

1 10A NCAC 22F .0104 is proposed for readoption without substantive change as follows:

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3 **10A NCAC 22F .0104 PREVENTION**

4 (a) Provider Education. The Division ~~may, may at its discretion,~~ or shall upon the request of a provider, conduct
5 on-site educational visits to assist a provider in complying with requirements of the Medicaid Program.

6 (b) Provider Manuals. The Division ~~shall will~~ prepare and make available ~~furnish each provider with~~ a provider
7 manual containing at least the following information:

- 8 (1) amount, duration, and scope of assistance;
- 9 (2) participation standards;
- 10 (3) penalties;
- 11 (4) reimbursement rules; and
- 12 (5) claims filing instructions.

13 (c) Prepayment Claims Review. The Division ~~shall will~~ check eligibility, duplicate payments, third party liability,
14 and unauthorized or uncovered services by means of prepayment review, computer edits and audits, and investigation.
15 ~~other appropriate methods of review.~~

16 (d) Prior Approval. The Division shall require prior approval for certain specified covered services as set forth in the
17 Medicaid State Plan.

18 (e) Claim Forms. Claim forms shall contain ~~The Division's provider claim forms shall include~~ the following
19 requirements that for provider participation and payment. ~~These requirements shall be binding on upon~~ the Division
20 and the providers:

- 21 (1) ~~medicaid~~ Medicaid payment constitutes payment in full; ~~full.~~
- 22 (2) ~~charges~~ Charges to Medicaid recipients for the same items and services shall not be higher than for
23 private paying ~~patients;~~ patients.
- 24 (3) ~~the~~ The provider shall keep all records as necessary to support the services claimed for
25 ~~reimbursement;~~ reimbursement.
- 26 (4) ~~the~~ The provider shall fully disclose the contents of his Medicaid financial and medical records to
27 the Division and its ~~agents;~~ agents.
- 28 (5) ~~medicaid~~ Medicaid reimbursement shall only be made for medically necessary care and services as
29 defined in 10A NCAC 25A .0201; and ~~services.~~
- 30 (6) ~~the~~ The Division may suspend or terminate a provider for violations of Medicaid laws, federal
31 regulations, the rules of this Subchapter, the provider administrative participation agreement, the
32 Medicaid State Plan, and Medicaid Clinical Coverage policies. ~~policies, or guidelines.~~

33 (f) ~~Pharmacy and Institutional~~ Provider Administrative Participation Agreements. All ~~institutional and pharmacy~~
34 providers shall ~~be required to~~ execute a written participation agreement as a condition for participating in the N.C.
35 State ~~Medicaid~~ Medical Assistance Program.

36 (g) The Recipient Management LOCK-IN System. The ~~Department of Health and Human Services, Division of~~
37 ~~Medical Assistance,~~ will shall establish a lock-in system to control recipient overutilization of provider services. A

1 lock-in system restricts an overutilizing recipient to the use of one physician and one pharmacy, of the recipient's
2 choice, provided the recipient's physician is able to ~~can~~ refer the recipient to other physicians as medically necessary,
3 as defined in 10A NCAC 25A .0201. ~~necessary.~~

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5 *History Note:* Authority G.S. 108A-25(b); 108A-63; 108A-64; 42 C.F.R. Part 455; 42 CFR 455.23;

6 Eff. May 1, 1984; 1984.

7 Readopted Eff. May 1, 2018.

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