GENERAL ASSEMBLY OF NORTH CAROLINA **SESSION 2001**

Η **HOUSE BILL 109**

Short Title:	Reimbursement for Marriage/Family Therapists.	(Public)
Sponsors:	Representatives Alexander; Earle, Easterling, Fox, Goodwin, Hall, Hill, Insko, Jarrell, Luebke, Preston, Underhill, Wainwrig Wright, and Yongue.	-
Referred to:	Rules, Calendar, and Operations of the House.	
	February 14, 2001	
FAMILY TREATM The General SI "§ 135-40.7 be (a) Exmental illnes the same dephysical illne (b) No services for covered under care, output	a. Licensed psychiatric hospitals;b. Licensed psychiatric beds in licensed general hospita	FOR THE ICY. Intal health reatment of e subject to benefits for g necessary ess shall be for inpatient spitalization
	 c. Licensed residential treatment facilities; d. Area Mental Health, Developmental Disabilities, and Abuse Authorities; e. Licensed intensive outpatient treatment programs; an 	
(2	f. Licensed partial hospitalization programs.	lu

Licensed chemical dependency units in licensed psychiatric 1 a. 2 hospitals: 3 Licensed chemical dependency hospitals; b. Licensed chemical dependency treatment facilities; 4 c. 5 Area Mental Health, Developmental Disabilities, and Substance d. 6 Abuse Authorities: 7 Licensed intensive outpatient treatment programs; e. 8 f. Licensed partial hospitalization programs; and 9 Medical detoxification facilities or units. g. 10 (c) Notwithstanding any other provisions of this Part, the following providers and no others may provide necessary care and treatment for mental health under this 11 12 section: 13 (1) Psychiatrists who have completed a residency in psychiatry approved 14 by the American Council for Graduate Medical Education and who are 15 licensed as medical doctors or doctors of osteopathy in the state in 16 which they perform and services covered by the Plan; 17 (2) Licensed or certified doctors of psychology; 18 (3) Certified clinical social workers: 19 (3a) Licensed professional counselors; Certified clinical specialists in psychiatric and mental health nursing; 20 (4) 21 (4a) Nurses working under the employment and direct supervision of such physicians, psychologists, or psychiatrists; 22 Repealed by Session Laws 1997-512, s. 14. 23 (5) Psychological associates with a masters degree in psychology under 24 (6) the direct employment and supervision of a licensed psychiatrist or 25 licensed or certified doctor of psychology; 26 27 (7),(8) Repealed by Session Laws 1997-512, s. 14. Certified fee-based practicing pastoral counselors; and 28 (9) 29 Licensed physician assistants under the supervision of a licensed (10)30 psychiatrist and acting pursuant to G.S. 90-18.1 or the applicable laws 31 and rules of the area in which the physician assistant is licensed or 32 certified.certified; and 33 (11)Licensed marriage and family therapists. Notwithstanding any other provisions of this Part, the following providers 34 35 and no others may provide necessary care and treatment for chemical dependency under this section: 36 37 The following providers with appropriate substance abuse training and (1) experience in the field of alcohol and other drug abuse as determined 38 39 by the mental health case manager, in facilities described in subdivision (b)(2) of this section, in day/night programs or outpatient 40 treatment facilities licensed after July 1, 1984, under Article 2 of 41 42 Chapter 122C of the General Statutes or in North Carolina area programs in substance abuse services are authorized to provide 43 treatment for chemical dependency under this section: 44

1		a.	Licensed physicians including, but not limited to, physicians
2			who are certified in substance abuse by the American Society of
3		_	Addiction Medicine (ASAM);
4		b.	Licensed or certified psychologists;
5		c.	Psychiatrists;
6		d.	Certified substance abuse counselors working under the direct
7			supervision of such physicians, psychologists, or psychiatrists;
8		e.	Psychological associates with a masters degree in psychology
9			working under the direct supervision of such physicians,
10			psychologists, or psychiatrists;
11		f.	Nurses working under the direct supervision of such physicians,
12			psychologists, or psychiatrists;
13		g.	Certified clinical social workers;
14		h.	Certified clinical specialists in psychiatric and mental health
15			nursing;
16		i.	Licensed professional counselors;
17		j.	Certified fee-based practicing pastoral counselors; and
18		k.	Substance abuse professionals certified under Article 5C of
19			Chapter 90 of the General Statutes. Statutes; and
20		1.	Licensed marriage and family therapists.
21	(2)	_	ollowing providers with appropriate substance abuse training and
22	(-)		ence in the field of alcohol and other drug abuse as determined
23		_	mental health case manager are authorized to provide treatment
24		•	emical dependency in outpatient practice settings:
25		a.	Licensed physicians who are certified in substance abuse by the
26		u.	American Society of Addiction Medicine (ASAM);
27		b.	Licensed or certified psychologists;
28		c.	Psychiatrists;
29		d.	Certified substance abuse counselors working under the
30		u.	employment and direct supervision of such physicians,
31			psychologists, or psychiatrists;
32		0	Psychological associates with a masters degree in psychology
33		e.	, ,
			working under the employment and direct supervision of such
34		f.	physicians, psychologists, or psychiatrists;
35		1.	Nurses working under the employment and direct supervision
36			of such physicians, psychologists, or psychiatrists;
37		g.	Certified clinical social workers;
38		h.	Certified clinical specialists in psychiatric and mental health
39			nursing;
40		i.	Licensed professional counselors;
41		j.	Certified fee-based practicing pastoral counselors;
42			1. Substance abuse professionals certified under Article 5C
43			of Chapter 90 of the General Statutes; and
44		<u>j1.</u>	Licensed marriage and family therapists; and

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k. In the absence of meeting one of the criteria above, the Mental Health Case Manager could consider, on a case-by-case basis, a provider who supplies:

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1. Evidence of graduate education in the diagnosis and treatment of chemical dependency, and

6 7 2. Supervised work experience in the diagnosis and treatment of chemical dependency (with supervision by an appropriately credentialed provider), and

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3. Substantive past and current continuing education in the diagnosis and treatment of chemical dependency commensurate with one's profession.

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Provided, however, that nothing in this subsection shall prohibit the Plan from requiring the most cost-effective treatment setting to be utilized by the person undergoing necessary care and treatment for chemical dependency.

- Benefits provided under this section shall be subject to a case management program for medical necessity and medical appropriateness consisting of (i) precertification of outpatient visits beyond 26 visits each Plan year, (ii) all electroconvulsive treatment, (iii) inpatient utilization review through preadmission and length-of-stay certification for nonemergency admissions to the following levels of care: inpatient units, partial hospitalization programs, residential treatment centers, chemical dependency detoxification and treatment programs, and intensive outpatient programs, (iv) length-of-stay certification of emergency inpatient admissions, and (v) a network of qualified, available providers of inpatient and outpatient psychiatric and chemical dependency treatment. Care which is not both medically necessary and medically appropriate will be noncertified, and benefits will be denied. Where qualified preferred providers of inpatient and outpatient care are reasonably available, use of providers outside of the preferred network shall be subject to a twenty percent (20%) coinsurance rate up to five thousand dollars (\$5,000) per fiscal year to be assessed against each covered individual in addition to the general coinsurance percentage and maximum fiscal year amount specified by G.S. 135-40.4 and G.S. 135-40.6.
- (e) For the purpose of this section, 'emergency' is the sudden and unexpected onset of a condition manifesting itself by acute symptoms of sufficient severity that, in the absence of an immediate psychiatric or chemical dependency inpatient admission, could imminently result in injury or danger to self or others."
- **SECTION 2.** This act becomes effective October 1, 2001, and applies to claims for payment or reimbursement for services rendered on or after that date.