GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2019

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SENATE BILL 168

Judiciary Committee Substitute Adopted 3/20/19
Judiciary Committee Substitute Adopted 4/3/19
Fourth Edition Engrossed 4/10/19
House Committee Substitute Favorable 6/24/20
Sixth Edition Engrossed 6/24/20
Proposed Conference Committee Substitute S168-PCCS45508-LU-2

	Short Title: DHHS & Other Revisions. (Public)
	Sponsors:
	Referred to:
	February 28, 2019
1	A BILL TO BE ENTITLED
2	AN ACT MAKING TECHNICAL, CONFORMING, AND OTHER MODIFICATIONS TO
3	LAWS PERTAINING TO THE DEPARTMENT OF HEALTH AND HUMAN SERVICES
4	AND ADDING A PSYCHIATRIC PHYSICIAN PRIVILEGE EXCEPTION TO CRIMES
5	AGAINST JUVENILES REPORTING REQUIREMENTS.
6	The General Assembly of North Carolina enacts:
7	
8	PART I. TECHNICAL, CONFORMING, AND OTHER CHANGES RELATED TO THE
9	DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES, AND
10	SUBSTANCE ABUSE SERVICES
11	
12	ALIGNMENT OF DEVELOPMENTAL DISABILITY DEFINITION WITH FEDERAL
13	LAW
14	SECTION 1.1. G.S. 122C-3(12a) reads as rewritten:
15	"(12a) Developmental disability. – A severe, chronic disability of a person that
16	satisfies all of the following:
17	a. Is attributable to one or more impairments, a mental or physical
18	impairment or combination of mental and physical impairments.
19 20	"
21	ALLOW CO-PAYMENT SCHEDULE FOR BEHAVIORAL HEALTH,
22	INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, AND SUBSTANCE USE
23	DISORDER SERVICES
24	SECTION 1.2. G.S. 122C-112.1(a)(34) reads as rewritten:
25	"(34) Adopt rules for the implementation of a co-payment graduated schedule to for
26	behavioral health services, intellectual and developmental disabilities
27	services, and substance use disorder services based on the Medicaid
28	co-payments for such services, which shall be used by LMEs and by
29	contractual provider agencies under G.S. 122C-146. The co-payment
30	graduated schedule shall be developed to adopted under this subdivision shall
31	require a co-payment for services identified by the Secretary. Families whose



family income is three hundred percent (300%) or greater of the federal poverty level are eligible for services with the applicable co-payment."

CONFORMING CHANGE TO PROCEDURE FOR APPEALING DECISIONS ON LICENSURE WAIVER REQUESTS

SECTION 1.3. G.S. 122C-23(f) reads as rewritten:

"(f) Upon written application and in accordance with rules of the Commission, the Secretary may for good cause waive any of the rules implementing this Article, provided those rules do not affect the health, safety, or welfare of the individuals within the licensable facility. Decisions made pursuant to this subsection may be appealed to the Commission for a hearing in accordance with by filing a contested case under Article 3 of Chapter 150B of the General Statutes."

TECHNICAL CORRECTION TO LIST OF PERSONS DHHS SECRETARY MAY CERTIFY TO PERFORM FIRST EXAMINATIONS FOR INVOLUNTARY COMMITMENT

SECTION 1.4. G.S. 122C-263.1(a) reads as rewritten:

- "(a) Physicians and eligible psychologists are qualified to perform the commitment examinations required under G.S. 122C-263(c) and G.S. 122C-283(c). The Secretary of Health and Human Services may individually certify to perform the first commitment examinations required by G.S. 122C-261 through G.S. 122C-263 and G.S. 122C-281 through G.S. 122C-283 other health, mental health, and substance abuse professionals whose scope of practice includes diagnosing and documenting psychiatric or substance use disorders and conducting mental status examinations to determine capacity to give informed consent to treatment as follows:
 - (1) The Secretary has received a request:
 - a. To certify a licensed clinical social worker, a master's or higher level degree nurse practitioner, a licensed professional counsellor, clinical mental health counselor or a physician's assistant to conduct the first examinations described in G.S. 122C-263(c) and G.S. 122C-283(c).
 - b. To certify a master's level licensed clinical addictions specialist to conduct the first examination described in G.S. 122C-283(c).

 (5) In no event shall the certification of a licensed clinical social worker, master's or higher level degree nurse practitioner, licensed professional counsellor, clinical mental health counselor, physician assistant, or master's level certified clinical addictions specialist under this section be construed as authorization to expand the scope of practice of the licensed clinical social worker, the master's level nurse practitioner, licensed professional counsellor, clinical mental health counselor, physician assistant, or the master's level certified clinical addictions specialist.

CORRECTION TO EXPANDED USE OF TELEHEALTH TO CONDUCT FIRST AND SECOND INVOLUNTARY COMMITMENT EXAMINATIONS DURING THE COVID-19 EMERGENCY

SECTION 1.5.(a) Section 3F.1(b) of S.L. 2020-3 reads as rewritten:

"SECTION 3F.1.(b) Notwithstanding any provision of Chapter 122C of the General Statutes or any other provision of law to the contrary, the first examination of a respondent required by G.S. 122C-263(a) to determine whether the respondent will be involuntarily committed due to mental illness or required by G.S. 122C-283(a) to determine whether the respondent will be involuntarily committed due to substance use disorder may be conducted

either in the physical face-to-face presence of the commitment examiner or utilizing telehealth equipment and procedures. A commitment examiner who examines a respondent by means of telehealth must be satisfied to a reasonable medical certainty that the determinations made in accordance with G.S. 122C-283(d) would not be different if the examination had been conducted in the physical presence of the commitment examiner. A commitment examiner who is not so satisfied must note that the examination was not satisfactorily accomplished, and the respondent must be taken for a face-to-face examination in the physical presence of a person authorized to perform examinations under G.S. 122C-283."

SECTION 1.5.(b) This section is effective when it becomes law.

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PART II. TECHNICAL, CONFORMING, AND OTHER CHANGES RELATED TO THE DIVISION OF PUBLIC HEALTH

TECHNICAL CORRECTION TO STATUTE GOVERNING TRANSITIONAL PERMITS FOR FOOD ESTABLISHMENTS

SECTION 2.1. G.S. 130A-248(c) reads as rewritten:

"(c) If ownership of an establishment is transferred or the establishment is leased, the new owner or lessee shall apply for a new permit. The new owner or lessee may also apply for a transitional permit. A transitional permit may be issued upon the transfer of ownership or lease of an establishment to allow the correction of construction and equipment problems that do not represent an immediate threat to the public health. Upon issuance of a new permit or a transitional permit for the same establishment, any previously issued permit for an establishment in that location becomes void. This subsection does not prohibit issuing more than one owner or lessee a permit for the same location if (i) more than one establishment is operated in the same physical location and (ii) each establishment satisfies all of the rules and requirements of subsection (g) (a) of this section. For purposes of this subsection, "transitional permit" shall mean means a permit issued upon the transfer of ownership or lease of an existing food establishment to allow the correction of construction and equipment problems that do not represent an immediate threat to the public health."

REGULATION OF TEMPORARY DISPLAY SPAS

SECTION 2.2. G.S. 130A-280 reads as rewritten:

"§ 130A-280. Scope.

This Article provides for the regulation of public swimming pools in the State as they may affect the public health and safety. As used in this Article, the term "public swimming pool" means any structure, chamber, or tank containing an artificial body of water used by the public for swimming, diving, wading, recreation, or therapy, together with buildings, appurtenances, and equipment used in connection with the body of water, regardless of whether a fee is charged for its use. The term includes municipal, school, hotel, motel, apartment, boarding house, athletic club, or other membership facility pools and spas, spas operating for display at temporary events, and artificial swimming lagoons. As used in this Article, an "artificial swimming lagoon" means any body of water used for recreational purposes with more than 20,000 square feet of surface area, an artificial liner, and a method of disinfectant that results in a disinfectant residual in the swimming zone that is protective of the public health. This Article does not apply to a private pool serving a single family dwelling and used only by the residents of the dwelling and their guests. This Article also does not apply to therapeutic pools used in physical therapy programs operated by medical facilities licensed by the Department or operated by a licensed physical therapist, nor to therapeutic chambers drained, cleaned, and refilled after each individual use."

AUTHORIZATION TO APPOINT RETIRED PHYSICIANS, NURSES, PARAMEDICS, CERTIFIED MEDICOLEGAL DEATH INVESTIGATORS, AND PATHOLOGIST ASSISTANTS AS MEDICAL EXAMINERS

SECTION 2.3. G.S. 130A-382(a) reads as rewritten:

"(a) The Chief Medical Examiner shall appoint two or more county medical examiners for each county for a three-year term. In appointing medical examiners for each county, the Chief Medical Examiner shall give preference to physicians licensed to practice medicine in this State but may also appoint licensed retired physicians previously licensed to practice in this State; physician assistants, nurse practitioners, nurses, or nurses licensed to practice in this State; emergency medical technician paramedics. paramedics credentialed under G.S. 131E-159; medicolegal death investigators certified by the American Board of Medicolegal Death Investigators; pathologists' assistants; and dentists licensed to practice in this State. A medical examiner may serve more than one county. The Chief Medical Examiner may take jurisdiction in any case or appoint another medical examiner to do so."

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ALLOW CHIEF MEDICAL EXAMINER TO APPOINT EMERGENCY MEDICAL EXAMINERS DURING STATES OF EMERGENCY

SECTION 2.4. G.S. 130A-382 is amended by adding a new subsection to read:

"(a1) During a state of emergency declared by the Governor or by a resolution of the General Assembly as provided in G.S. 166A-19.20, or by the governing body of a county or municipality as provided in G.S. 166A-19.22, the Chief Medical Examiner is authorized to appoint temporary county medical examiners to serve for the duration of the declared state of emergency. For purposes of this section, "temporary county medical examiner" means an individual who has been determined by the Chief Medical Examiner to have the appropriate training, education, and experience to serve as a county medical examiner during a declared state of emergency."

ESTABLISHMENT OF CONFIDENTIALITY FOR CERTAIN DEATH INVESTIGATION INFORMATION

SECTION 2.5. Article 16 of Chapter 130A of the General Statutes is amended by adding a new section to read:

"§ 130A-386.5. Confidentiality of certain death investigation information and records received by the Office of the Chief Medical Examiner.

All information and records provided by a city, county, or other public entity to the Office of the Chief Medical Examiner, or its agents, concerning a death investigation shall retain the same degree of confidentiality it had while in the possession of the city, county, or other public entity. Such information and records shall not become public records, as defined under Chapters 121 and 132 of the General Statutes, when provided to the Office of the Chief Medical Examiner, or its agents, unless the information and records otherwise constituted public records while in the possession of the city, county, or other public entity."

PART II-A. TECHNICAL, CONFORMING, AND OTHER CHANGES RELATED TO DHHS BLOCK GRANTS

SECTION 2A.1.(a) Section 1.1 of S.L. 2019-192, as amended by Section 4.9 of S.L. 2020-4, reads as rewritten:

"DHHS BLOCK GRANTS

"SECTION 1.1.(a) Except as otherwise provided, appropriations from federal block grant funds are made for each year of the fiscal biennium ending June 30, 2021, according to the following schedule:

TEMPORARY ASSISTANCE FOR NEEDY

FY 2019-2020 FY 2020-2021

General Assembly Of North Carolina		Session 2019
FAMILIES (TANF) FUNDS		
Local Program Expenditures		
Division of Social Services		
01. Work First Family Assistance	\$37,549,914	\$35,549,914
02. Work First County Block Grants	80,093,566	80,093,566
03. Work First Electing Counties	2,378,213	2,378,213
04. Adoption Services – Special Children Adoption Fund	2,026,877	2,026,877
05. Child Protective Services – Child Welfare Workers for Local DSS	9,412,391	9,412,391 21,559,645
06. Funding for Counties to Assist with County Implementation of NC FAST, Project 4	8,092	0
07. Child Welfare Program Improvement Plan	775,176	775,176
08. Child Welfare Collaborative	400,000	400,000
09. Child Welfare Initiatives	1,400,000	1,400,000
Division of Child Development and Early Education		
10. Subsidized Child Care Program	53,203,069	45,813,694
11. Swap-Child Care Subsidy	5,400,000	12,600,000
12. NC Pre-K Services	66,300,000	68,300,000
Division of Public Health		
13. Teen Pregnancy Prevention Initiatives	3,450,000	3,450,000
DHHS Administration		
14. Division of Social Services	2,482,260	2,482,260
15. Office of the Secretary	34,042	34,042
16. Eligibility Systems – Operations and Maintenance	653,815	711,349 1,045,775
17. NC FAST Implementation	1,817,362	0 396,659
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General Assembly Of North Carolina		Session 2019
18. Division of Social Services – Workforce Innovation & Opportunity Act (WIOA)	93,216	93,216 <u>83,874</u>
Transfers to Other Block Grants		
Division of Child Development and Early Education	on	
19. Transfer to the Child Care and		
Development Fund	21,773,001	21,773,001
Division of Social Services		
20. Transfer to Social Services Block		
Grant for Child Protective Services – Training	1,300,000	1,300,000
Hanning	1,500,000	1,300,000
21. Transfer to Social Services Block	7 0 40 000	7 0 40 000
Grant for Child Protective Services	5,040,000	5,040,000
22. Transfer to Social Services Block		
Grant for County Departments of		
Social Services for Children's Services	13,097,783	13,097,783
23. Transfer to Social Services Block		
Grant – Foster Care Services	1,385,152	1,385,152
24. Transfer to Social Services Block	1,582,000	1,582,000
Grant – Child Advocacy Centers		, ,
25. Transfer to Social Services Block	737,067	737,067
Grant – Child Protective Services,		
Child Welfare Training for Counties		
TOTAL TEMPORARY ASSISTANCE FOR		
NEEDY FAMILIES (TANF) FUNDS	\$312,392,996	\$310,435, 701
		<u>\$323,304,698</u>
TEMPORARY ASSISTANCE FOR NEEDY FAN	MILIES (TANF)	
EMERGENCY CONTINGENCY FUNDS		
Local Program Expenditures		
•		
Division of Child Development and Early Education	on	
01. Subsidized Child Care	\$33,439,988	\$33,439,988
	. ,	\$34,818,946
TOTAL TEMPORARY ASSISTANCE FOR		
NEEDY FAMILIES (TANF) EMERGENCY		
CONTINGENCY FUNDS	\$33,439,988	\$33,439,988

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General Assembly Of North Carolina		Session 2019
		<u>\$34,818,946</u>
SOCIAL SERVICES BLOCK GRANT		
Local Program Expenditures		
Divisions of Social Services and Aging and Adult Servi	ices	
01. County Departments of Social Services	\$19,905,849	\$19,905,849
02. County Departments of Social Services (Transfer From TANF)	13,097,783	13,097,783
03. EBCI Tribal Public Health and Human Services	244,740	244,740
04. Child Protective Services		
(Transfer From TANF)	5,040,000	5,040,000
05. State In-Home Services Fund	1,943,950	1,943,950
06. Adult Protective Services	2,138,404	2,138,404
07. State Adult Day Care Fund	1,994,084	1,994,084
08. Child Protective Services/CPS Investigative Services – Child Medical Evaluation Program	901,868	901,868
09. Special Children Adoption Incentive Fund	462,600	4 62,600 762,600
10. Child Protective Services – Child Welfare Training for Counties (Transfer From TANF)	1,300,000	1,300,000
11. Child Protective Services – Child Welfare Training for Counties (Transfer From TANF)	737,067	737,067
12. Home and Community Care Block Grant (HCCBG)	2,696,888	2,696,888
13. Child Advocacy Centers (Transfer from TANF \$1,582,000)	1,582,000	1,582,000
14. Guardianship – Division of Social Services	1,802,671 4	,802,671 3,082,411
15. Foster Care Services (Transfer From TANF)	1,385,152	1,385,152
Division of Central Management and Support		

General Assembly Of North Carolina		Session 2019
16. DHHS Competitive Block Grants for Nonprofits	4,774,525	4,774,525
Division of Mental Health, Developmental Disabilitie	es, and Substance Abu	se Services
17. Mental Health Services – Adult and Child/Developmental Disabilities Program/ Substance Abuse Services – Adult	4,149,595	4,149,595
DHHS Program Expenditures		
Division of Services for the Blind		
18. Independent Living Program	3,603,793	3,603,793
Division of Health Service Regulation		
19. Adult Care Licensure Program	402,951	402,951
20. Mental Health Licensure and Certification Program	200,880	200,880
Division of Aging and Adult Services		
21. Guardianship	3,825,443	3,825,443
DHHS Administration		
22. Division of Aging and Adult Services	679,541	679,541
23. Division of Social Services	654,220	654,220
24. Office of the Secretary/Controller's Office	132,047	132,047
25. Legislative Increases/Fringe Benefits	236,278	236,278
26. Division of Child Development and Early Education	13,878	13,878
27. Division of Mental Health, Developmental Disabilities, and Substance Abuse Services	27,446	27,446
28. Division of Health Service Regulation	121,719	121,719
TOTAL SOCIAL SERVICES BLOCK GRANT	\$74,055,372	\$74,055,372 \$75,635,112
LOW-INCOME ENERGY ASSISTANCE BLOCK	GRANT	
Local Program Expenditures		

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General Assembly Of North Carolina		Session 2019
Division of Social Services		
01. Low-Income Energy Assistance Program (LIEAP)	\$40,298,638	\$4 0,298,638 \$40,950,767
02. Crisis Intervention Program (CIP)	40,298,638	40,298,638 40,950,767
Local Administration		
Division of Social Services		
03. County DSS Administration	6,618,366	6,618,366 6,725,467
DHHS Administration		
Division of Central Management and Support		
04. Division of Social Services	10,000	10,000
04A. AR4CA Replacement Project		119,486
04B. Winter Heating Program Outreach		100,000
05. Office of the Secretary/DIRM	128,954	128,954
06. Office of the Secretary/Controller's Office	18,378	18,378
07. NC FAST Development	2,287,188	2,287,188 581,123
08. NC FAST Operations and Maintenance	2,539,033	2,539,033 2,335,226
Γransfers to Other State Agencies		
Department of Environmental Quality		
09. Weatherization Program	8,692,641	8,552,641 9,493,643
10. Heating Air Repair and Replacement Program (HARRP)	5,881,761	5,701,761 6,171,429
11. Local Residential Energy Efficiency Service Providers – Weatherization	544,742	514,742 <u>573,072</u>
12. Local Residential Energy Efficiency Service		
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General Assembly Of North Carolina		Session 2019
Providers – HARRP	327,169	277,169 <u>351,654</u>
13. DEQ – Weatherization Administration	544,742	514,742 <u>623,072</u>
14. DEQ – HARRP Administration	277,169	277,169 <u>381,654</u>
Department of Administration		
15. N.C. Commission on Indian Affairs	87,736	87,736
TOTAL LOW-INCOME ENERGY		
ASSISTANCE BLOCK GRANT	\$108,555,155	\$108,125,155 \$109,602,428
CHILD CARE AND DEVELOPMENT FUND BI	OCK GRANT	
Local Program Expenditures		
Division of Child Development and Early Education	o n	
01. Child Care Services	\$268,109,943	\$239,499,318 \$245,658,197
02. Smart Start Subsidy	7,392,654	7,392,654
03. Transfer from TANF Block Grant for Child Care Subsidies	21,773,001	21,773,001
04. Quality and Availability Initiatives (TEACH Program \$3,800,000)	67,217,124	55,217,124 48,045,765
DHHS Administration		
Division of Child Development and Early Education	on	
05. DCDEE Administrative Expenses	9,710,886	9 ,710,886 10,062,728
Division of Social Services		
06. Local Subsidized Child Care		
Services Support	18,533,357	18,533,357 18,685,609
07. Direct Deposit for Child Care Payments	505,100	505,100 <u>5,000</u>
Division of Central Management and Support		
		0100,880

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	Session 2019
1,104,504	1,201,697 1,766,649
645,162	645,162
7,346	7,346 <u>350,000</u>
62,205	62,205
\$395,525,572	\$354,547,850
\$4,779,087	\$4,779,087
18,531,361	18,531,360 19,295,850
1,976,970	1,976,970 3,367,375
s, and Substance Abu	ise Services
200,000	200,000
\$25,487,418	\$25,487,417 \$27,642,312
MENT BLOCK GR	ANT
s, and Substance Abu	ise Services
\$3,500,747	\$2,550,915
9,110,422	9,110,422
•	645,162 7,346 62,205 \$395,525,572 \$4,779,087 18,531,361 1,976,970 s, and Substance Abi 200,000 \$25,487,418 EMENT BLOCK GR. \$3,500,747

	General Assembly Of North Carolina		Session 2019
1 2 3	Treatment Pilot Program \$500,000; First Step Farm of WNC, Inc. \$100,000)	28,203,732	29,500,823 31,400,777
4 5 6	05. Crisis Solutions Initiatives – Collegiate Wellness/Addiction Recovery	1,085,000	1,085,000
7 8 9	06. Crisis Solutions Initiatives – Community Paramedic Mobile Crisis Management	20,000	20,000
10 11 12	DHHS Program Expenditures		
13 14	Division of Central Management and Support		
15 16	07. Competitive Grants	1,600,000	1,600,000
17 18	DHHS Administration		g ·
19 20	Division of Mental Health, Developmental Disabilities,	and Substance Abu	ise Services
21 22	08. Administration	454,000	454,000
23 24 25	09. Controlled Substance Reporting System Enhancement	427,655	427,655
26 27	10. Veterans Initiatives	250,000	250,000
28 29	Division of Public Health		
30 31	11. HIV Testing for Individuals in Substance Abuse Treatment	1,300,000	0
32 33 34 35 36	TOTAL SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT	\$45,951,556	\$44,998,815 \$46,898,769
37 38	MATERNAL AND CHILD HEALTH BLOCK GRAN	NT	
39 40	Local Program Expenditures		
41 42	Division of Public Health		
43 44 45 46 47 48 49 50	01. Women and Children's Health Services (Safe Sleep Campaign \$45,000; Sickle Cell Centers \$100,000; Prevent Blindness \$575,000; March of Dimes \$350,000; Teen Pregnancy Prevention Initiatives \$650,000; 17P Project \$52,000; Nurse-Family Partnership \$550,000; Perinatal & Neonatal Outreach Coordinator Contracts \$440,000;		
49	Partnership \$550,000; Perinatal & Neonatal		

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1 Carolina Pregnancy Care Fellowship \$400,000) 2 3	\$14,719,224	\$14,719,224 \$15,892,309
4 02. Oral Health	48,227	48,22754,215
6 03. Evidence-Based Programs in Counties 7 With Highest Infant Mortality Rates 8	1,575,000	1,575,000
9 DHHS Program Expenditures		
10 11 04. Children's Health Services 12 13	1,427,323	1,427,323 1,477,119
14 05. Women's Health – Maternal Health 15	169,864	169,864 <u>174,727</u>
16 06. Women and Children's Health – Perinatal 17 Strategic Plan Support Position 18	68,245	68,245 81,622
19 07. State Center for Health Statistics20	158,583	158,583 <u>160,965</u>
21 08. Health Promotion – Injury and 22 Violence Prevention 23	87,271	87,271 91,082
24 DHHS Administration 25		
26 09. Division of Public Health Administration 27	552,571	552,571 <u>604,248</u>
28 TOTAL MATERNAL AND CHILD 29 HEALTH BLOCK GRANT 30	\$18,806,308	\$18,806,308 \$20,111,287
31 32 PREVENTIVE HEALTH SERVICES BLOCK GRA	ANT	
 33 34 Local Program Expenditures 35 		
36 01. Physical Activity and Prevention 37	\$3,030,116	\$3,030,116
 38 02. Injury and Violence Prevention 39 (Services to Rape Victims – Set-Aside) 40 	160,000	160,000
41 DHHS Program Expenditures 42		
43 Division of Public Health 44		
45 03. HIV/STD Prevention and46 Community Planning	137,648	137,648
47 48 04. Oral Health Preventive Services 49	150,000	150,000
50 05. Laboratory Services – Testing, 51 Training, and Consultation	21,000	21,000
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06. Injury and Violence Prevention		
(Services to Rape Victims – Set-Aside)	53,206	53,206
07. Performance Improvement and		
Accountability	592,123	592,123 <u>643,449</u>
08. State Center for Health Statistics	82,505	82,505
OHHS Administration		
Division of Public Health		
09. Division of Public Health	65,000	65,000
TOTAL PREVENTIVE HEALTH		
SERVICES BLOCK GRANT	\$4,291,598	\$4,291,598 \$4,342,924
COMMUNITY SERVICES BLOCK GRANT		
01. Community Action Agencies	\$24,170,204	\$20,539,214 \$24,109,518
02. Discretionary Funding	921,096	921,096 723,194
03. Office of Economic Opportunity	981,096	981,096 1,141,652
04. Office of Economic Opportunity – Workforce Investment Opportunities Act (WIOA)	60,000	60,000
05. AR4CA Replacement Project		<u>358,458</u>
TOTAL COMMUNITY SERVICES		
BLOCK GRANT	\$26,132,396	\$22,501,406 <u>\$26,392,822</u>
"TEMPORARY ASSISTANCE FOR NEEDY FAMIL	LIES (TANF) FUN	NDS

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"SECTION 1.1.(h) The sum of nine million four hundred twelve thousand three hundred ninety-one dollars (\$9,412,391) twenty-one million five hundred fifty-nine thousand six hundred forty-five dollars (\$21,559,645) appropriated in this act to the Department of Health and Human Services, Division of Social Services, in TANF funds for each fiscal year of the 2019-2021 2020-2021 fiscal biennium-year for child welfare improvements shall be allocated to the county departments of social services for hiring or contracting staff to investigate and provide services in Child Protective Services cases; to provide foster care and support services; to recruit, train, license, and support prospective foster and adoptive families; and to provide interstate and post-adoption services for eligible families.

Counties shall maintain their level of expenditures in local funds for Child Protective Services workers. Of the Block Grant funds appropriated for Child Protective Services workers, the total expenditures from State and local funds for fiscal years 2019-2020 and 2020-2021 shall not be less than the total expended from State and local funds for the 2012-2013 fiscal year.

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"SOCIAL SERVICES BLOCK GRANT

"SECTION 1.1.(s) The sum of three million eight hundred twenty-five thousand four hundred forty-three dollars (\$3,825,443) for each fiscal year of the 2019-2021 fiscal biennium six million nine hundred seven thousand eight hundred fifty-four dollars (\$6,907,854) for the 2020-2021 fiscal year appropriated in this act in the Social Services Block Grant to the Department of Health and Human Services, Divisions of Social Services and Aging and Adult Services, shall be used for guardianship services pursuant to Chapter 35A of the General Statutes. The Department may expend funds allocated in this section to support existing corporate guardianship contracts during the 2019-2020 and 2020-2021 fiscal years.

"LOW-INCOME ENERGY ASSISTANCE BLOCK GRANT

"SECTION 1.1.(v) For the 2020-2021 fiscal year, the Division of Social Services shall have the authority to realign appropriated funds between the State-level services Low Income Energy Assistance Payments and Crisis Assistance Payments without prior consultation with the Joint Legislative Oversight Committee on Health and Human Services to ensure needs are effectively met without exceeding the total amount appropriated for these State-level service items. Additional emergency contingency funds received may be allocated for Energy Assistance Payments or Crisis Intervention Payments without prior consultation with the Joint Legislative Oversight Committee on Health and Human Services. Additional funds received shall be reported to the Joint Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division upon notification of the award. The Department of Health and Human Services shall not allocate funds for any activities, including increasing administration, other than assistance payments, without prior consultation with the Joint Legislative Oversight Committee on Health and Human Services.

"SECTION 1.1.(w) The sum of forty million two hundred ninety-eight thousand six hundred thirty eight dollars (\$40,298,638) for each year of the 2019-2021 fiscal biennium-nine hundred fifty thousand seven hundred sixty-seven dollars (\$40,950,767) for the 2020-2021 fiscal year appropriated in this act in the Low-Income Energy Assistance Block Grant to the Department of Health and Human Services, Division of Social Services, shall be used for Energy Assistance Payments for the households of (i) elderly persons age 60 and above with income up to one hundred thirty percent (130%) of the federal poverty level and (ii) disabled persons eligible for services funded through the Division of Aging and Adult Services.

County departments of social services shall submit to the Division of Social Services an outreach plan for targeting households with 60-year-old household members no later than August 1 of each year. The outreach plan shall comply with the following:

- (1) Ensure that eligible households are made aware of the available assistance, with particular attention paid to the elderly population age 60 and above and disabled persons receiving services through the Division of Aging and Adult Services.
- (2) Include efforts by the county department of social services to contact other State and local governmental entities and community-based organizations to (i) offer the opportunity to provide outreach and (ii) receive applications for energy assistance.
- (3) Be approved by the local board of social services or human services board prior to submission.

"SECTION 1.1.(w1) The Department of Health and Human Services shall develop and implement a centralized system to collect, track, analyze, monitor, and disseminate performance,

outputs, and outcome data for the Community Services Block Grant Program and the Department of Environmental Quality (DEQ) Weatherization Assistance Program to replace the current software solution, Accountable Results for Community Action (AR4CA). The project shall not proceed until the business case has been approved by the Office of State Budget and Management and the State Chief Information Officer in the Enterprise Project Management Office's Touchdown System. Upon approval, amounts not to exceed one hundred nineteen thousand four hundred eighty-six dollars (\$119,486) in Low Income Energy Assistance funds may be budgeted for transfer to Budget Code 24410 for information technology projects for the 2020-2021 fiscal year.

...

"MENTAL HEALTH SERVICES BLOCK GRANT

"SECTION 1.1.(z) The sum of one million nine hundred seventy-six thousand nine hundred seventy dollars (\$1,976,970)—three million three hundred sixty-seven thousand three hundred seventy-five dollars (\$3,367,375) appropriated in this act in the Mental Health Services Block Grant to the Department of Health and Human Services, Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, for each year of the 2019–2021 fiscal biennium—the 2020-2021 fiscal year is allocated for Mental Health Services — First Psychotic Symptom Treatment.

...

"MATERNAL AND CHILD HEALTH BLOCK GRANT

...

"SECTION 1.1.(dd) The sum of sixty-eight thousand two hundred forty five dollars (\$68,245) eighty-one thousand six hundred twenty-two dollars (\$81,622) allocated in this section in the Maternal and Child Health Block Grant to the Department of Health and Human Services, Division of Public Health, Women and Children's Health Section, for each fiscal year of the 2019-2021 fiscal biennium the 2020-2021 fiscal year shall not be used to supplant existing State or federal funds. This allocation shall be used for a Public Health Program Consultant position assigned full-time to manage the North Carolina Perinatal Health Strategic Plan and provide staff support for the stakeholder work group.

...

"COMMUNITY SERVICES BLOCK GRANT

"SECTION 1.1.(gg) Upon development, implementation, and approval of the centralized system described in subsection (w1) of this section, amounts not to exceed three hundred fifty-eight thousand four hundred fifty-eight dollars (\$358,458) in Community Service Block Grant funds may be budgeted for transfer to Budget Code 24410 for information technology projects for the 2020-2021 fiscal year."

SECTION 2A.1.(b) This section is effective when it becomes law.

PART III. PSYCHIATRIC PRIVILEGE EXEMPTION

SECTION 3.1.(a) G.S. 14-318.6(h) reads as rewritten:

"(h) Nothing in this section shall be construed as to require a person with a privilege under G.S. 8-53.3, 8-53.7, 8-53.8, or 8-53.12 or 8-53.12, with attorney-client privilege privilege, or a psychiatrist licensed under Article 1 of Chapter 90 of the General Statutes to report pursuant to this section if that privilege would prevent them from doing so."

SECTION 3.1.(b) This section is effective when it becomes law.

PART IV. EFFECTIVE DATE

SECTION 4.1. Except as otherwise provided, this act becomes effective October 1, 2020.

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