



## INTRODUCTION

Last Thursday was the General Assembly's crossover deadline, the date by which bills without a financial element must move from one chamber to another in order to stay alive for the session. Usually, this is a week filled with late nights and craziness, but this session they actually planned ahead and moved bills quickly the week before so it was surprisingly calm. The House wrapped up its work on Tuesday and the Senate on Wednesday, meaning most lawmakers weren't even in town for the actual deadline.

A total of 1,687 total bills have been introduced this session, including more than 1,000 House bills and nearly 700 in the Senate. Most bills that had been heard in committee made it to the floor for a vote, and many remaining bills have a budget or finance component, exempting them from crossover. And some bills that may not have made the deadline, may be revived later in session with the addition of a fiscal element or by being added to another measure.

Now that crossover has passed, the budget will take center stage again. Senate Majority Leader Sen. Harry Brown, R-Onslow, indicated that the goal is for the Senate to complete the budget by the end of the month, which would likely mean floor votes on the week after Memorial Day. According to Brown, budget subcommittees are already working on the pieces of the budget.

Another issue that has been front and center this session has surfaced again. State Treasurer Dale Folwell has moved forward with his plan to change how the State Health Plan reimburses doctors and other providers. The State Health Plan announced that the state Insurance Department has given final approval to moving the plan to a government pricing model tied to Medicare rates. House Bill 184, which was approved by the House in April, would stop the plan while a study is conducted; however, the bill has not been heard in the Senate.

Also, last week, Governor Cooper announced nearly \$10 million in broadband grants through the Growing Rural Economies with Access to Technology (GREAT) program, which provides matching grants to internet service providers and electric membership cooperatives to expand high speed internet in Tier 1 counties. The grants were distributed to 14



## NORTH CAROLINA COLLEGE OF EMERGENCY PHYSICIANS



THIS LEGISLATIVE REPORT IS A PUBLICATION OF KOCHANEK LAW GROUP AND IS A MEMBER BENEFIT OF NCCEP. ANY USE OR REPRODUCTION OF THIS REPORT IS LIMITED TO NCCEP AND ITS MEMBERS.

## FOR MORE INFORMATION:

Colleen Kochanek  
Ashley Matlock Perkinson  
Rachel E. Beaulieu  
P.O. Box 1038  
Wake Forest, NC 27588  
919.747.9988  
[colleen@kochaneklawgroup.com](mailto:colleen@kochaneklawgroup.com)  
[ashley@perkinsonlawfirm.com](mailto:ashley@perkinsonlawfirm.com)  
[rachel@beaulieuedlaw.com](mailto:rachel@beaulieuedlaw.com)  
[www.kochaneklawgroup.com](http://www.kochaneklawgroup.com)

companies in 19 counties from Gates County in the state's northeast to Macon County in the state's far west. There appears to be bipartisan agreement that funding for GREAT should continue. The House budget included \$15 million a year for the program, as well as tweaks to eligibility rules that would allow for projects in less impoverished Tier Two counties. Cooper's budget included \$30 million for the 2019-2020 fiscal year but no money for the following year.

The General Assembly also continues to explore options to address teacher and school needs. Senate Bill 219 was passed by the Senate last week. It would give teachers extra time to pass licensing exams by allowing school districts to issue three-year, non-renewable limited licenses to teachers who are in danger of losing their jobs because of failing licensing exams. The bill also gives a one-year extension -- to June 30, 2020 -- for elementary school teachers and special education teachers whose initial licenses were set to expire in June.

The Senate also passed legislation to allow families with household income of more than \$70,000 per year to utilize the Opportunity Scholarship program, which provides private school vouchers. Senate Bill 609 would also eliminate a cap that has been used to limit the number of kindergarteners and first graders eligible for the program. The program has not been spending all the funds it is appropriated, accumulating more than \$12 million on hand, and it is scheduled to get an extra \$10 million a year from state taxpayers every year through 2026.

Finally, the week ended on a partisan note, as [news](#) broke that the State Board of Elections will remove longtime Executive Director Kim Strach, a Republican appointee. The change in leadership, and especially the timing, is questionable with the Republican primary in the 9<sup>th</sup> Congressional District race being held today, the 3<sup>rd</sup> Congressional District race going to a run-off and the [2020 U.S. Senate race](#) already heating up. In Raleigh it seems that everything is partisan these days.

## BILLS OF INTEREST

HOUSE BILL 940, Health Care Provider Authorization to Report, would authorize licensed health care providers to notify appropriate law enforcement and a school principal or superintendent, when, as a result of providing health services to a minor, the care provider has cause to suspect an individual has communicated a threat of violence. Civil and criminal immunity would be established for health care providers making such a notification in good faith. **Introduced by Representatives Hardister, Dobson, Corbin and Adcock and referred to the House Health Committee.**

## BILL UPDATES

HOUSE BILL 106, PED/Inmate Health Care Reimbursement, was heard in the House Rules Committee, where a committee substitute was approved. It would:

- eliminate the requirement that the Department of Public Safety (DPS) include in its plan to increase the use of the Central Prison Healthcare Complex all expenditures for inmate health care services in a specific budget code and options for eliminating the inmate health care services structural deficit; and
- remove the changes that required that any contracts and extensions of contracts for medical services provided to inmates by contracted providers and facilities be limited to specified reimbursement rates.

**The bill as amended was approved by the House Rules Committee and the Full House and will next be considered by the Senate. The North Carolina College of Emergency Physicians was opposed to the provision that was removed from the bill regarding the setting of reimbursement rates for inmate care.**

HOUSE BILL 118, First Responders Act of 2019, was modified 4 separate times in committee leaving only one provision left that would require DOT to report its findings and recommendations on the interstate system access to the General Assembly by March 1, 2022 (was, March 1, 2020). The following provisions were removed from the bill:

- deleted the proposed tax deduction for firefighters;
- deleted the proposed property tax homestead exclusion for the surviving spouse of qualifying emergency personnel; and
- removed the provision that would allow EMS personnel to carry concealed handguns if part of a tactical law enforcement group.

**The bill as amended was approved by various committees and the Full House and will next be considered by the Senate Rules Committee.**

HOUSE BILL 144, Hands Free NC, as amended in the House Insurance and Rules Committee, would:

- make it unlawful for a person to operate a vehicle on a public street or highway or public vehicular area while using the person's hands to engage in distracted behavior that impairs or otherwise restricts the proper operation of the motor vehicle and results in operation that is careless, reckless, or heedless under the conditions then existing; (yes this language is confusing and was the subject of much debate in committee and on the House Floor)
- provide that distracted behavior includes use of a handheld mobile telephone and use of a handheld electronic device;
- make a violation an infraction punishable by a fine of \$100 and the costs of court with no insurance surcharge assessed; and
- allow exceptions for the following:
  - the use of a mobile telephone or electronic device for the purpose of communicating an emergency situation to: an emergency response operator; a publicly or privately-owned ambulance company or service; a hospital; a fire department; or a law enforcement agency; and
  - the use of a mobile telephone or electronic device by any of the following while in the performance of official duties: a law enforcement officer; a member of a fire department; the operator of a public or private ambulance; a first responder responsible for the protection and preservation of life, property, evidence, or the environment; the operator of a vehicle registered to a public utility or communications service provider when the operator is an employee of the public

utility or communications service provider using the device to carry out official duties; and an amateur radio operator responding to an emergency situation.

**The bill as amended was approved by the House Rules Committee and the Full House and will next be considered by the Senate Rules Committee.**

HOUSE BILL 410, Require Generators/Nursing & Adult Care Homes, was heard in the House Rules Committee, where a committee substitute was approved that removed all provisions of the previous edition. The new language would create a nine-member committee to study the feasibility of requiring all nursing homes, combination homes and adult care homes to provide emergency electrical services. A report to the General Assembly would be required by March 1, 2020. **The bill as amended was approved by the House Rules Committee and the Full House and will next be considered by the Senate Rules Committee.**

HOUSE BILL 474, Death by Distribution, was amended on the House floor as follows:

- change the requirements to be met for a person to be guilty of death by distribution and aggravated death by distribution to require that the person unlawfully sells or delivers as part of the sale (was, sells or delivers) at least one controlled substance to the victim which is ingested by the user and is the actual and proximate cause of the user's death; and
- specify that the statute does not apply to (1) issuing a valid prescription for a controlled substance for a legitimate medical purpose by an individual practitioner acting in the usual course of professional practice (previously did not specify individual practitioner) or (2) dispensing, delivering, or administering a controlled substance pursuant to a prescription, by a permitted pharmacist, a pharmacist, or an individual practitioner (previously limited to a pharmacist dispensing and delivering a valid prescription of a controlled substance in the usual course of professional practice).

**The bill as amended was approved by the Full House and will next be considered by the Senate Rules Committee.**

HOUSE BILL 721, Increase Access to Telehealth Services, a bill that we have actively supported, was heard in the House Rules Committee, where a committee substitute was approved. The new version is narrower in scope in regard to private insurance than the original version but retains the same language for Medicaid and NC Health Choice. The new language would:

- prohibit a health benefit plan from excluding from coverage a covered health care service or procedure delivered by a preferred or contracted health professional to a covered patient as a telehealth service solely because the service or procedure is not provided through an in-person consultation; and
- add that a health benefit plan can require a deductible, a copayment, or coinsurance for a covered health care service or procedure delivered by a preferred or contracted health professional to a covered patient as a telehealth service, but prohibit the amount from exceeding the same required for the covered health care service or procedure provided through an in-person consultation (previously required telehealth coverage and reimbursement to be equivalent to the coverage and reimbursement for the same service provided in person).

**The bill as amended was approved by the House Rules Committee and the Full House and will next be considered by the Senate Rules Committee. Although disappointed in these changes, we will continue to work to include coverage parity and other language that protects telehealth in the Senate.**

HOUSE BILL 925, Med Mal/Jury Instruction/Judicial Assignments, was heard in the House Judiciary Committee, where a committee substitute was approved. The new version would authorize and encourage, rather than require, the court to provide written instructions to the jury to take to the jury room during deliberations in civil cases concerning medical malpractice. The new version would retain the provisions encouraging and authorizing the Senior Resident Superior Court Judge to designate a specific resident judge or specific judge assigned to the District to preside over all proceedings in a case related to medical malpractice but would add consultation with both the Administrative Office of the Courts (AOC) and the parties to the case (previously was only AOC). **The bill as amended was approved by the House Judiciary Committee and will next be heard by the House Insurance Committee.**

- Colleen Kochanek  
NCCEP Legislative Counsel  
Kochanek Law Group  
919.747.9988  
[colleen@kochaneklawgroup.com](mailto:colleen@kochaneklawgroup.com)  
[www.kochaneklawgroup.com](http://www.kochaneklawgroup.com)<sup>i</sup>

Ashley Matlock Perkinson  
Perkinson Law Firm  
919.210.8209  
[ashley@perkinsonlawfirm.com](mailto:ashley@perkinsonlawfirm.com)

Rachel E. Beaulieu  
Rachel E. Beaulieu Law Office, PLLC  
919.896.6296  
[Rachel@BeaulieuEdLaw.com](mailto:Rachel@BeaulieuEdLaw.com)

---

<sup>i</sup> THIS LEGISLATIVE REPORT IS A PUBLICATION OF KOCHANEK LAW GROUP AND IS A MEMBER BENEFIT OF NCCEP. ANY USE OR REPRODUCTION OF THIS REPORT IS LIMITED TO NCCEP AND ITS MEMBERS.

---