



# North Carolina Department of Public Safety

## Juvenile Justice and Delinquency Prevention

Roy Cooper, Governor  
Eddie M. Buffaloe, Jr., Secretary

William L. Lassiter, Deputy Secretary

### MEMORANDUM

**TO:** Chairs of the Joint Legislative Oversight Committee on Justice and Public Safety  
Chairs of the Senate Appropriation Subcommittee on Justice and Public Safety  
Chairs of the House Appropriation Subcommittee on Justice and Public Safety  
Fiscal Research Division

**FROM:** Eddie M. Buffaloe, Jr., Secretary   
William L. Lassiter, Deputy Secretary 

**RE:** Medical Cost Containment Report for Juvenile Justice [1<sup>st</sup> Quarter, 2024; January through March]

**DATE:** May 1, 2024

Pursuant to NC General Statute § 143B-802 (c), "The Department of Public Safety shall report quarterly to the Joint Legislative Oversight Committee on Justice and Public Safety and the chairs of the House of Representatives and Senate Appropriations Committees on Justice and Public Safety on:

- (1) The percentage of the total juvenile offenders requiring hospitalization or hospital services who receive that treatment at each hospital.
- (2) The volume of scheduled and emergent services listed by hospital and, of that volume, the number of those services that are provided by contracted and noncontracted providers.
- (3) The volume of scheduled and emergent admissions listed by hospital and, of that volume, the percentage of those services that are provided by contracted and noncontracted providers.
- (4) The volume of inpatient medical services provided to Medicaid-eligible juvenile offenders, the cost of treatment, the estimated savings of paying the nonfederal portion of Medicaid for the services, and the length of time between the date the claim was filed and the date the claim was paid.
- (5) The status of the implementation of the claims processing system and efforts to address the backlog of unpaid claims.
- (6) The hospital utilization, including the amount paid to individual hospitals, the number of juvenile offenders served, the number of claims, and whether the hospital was a contracted or noncontracted facility.
- (7) A list of hospitals under contract.
- (8) The reimbursement rate for contracted providers. The Department shall randomly audit high-volume contracted providers to ensure adherence to billing at the contracted rate."

**Mailing Address:**  
4212 Mail Service Center  
Raleigh, NC 27699-4212

[www.ncdps.gov](http://www.ncdps.gov)



**Office Location:**  
3010 Hammond Business Place  
Raleigh, NC 27603  
Phone: 919-733-3388

An Equal Opportunity Employer

The following data is based on available information for the period starting January 1, 2024, and ending on March 31, 2024.

**1. The percentage of the total juvenile offenders requiring hospitalization or hospital services who receive that treatment at each hospital.**

There were 57 juveniles from the 1<sup>st</sup> quarter of 2024 with billing claims for treatment or diagnostics at a community hospital or affiliated setting with 4 claims submitted for payment during the quarter.

All hospitals comply with the mandated rates of two times Medicaid rate or seventy percent of prevailing rates. All claims were processed in a timely manner by PBGA.

**2. The volume of scheduled and emergent services listed by hospital and, of that volume, the number of those services that are provided by contracted and noncontracted providers.**

Figure 1 below indicates the number of hospitals and related facilities providing emergent services and observational services provided in 1<sup>st</sup> quarter, 2024.

**Figure 1**

01-01-2024 Thru 03-31-2024	Emergent/ER	Scheduled	Total	Percentage
CONTRACT HOSPITALS	1	19	20	35%
NON-CONTRACT HOSPITALS	27	10	37	65%
<b>Grand Total</b>	<b>28</b>	<b>29</b>	<b>57</b>	<b>100%</b>

**3. The volume of scheduled and emergent admissions listed by hospital and, of that volume, the percentage of those services that are provided by contracted and noncontracted providers.**

Juvenile Justice had 57 juveniles receive hospital services during the 1<sup>st</sup> quarter. 20 juveniles were served by contracted providers and 37 were served by non-contracted providers.

**4. The volume of inpatient medical services provided to Medicaid-eligible juvenile offenders, the cost of treatment, the estimated savings of paying the nonfederal portion of Medicaid for the services, and the length of time between the date the claim was filed and the date the claim was paid.**

Of the 57 juveniles who received hospital services during the 1<sup>st</sup> quarter, 1 juvenile received inpatient hospital services. Claims were not posted in the 1<sup>st</sup> quarter cycle.

**5. The status of the implementation of the claims processing system and efforts to address the backlog of unpaid claims.**

The DPS Controller's Office is providing on-going updates regarding the resolution of any remaining backlogged claims.

**6. The hospital utilization, including the amount paid to individual hospitals, the number of juvenile offenders served, the number of claims, and whether the hospital was a contracted or noncontracted facility.**

Hospital/Facility	Contracted	Claims Paid	Number of Juveniles Served	Number of Claims Submitted	Total Charged	Total Paid
CFVHS ED Physicians	N	1	1	1	\$552.00	\$ 277.28
Nash Hospitals Incorporated	Y	2	1	2	\$2239.00	\$859.86
Purvis-Moyer Foot and Ankle	N	1	1	1	\$4910.00	\$2,081.64
<b>Total</b>		<b>4</b>	<b>3</b>	<b>4</b>	<b>\$7701.00</b>	<b>\$ 3,218.78</b>

Due to the size and staff structure of Juvenile Justice, there is not a comparable system, i.e., OPUS or Utilization Review Section. All medical claims are processed via paper claims by business officers at each Youth Development Center location. PGBA and DPS have created a workflow to accommodate the submission of hard copy claims.

#### 7.A list of hospitals under contract.

Currently, PGBA confirms contracted hospitals and affiliates with DPS Purchasing and Contracts. The quarterly data submitted by PGBA confirms payment at the legislatively mandated rate of two times Medicaid or 70% of prevailing charges.

#### 8.The reimbursement rate for contracted providers.

Professional Service Providers		
Provider Name	TIN	Contract Rate
BERTIE MEMORIAL HOSPITAL	562072002	70% of billed or 200% Medicare (lesser of)
BLUE RIDGE HEALTHCARE	560529976	70% of billed or 200% Medicare (lesser of)
BOYLAN BROWNING PLACE	461416986	76.5% of billed charges
CALDWELL MEMORIAL HOSPITAL	560554202	76.5% of billed charges
CAROLINA DIGESTIVE HEALTH	020777195	70% of billed or 200% Medicare (lesser of)
CAROLINA EVE CARE OF LINCOLN	020625277	70% of billed or 200% Medicaid (lesser of)
CAROLINA ONCOLOGY ASSOCIATES	561279668	70% of billed or 200% Medicare (lesser of)
CATAWBA VALLEY MEDICAL CENTER	560789196	70% of billed or 200% Medicaid (lesser of)
DURHAM DIAGNOSTIC IMAGING LLC	562272517	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH	562003393	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH BEAUFORT	452436270	70% of billed or 200% Medicare (lesser of)
EAST CAROLINA HEALTH CHOWAN	562101090	70% of billed or 200% Medicare (lesser of)
FIRSTHEALTH	561936354	62% of billed or 260% Medicaid (lesser of)
FOOT AND ANKLE ASSOCIATES	830339604	70% of billed or 235% Medicaid (lesser of)
GLOBAL DIAGNOSTICS	582182663	95% of billed charges
HANGER P & O INC	232582601	100% of Medicaid
KINSTON COMMUNITY HEALTH CTR	561833275	70% of billed or 200% Medicaid (lesser of)
MISSION HEALTH MAUZV PHILLIPS	832048759	70% of billed or 200% Medicaid (lesser of)
NAPHCARE	581823464	100% of Contractual Fee Schedule
NC HEART AND VASCULAR	561509260	76.5% of billed charges
NEW HANOVER REGIONAL MEDICAL CENTER	560887181	70% of billed or 200% Medicare (lesser of)
OUTER BANKS HOSPITAL FAMILY MEDICINE	270484506	70% of billed or 200% Medicare (lesser of)
PITT GREENE CENTER FOR HEARING	200708208	70% of billed or 200% Medicaid (lesser of)
RALEIGH MEDICAL GROUP	561166754	70% of billed or 260% Medicaid (lesser of)
REHAB REVOLUTION	274460800	70% of billed or 260% Medicaid (lesser of)
ROYAL OAK DENTAL GROUP	810865814	90% of billed charges
UNC CARDIOLOGY	271081647	76.5% of billed charges
UNC CH HEMOPHILIA TREATMENT CENTER	383747383	76.5% of billed charges
UNC FACULTY PHYSICIANS	561732213	76.5% of billed charges
UNC FERTILITY LLC	455174142	70% of billed or 200% Medicaid (lesser of)
UNC HEALTH CARE	352412005	76.5% of billed charges

UNC ORAL ANOMAXILLOFACIA	561883003	not
UNC PHYSICIANS GROUP PRACTICES II LLC	852823886	76.5% of billed charges
UNC PHYSICIANS NETWORK	271081647	76.5% of billed charges
UNC SCHOOL OF DENTISTRY	5613 19 745	not
UNC VASCULAR ACCESS CENTER	800818882	76.5% of billed charges
UNIV OF NC HOSPITALS	561118388	76.5% of billed charges
VIDANT MEDICAL GROUP	383740839	70% of billed or 200% Medicare (lesser of)