March 31, 2005

H 1059. PUBLIC SCHOOL HEALTH CURRICULUM. TO CORRECT INACCURACIES IN THE USE OF CERTAIN TERMS IN THE GENERAL STATUTES PERTAINING TO THE ADMINISTRATION OF A SCHOOL HEALTH EDUCATION PROGRAM. Amends GS 115C-81(e1) (School Health Education Program) to replace all references to "Acquired Immune Deficiency Syndrome (AIDS) virus infection" with "Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS)" and a reference to "homosexual acts" with "sexual acts prohibited under GS 14-177." Requires that materials recommended for use in abstinence until marriage curricula also teach how alcohol and drug use can lower inhibitions, which may lead to risky sexual behavior. Clarifies that requirement that instruction on the use of contraceptives or prophylactics include statistics on the actual use of those methods applies only if that information is available. Applies to the 2006-07 school year only.

Intro. by Wright.

Ref. to Education

GS 115C

May 31, 2005

H 1059. PUBLIC SCHOOL HEALTH CURRICULUM. Intro. 3/31/05. House committee substitute makes the following changes to 1st edition. (1) Deletes requirement in GS 115C-81(e1)(3) that instruction concerning the causes of sexually transmitted diseases, including AIDS, where homosexual acts are a means of transmission, include the current legal status of those acts. (2) Deletes proposed amendment to GS 115C-81(e1)(8) that would have conditional instruction on the effectiveness and failure rates of contraceptives and prophylactics, on the availability of information on actual use, and substitutes requirement that Dep't of Health and Human Resources provide the most current available information on effectiveness and failure rates at the beginning of each school year. (3) Makes technical changes.

June 1, 2005

H 1059. PUBLIC SCHOOL HEALTH CURRICULUM. Intro. 3/31/05. House amendments # 1 and # 2 make the following changes to 2nd edition. Amends language in GS 115C-81(e1)(3) and (4) to require that program teach that abstinence from sexual activity until marriage is the only certain means of avoiding sexually transmitted diseases when transmitted through sexual contact.

July 20, 2006

H 1059. STATE HEALTH PLAN CHANGES (NEW). Filed 3/30/05. Senate committee substitute deletes all provisions of 3rd edition and replaces it with AN ACT TO MAKE CHANGES TO THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN; TO CLARIFY ENROLLMENT IN THE PPO OPTIONAL PROGRAM ESTABLISHED PURSUANT TO PART 2 OF ARTICLE 3 OF CHAPTER 135 OF THE GENERAL STATUTES: AND TO AUTHORIZE THE EXECUTIVE ADMINISTRATOR AND BOARD OF TRUSTEES OF THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN TO PERMIT A CERTAIN NUMBER OF LOCAL GOVERNMENTS OPTIONAL COVERAGE UNDER THE PLAN. Makes the following changes concerning the Teachers' and State Employees' Comprehensive Major Medical Plan (the Plan). (1) Authorizes the Executive Director and the Board of Trustees of the Plan to authorize coverage for over-the-counter medications as recommended by the Plan's pharmacy and therapeutics committee. Requires that the Administrator and the Board ensure that recommended medications are analyzed for medical effectiveness and safety, and that the analysis address the financial impact on the Plan. Also authorizes the Administrator and Board to impose a co-payment for packaged over-the-counter medications and to adopt policies placing annual coverage limits on over-the-counter medications. Requires that proposed policies and co-payments be submitted to the Committee on Employee Hospital and Medical Benefits for review prior to implementation. Also provides that the Administrator and the Board may offer incentives to Plan members to encourage Plan members to make lifestyle or behavior changes to reduce costs to the Plan.

- (2) Amends GS 135-40.5(g) to provide that the Plan will pay \$25.00 for each "preferred" branded prescription and \$40.00 for each "preferred" branded prescription with a generic equivalent drug. (3) Enacts new GS 135-40.6A(b)(12) to authorize the Administrator and the Board to require prior medical approvals for bone anchored hearing aids. (4) Authorizes the Administrator and the Board to use up to \$794,278 in available funds to create 13 new full-time positions to improve Plan efficiency and cost-effectiveness. (5) Enacts new GS 135-39.5B(c) to clarify that enrollment in an optional hospital and medical benefits program (including a PPO) under GS 135-39.5B(b) does not constitute enrollment in the Plan.
- (6) Amends GS 135-40.13A (Plan subrogation rights) to also give the Plan subrogation rights to recover provider expenses and to clarify that the Plan's subrogation rights extend to expenses related to an injury caused by a liable third party. Enacts new GS 135-40.13A(d) to limit the Plan's lien to 50% of the total damages recovered from a third party, exclusive of the Plan member's reasonable costs of collection. The Plan's determination as to the reasonable costs of collection is not a "final agency decision" for purposes of a contested case under GS Chapter 150B. Provides that notice of the Plan's lien or right to recovery is presumed when a Plan member is represented by an attorney, and to require that the Plan member's attorney disburse proceeds pursuant to the section. Makes conforming change to GS 28A-18-2(a). Amendments to GS 135-40.13A and GS 28A-18-2(a) apply to plan payments made by the Plan after July 20, 2004, for which reimbursement is sought on or after the effective date of act.
- (7) Enacts new GS 135-39.5(28) to authorize participation in the Plan by no more than eight local government employers, including those employers participating as of June 30, 2006, and to give the Administrator and the Board the discretion to select those employers.

Except as otherwise noted, effective July 1, 2006.

July 21, 2006

H 1059. STATE HEALTH PLAN CHANGES. Filed 3/30/05. Senate amendment makes the following changes to 4th edition. Amends GS 135-39.5(12) to require that the optional plans and programs adopted pursuant to GS 135-39.5B (authorizing optional hospital and medical benefits plans, including a PPO plan) comply with GS 58-3-225 (requiring prompt payment of claims under health benefit plans).

July 27, 2006

H 1059. STATE HEALTH PLAN CHANGES. Filed 3/30/05. Conference report recommends the following changes to 5th edition to reconcile matters in controversy. The 5th edition permitted the Plan to add 13 new positions, 10 of which were subject to the State Personnel Act; the conference report reduced the number to 8 new positions, 5 of which will be subject to the State Personnel Act. The conference report amends GS 135-39.5B(b) to provide that if a pharmacy benefit is not provided under an optional benefits program, the pharmacy benefit under GS 135-40.59(g) applies, and to provide that benefits are not to be paid under the State Health Plan to persons enrolled in an optional prepaid hospital and medical benefits program. Deletes proposed revisions to GS 135-40.13A and GS 28A-18-2(a). The 5th edition would have permitted the Plan to authorize participation by up to eight local government employers; the conference report permits Plan to admit up to four additional local government employers, and involves the Committee on Employee Hospital and Medical Benefits in developing criteria for selecting the employers.

August 22, 2006

SL 2006-249 (H 1059). STATE HEALTH PLAN CHANGES. AN ACT TO MAKE CHANGES TO THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN; TO CLARIFY ENROLLMENT IN THE PPO OPTIONAL PROGRAM ESTABLISHED PURSUANT TO PART 2 OF ARTICLE 3 OF CHAPTER 135 OF THE GENERAL STATUTES; AND TO AUTHORIZE THE EXECUTIVE ADMINISTRATOR AND BOARD OF TRUSTEES OF THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN TO PERMIT A CERTAIN NUMBER OF LOCAL GOVERNMENTS OPTIONAL COVERAGE UNDER

THE PLAN. Summarized in Daily Bulletin 7/20/06, 7/21/06, and 7/27/06. Enacted August 16, 2006. Effective July 1, 2006.