbursed only for the actual days that an emergency medical condition exists in the case of an

inpatient hospitalization. If the condition is an emergency labor and delivery, then Medicaid's reimbursement shall be the appropriate DRG for the emergency labor and delivery discharge.

### **Hospital Outpatient Services**

If the emergency medical condition is treated and the patient stabilized in the outpatient hospital setting, the Medicaid reimbursement will be made for only those services medically necessary for the treatment of the emergency medical condition. There will be no reimbursement of services post-stabilization.

If the alien presents at the Emergency Department (ED) with a medical emergency condition that requires an admission to the hospital inpatient unit while the medical emergency condition exists, then all of the outpatient charges incurred prior to admission shall be included on the inpatient claim when billed to Medicaid. The Medicaid reimbursement will be for the actual inpatient days the medical emergency condition existed, not to exceed the full DRG amount.

For the alien who received services for a medical emergency condition in the ED and is admitted to the hospital's inpatient units after the medical emergency condition no longer exists, then the outpatient services received prior to the inpatient admission shall be billed as an outpatient claim and no inpatient charge(s) shall be billed to Medicaid since an undocumented alien does not have non-emergent medical benefits.

### **Provider Reimbursement**

**DMA, 919-814-0060**

---

**Sandra Terrell, MS, RN**  
**Director of Clinical**  
**Division of Medical Assistance**  
**Department of Health and Human Services**

---

**Paul Guthery**  
**Executive Account Director**  
**CSRA**