February 17, 2009

H 191. GENERAL STATUTES COMM. TECHNICAL CORRECTIONS. Filed 2/17/09. *TO MAKE TECHNICAL CORRECTIONS IN THE GENERAL STATUTES AS REQUESTED BY THE GENERAL STATUTES COMMISSION.*

Makes technical corrections to GS 14-318.2, GS 14-404(g), and GS 144-3.

Intro. by Ross. GS 14, 144

August 7, 2009

H 191. GENERAL STATUTES CLARIFYING CORRECTION (NEW). Filed 2/17/09. Senate committee substitute deletes the contents of the 1st edition and replaces it with *AN ACT TO MAKE A CLARIFYING CHANGE TO THE GENERAL STATUTES.* Amends GS 20-130.1 by providing that subsection (c) [prohibiting the possession, use, installation of a blue light on a vehicle except publicly owned vehicles used for law enforcement] does not apply to the possession and installation of an inoperable blue light on a vehicle inspected by and registered with the Division of Motor Vehicles as a specially constructed vehicle used primarily in shows, exhibitions, parades, or holiday/weekend activities, and not for general daily transportation.

August 7, 2009

H 191. GENERAL STATUTES CLARIFYING CORRECTION. Filed 2/17/09. Senate amendments make the following changes to 2nd edition. Amendment #1 amends Section 5 (transitional rules for existing licensees under Article 19A of GS Chapter 53, which is repealed by Section 1 of the act) of SL 2009-374 to specify that nothing in the act adversely affects the Commissioner of Banks' ability to bring and maintain any action or pursue any remedy that the Commissioner could have brought under Article 19A against any person for any acts or omissions in violation of Article 19A occurring on or before July 30, 2009.

Amendment #2 amends Section 10.15A(h1)(2) and (h1)(3) of SL 2008-107, as amended, to require that the Department of Health and Human Services (DHHS) notify a Medicaid applicant or recipient, and the provider, if applicable, 10 (was, 30) days before the effective date of an adverse determination [a determination by DHHS to deny, terminate, suspend, or reduce Medicaid covered services] in writing of the determination and the applicant's or recipient's right to appeal. Adds that if a request for a hearing to appeal an adverse determination concerns the reduction, modification, or termination of Medicaid services, upon receipt of the timely appeal, DHHS must reinstate the services to the level or manner prior to action by DHHS as permitted by federal law or regulation. Amends Section 10.15A(h2) of SL 2008-107, as amended, to require that, to the extent possible, the Office of Administrative Hearings (was, the Hearings Division) schedule and hear *all* contested Medicaid cases within 55 (was, 45) days of submission of a request for appeal. Provides that hearings be conducted telephonically or by video technology, however the recipient or applicant, or the recipient's or applicant's representative, may request that the hearing be conducted before the administrative law judge in-person in Wake County, unless good cause can be shown to have the hearing conducted in the applicant's or recipient's county of residence. Lists specific factors that demonstrate good cause. Requires that DHHS provide written notice to the recipient or applicant of the use of telephonic hearings, hearings by video conference, and in-person hearings before an administrative law judge, and how to request a hearing in a county of residence. Provides for continuances and dismissal of the contested case for failure to appear. Requires the Office of Administrative Hearings (was, the chief administrative law judge) to notify the Mediation Network of North Carolina upon receipt of an appeal request. Provides for the notification of a successful mediation to the Office of Administrative Hearings (was, Hearings Division) and DHHS *within 24 hours of a resolution by fax or email*. Provides for the submittal of new evidence by the petitioner and a hearing determination on whether DHHS substantially prejudiced the rights of the petitioner and whether there were any of the specified improper actions by DHHS. Amends Section 10.15A(e2) of SL 2008-107 to provide that a hearing officer must ensure that a hearing related to a community support provider appeal be held in Wake County, except that the hearing officer may take testimony and receive evidence by telephone or other electronic means (was, after consideration of certain factors). Allows the petitioner and the petitioner's legal representative to appear before the hearing officer in Wake County (was,

allowed officer to determine to hold the hearing in the petitioner's county of residence). Deletes that each party to a contested case must provide each other party with a copy of any documentary evidence that the party intends to introduce at the hearing within five days of the hearing. Deletes that the hearing officer has the power to subpoena witnesses and rule on prehearing motions. Requires that DHHS include a copy of the recording at the hearing as part of the official record if a petition for judicial review is filed (was, a transcript would be prepared in that limited circumstance at no cost to a petitioner). Prohibits a final decision from the DHHS designated official more than 180 (was, 90) days from the date of filing the petition and removes the 30 day limit on the potential extension of that time limit for good cause shown. Also makes conforming changes.

Amendment #3 makes technical changes to GS 163-85(c)(10), as enacted by H 908, if that act becomes law.

September 1, 2009

SL 2009-526 (H 191). GENERAL STATUTES CLARIFYING CORRECTION. *AN ACT TO MAKE A CLARIFYING CHANGE TO THE GENERAL STATUTES AND SESSION LAWS.* Summarized in *Daily Bulletin* 2/17/09 and 8/7/09. Enacted August 26, 2009. Effective August 26, 2009.