

1 10A NCAC 13C .0206 is adopted with changes under temporary procedures as follows:

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3 **10A NCAC 13C .0206 REPORTING REQUIREMENTS**

4 (a) The Department shall establish the lists of the statewide 20 most common outpatient imaging procedures and 20
5 most common outpatient surgical procedures performed in the ambulatory surgical facility setting to be used for
6 reporting the data required in Paragraphs ~~(b) (c) through (e)~~ and (d) of this Rule. The lists shall be based ~~on~~ upon data
7 provided by the certified statewide data processor. The Department shall make the lists available on its ~~website at:~~
8 <http://www.ncdhhs.gov/dhsr/ahc> ~~website.~~

9 ~~(b)~~ All information required by this Rule shall be posted on the Department's website at:
10 <http://www.ncdhhs.gov/dhsr/ahc> and may be accessed at no cost.

11 ~~(b) (c)~~ (c) In accordance with G.S. 131E-214.13 and quarterly per ~~year~~ year, all licensed ambulatory surgical facilities
12 shall report the data required in Paragraph ~~(e)~~ (d) of this Rule related to the statewide 20 most common outpatient
13 imaging procedures and the statewide 20 most common outpatient surgical procedures to the certified statewide data
14 processor in a format provided by the certified statewide processor. This report shall include the related primary CPT
15 and HCPCS codes. The data reported shall be from the quarter ending three months ~~previous~~ prior to the date of
16 reporting.

17 ~~(e) (d)~~ (d) The report as described in Paragraphs ~~Paragraph~~ Paragraph ~~(b) (c)~~ of this Rule shall be specific to each reporting
18 ambulatory surgical facility and shall include:

- 19 (1) the average gross charge for each ~~DRG CPT code~~ or procedure if all charges are paid in full without
20 any portion paid by a public or private third party;
- 21 (2) the average negotiated settlement on the amount that will be charged for each ~~DRG CPT code~~ or
22 procedure as required for patients defined in Paragraph ~~Subparagraph (e)(1)~~ (d)(1) of this Rule. The
23 average negotiated settlement ~~is to~~ shall be calculated using the average amount charged all patients
24 eligible for the facility's financial assistance policy, including self-pay patients;
- 25 (3) the amount of Medicaid reimbursement for each ~~DRG CPT code~~ or procedure, including all
26 supplemental payments to and from the ambulatory surgical facility;
- 27 (4) the amount of Medicare reimbursement for each ~~DRG CPT code~~ or procedure; and
- 28 (5) on behalf of patients who are covered by a Department of Insurance licensed third-party and teachers
29 and State employees, ~~report~~ the lowest, average, and highest amount of payments made for each
30 ~~DRG CPT code~~ or procedure by each of the facility's top five largest health insurers.
- 31 (A) each ambulatory surgical facility shall determine its five largest health insurers based on
32 the dollar volume of payments received from those insurers;
- 33 (B) the lowest amount of payment shall be reported as the lowest payment from each of the
34 five insurers on the ~~DRG CPT code~~ or procedure;
- 35 (C) the average amount of payment shall be reported as the arithmetic average of each of the
36 five health insurers payment amounts;

1 (D) the highest amount of payment shall be reported as the highest payment from each of the
2 five insurers on the ~~DRG~~ CPT code or procedure; and

3 (E) the identity of the top five largest health insurers shall be redacted prior to submission.

4 (e) The data reported, as defined in Paragraphs ~~(b) through (e)~~ (c) and (d) of this Rule, shall reflect the payments
5 received from patients and health insurers for all closed accounts. For the purpose of this Rule, ~~closed accounts~~
6 “closed accounts” are patient accounts with a zero balance at the end of the data reporting period.

7 (f) A minimum of three data elements shall be required for reporting under Paragraph ~~(b)~~ (c) of this Rule.

8 (g) The information submitted in the report shall be in compliance with the federal ~~“Health~~ Health Insurance
9 Portability and Accountability Act of ~~1996.~~ 45 CFR Part 164.

10 (h) The Department shall provide all specific ambulatory surgical facility data reported pursuant to this Rule on its
11 website.

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13 *History Note:* Authority ~~G.S.131E-214.4;~~ G.S. 131E-147.1; 131E-214.4; 131E-214.13; S.L. 2013-382(s.10.1);
14 S.L. 2014-100; 2014-100(s. 12G.2);

15 *Temporary Adoption Eff. December 31, 2014.*