GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2019

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HOUSE BILL 1038
PROPOSED COMMITTEE SUBSTITUTE H1038-PCS40541-MGa-18

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Short Title: Omnibus COVID-19 Response Funds. (Public) Sponsors: Referred to: April 28, 2020 A BILL TO BE ENTITLED AN ACT MAKING OMNIBUS APPROPRIATIONS OF FEDERAL FUNDS FOR COVID-19 RESPONSE AND RELIEF EFFORTS IN NORTH CAROLINA, AS RECOMMENDED BY THE HOUSE SELECT COMMITTEE ON COVID-19. The General Assembly of North Carolina enacts: PART I. GENERAL PROVISIONS TITLE OF ACT **SECTION 1.1.** Title. – This act shall be known, and may be cited, as the "Omnibus COVID-19 Response Act of 2019." **DEFINITIONS SECTION 1.2.** Definitions. – The following definitions apply in this act: Coronavirus Relief Fund. - Funds received by the State of North Carolina (1) during the 2019-2020 fiscal year from the Coronavirus Relief Fund created by the Coronavirus Aid, Relief, and Economic Security Act of 2020, P.L. 116-136. CDC. – The federal Centers for Disease Control. (2) Coronavirus or COVID-19. – Has the same meaning as defined in section 506 (3) of the federal Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020, Public Law No. 116-123. COVID-19 diagnostic test. – A test the federal Food and Drug Administration (4) has authorized for emergency use or approved to detect the presence of the severe acute respiratory syndrome coronavirus 2. COVID-19 emergency. – The period beginning March 10, 2020, and ending (5) on the date the Governor signs an executive order rescinding Executive Order No. 116 (2020), Declaration of a State of Emergency to Coordinate Response and Protective Actions to Prevent the Spread of COVID-19. COVID-19 Recovery Legislation. - The following legislation enacted by (6) Congress: The Coronavirus Aid, Relief, and Economic Security (CARES) Act, a. P.L. 116-136. The Families First Coronavirus Response Act, P.L. 116-127. b. The Coronavirus Preparedness and Response Supplemental c. Appropriations Act, 2020, P.L. 116-123.



- (7) COVID-19 antibody test. A serological blood test the federal Food and Drug Administration has authorized for emergency use or approved to measure the amount of antibodies or proteins present in the blood when the body is responding to an infection caused by the severe acute respiratory syndrome coronavirus 2.
 - State agency. -- As defined by G.S. 143C-1-1(24), except that the term includes a unit of local government or a public authority.

FINDINGS AND PURPOSE

(8)

SECTION 1.3. On March 19, 2020, the Speaker of the House of Representatives empaneled the House Select Committee on COVID-19 (Select Committee). The primary purpose of the Select Committee and each of its constituent working groups was to facilitate a bipartisan and immediately productive response to the COVID-19 outbreak in North Carolina. The four working groups were as follows: Economic Support, Health Care, Education, and Continuity of State Operations. Each working group held numerous public meetings online, received voluminous public comments, and heard testimony from various executive branch officials and others regarding the State of Emergency declared by the Governor on March 10, 2020 in Executive Order Number 116. The purpose of this act is to carryout legislative proposals generated by the Select Committees and to appropriate federal funding under the COVID-19 Recovery Legislation.

REQUIREMENT TO MAXIMIZE USE OF FEDERAL FUNDS

SECTION 1.4. The appropriations and allocations made in this act are for maximum amounts necessary to implement this act. State agencies shall maximize the use of federal funds made available in this act to address wherever possible within the allowable uses prior to using State funds.

CONFLICT WITH FEDERAL LAW

SECTION 1.5. If an allocation made under this act is found to be disallowed by federal law, the disallowed allocation is repealed, and the Office of State Budget and Management (OSBM) shall transfer the amount of the disallowed allocation to the Coronavirus Relief Reserve established in Section 2.1 of this act. Amounts transferred into the Coronavirus Relief Reserve pursuant to this section are receipts that do not constitute an "appropriation made by law," as that phrase is used in Section 7(1) of Article V of the North Carolina Constitution.

GENERAL GUIDANCE ON USE OF FUNDS

SECTION 1.6. The OSBM shall work with the recipient State agencies to budget receipts awarded pursuant to COVID-19 Recovery Legislation according to the program needs and within the parameters of the respective granting entities and applicable federal laws and regulations. State agencies shall not use funds received pursuant to COVID-19 Recovery Legislation for recurring purposes. Depending on the nature of the award, additional State personnel may be employed on a temporary or time-limited basis.

REQUIRED REPORT ON USE OF FUNDS

SECTION 1.7. In addition to any report required under this act or any other law, OSBM shall provide a report to the Joint Legislative Commission on Governmental Operations and the Fiscal Research Division by March 1, 2021, detailing the use of funds allocated under Section 3.3 of this act. Additionally, each State agency or department that receives federal grant funds under this act shall provide a report to the Joint Legislative Commission on Governmental Operations and the Fiscal Research Division no later than 90 days from the day the grant period ends detailing the use of funds. The report required from OSBM under this section shall include

the amount of funds allocated to each State agency, State department, and nonprofit organization, how the funds were used by each State agency, State department, and nonprofit organization, and the amount of funds allocated to each State agency, State department, and nonprofit organization that remained unspent as of December 30, 2020. The report required from each State agency or department that receives federal grant funds under this act shall include the amount of funds granted, the source of the funds, how the funds were used, and the amount of funds that remained unspent at the end of the grant period.

AUDIT REQUIREMENT

SECTION 1.8. The State Auditor shall conduct a preliminary financial audit and a final performance audit of the Coronavirus Relief Fund created by this act no later than March 1, 2021.

DEPARTMENTAL RECEIPTS

SECTION 1.9. Departmental receipts, as defined in G.S. 143C-1-1, are appropriated for the 2019-2020 fiscal year and the 2020-2021 fiscal year up to the amounts needed to implement the provisions in this act for the corresponding fiscal year.

PART II. COVID-19 RELIEF RESERVES AND FUNDS ESTABLISHED

CORONAVIRUS RELIEF RESERVE

SECTION 2.1. The State Controller shall establish a Coronavirus Relief Reserve (Reserve) in the General Fund to maintain federal funds received from the Coronavirus Relief Fund created under the CARES Act, P.L. 116-136, to mitigate the impact of the COVID-19 outbreak in North Carolina. The State Controller shall transfer funds to the Coronavirus Relief Fund established in Section 2.2 of this act only as needed to meet the appropriations set out in this act and only upon request of the Director of the Budget. Funds reserved in the Reserve do not constitute an "appropriation made by law," as that phrase is used in Section 7(1) of Article V of the North Carolina Constitution.

CORONAVIRUS RELIEF FUND

SECTION 2.2. The Coronavirus Relief Fund (Fund) is established. The purpose of the Fund is to provide necessary and appropriate relief and assistance from the effects of COVID-19, consistent with the provisions of this act and subsequent legislation addressing the effects of COVID-19. The Fund shall be maintained as a special fund and administered by OSBM to carry out the provisions of this and subsequent acts necessitated as a result of the COVID-19 outbreak. All funds allocated from the Fund must be used for necessary expenditures incurred due to the public health emergency with respect to the COVID-19 outbreak. Only expenditures incurred during the period that begins on March 1, 2020, and ends on December 30, 2020, are eligible for funding from this Fund.

PART III. TRANSFER, APPROPRIATIONS, AND ALLOCATIONS

TRANSFER OF FUNDS FROM RELIEF RESERVE TO RELIEF FUND

SECTION 3.1. Transfer of Funds from Relief Reserve to Relief Fund. – The State Controller shall transfer the sum of one billion six hundred thirty-five million five hundred sixty-seven thousand twenty-nine dollars (\$1,635,567,029) for the 2019-2020 fiscal year from the Reserve established in Section 2.1 of this act to the Fund established in Section 2.2 of this act.

APPROPRIATION OF FUNDS FROM RELIEF FUND TO OSBM

SECTION 3.2. Appropriation of Funds from Relief Fund to OSBM. – There is appropriated from the Fund to OSBM the sum of one billion six hundred thirty-five million five hundred sixty-seven thousand twenty-nine dollars (\$1,635,567,029) in nonrecurring funds for the 2019-2020 fiscal year to be allocated and used as provided in Section 3.3 of this act. The funds appropriated in this section shall not revert at the end of the 2019-2020 fiscal year, but shall remain available to expend until December 30, 2020.

ALLOCATION OF FUNDS APPROPRIATED TO OSBM

SECTION 3.3. Allocations of Funds. – OSBM shall allocate the funds appropriated in Section 3.2 of this act as follows:

- (1) \$80,000,000 to the Department of Public Instruction for school nutrition services provided in response to COVID-19 by public school units participating in the National School Lunch Program or School Breakfast Program from March 16, 2020, through the end of the 2019-2020 school year. Funds for these services shall be allocated in the same manner as if the participating public school units were reimbursed by school meal receipts or federal funds.
- \$299,000 to the Department of Public Instruction to work with the Friday Institute for Educational Innovation at North Carolina State University, in response to COVID-19, to develop and test different approaches of (i) reducing long-term disparities in Internet connectivity among students and (ii) improving students' digital development.
- (3) \$1,348,500 to the Department of Public Instruction to improve Internet connectivity for students, in response to COVID-19, by installing Internet access points in school buses.
- (4) \$21,200,000 to the Department of Public Instruction to improve Internet connectivity for students, in response to COVID-19, by providing community and home mobile Internet access points.
- (5) \$35,000,000 to the Department of Public Instruction to be allocated to local school administrative units, charter schools, regional schools, and other elementary or secondary schools operated by the State Board of Education to purchase computers or other electronic devices for use by students in response to COVID-19.
- (6) \$7,420,000 to the Department of Public Instruction to be allocated to local school administrative units, charter schools, regional schools, and other elementary or secondary schools operated by the State Board of Education to purchase computers or other electronic devices for use by school personnel in response to COVID-19.
- (7) \$4,900,000 to the Department of Public Instruction to purchase pre-packaged digital curricula for grades kindergarten through twelve in response to COVID-19.
- (8) \$5,550,000 to the Department of Public Instruction, in response to COVID-19, to (i) establish a statewide shared cybersecurity infrastructure to protect school business systems and minimize instructional disruption and (ii) for district cybersecurity monitoring and support through the School Connectivity Initiative.
- (9) \$35,000,000 to the Department of Public Instruction to be allocated in a manner consistent with the formula for the Instructional Support Allotment. These funds shall be used for school health support personnel to provide additional physical and mental health support services for students in response to COVID-19, including remote and in-person physical and mental health

support services. For purposes of this subdivision, the term "school health support personnel" shall refer to school counselors, school nurses, school psychologists, and school social workers.

- (10) \$70,000,000 to the Department of Public Instruction to be allocated to local school administrative units, charter schools, and the Innovative School District to provide a supplemental summer learning program for students whose learning has been negatively affected by the impacts of COVID-19, in accordance with the following:
 - a. The summer learning program shall include the following:
 - 1. Reading interventions for students who were in kindergarten through grade three during the 2019-2020 school year who were not on track to meet 2019-2020 year-end expectations based on diagnostic assessments completed prior to March 16, 2020.
 - 2. Reading interventions for students who were in grade four during the 2019-2020 school year who were not on track to meet 2019-2020 year-end expectations as identified by their 2019-2020 school year reading teachers.
 - 3. Math interventions for students who were in kindergarten through grade four during the 2019-2020 school year who were not on track to meet 2019-2020 year-end expectations as identified by their 2019-2020 school year math teachers.
 - b. Of the funds appropriated by this subdivision for summer reading programs, at least thirty-five million dollars (\$35,000,000) shall be used to provide reading interventions for students who were in grades two and three during the 2019-2020 school year. Of these funds, any unexpended funds at the conclusion of the summer learning program shall be used prior to December 30, 2020 to provide supplemental literacy support for students in grade four during the 2020-2021 school year who are not on track to meet 2020-2021 year-end expectations, as identified by their 2020-2021 school year reading teachers.
 - c. Any unexpended funds for (i) reading interventions for students in kindergarten, grade one, or grade four during the 2019-2020 school year and (ii) math interventions for students in kindergarten through grade four during the 2019-2020 school year shall be used prior to December 30, 2020, to provide supplemental literacy or math support, as appropriate, to students in grades one through five during the 2020-2021 school year who are not on track to meet 2020-2021 year-end expectations as identified by their respective 2020-2021 school year reading or math teachers.
 - d. Funds provided for summer learning programs may be used to deliver interventions and instruction to participating students using methods such as digital resources, printed materials, literacy coaches, and face-to-face instruction.

The governing body of a public school unit receiving funds under this subdivision shall consult with 2019-2020 school year teachers of kindergarten through fourth grade students to develop summer learning program plans that deliver targeted instruction to students participating in the summer learning program. Each public school unit's plan shall comply with the requirements of any executive order in effect at the time of the summer learning program, including requirements on the use of public school buildings, and shall comply

with social distancing and other public health guidelines provided by the Department of Health and Human Services. No later than May 31, 2020, local school administrative units and the Innovative School District shall submit their summer learning program plans to the Department of Public Instruction. Summer learning programs shall not be included in scheduled instructional time for the 2020-2021 school year calendar, but shall provide a supplement to that instruction in order to better prepare students for academic success during the 2020-2021 school year, despite the impacts of COVID-19. Each public school unit receiving funds under this subdivision is encouraged to identify or prepare resources and strategies that parents or guardians can provide at home for students who qualify for a summer learning program and who (i) do not attend or (ii) attend and would like additional material. No later than February 15, 2021, the State Board of Education shall report to the Joint Legislative Education Oversight Committee on the implementation of this subdivision and the use of funds for summer learning programs.

- (11) \$1,488,000 to the Department of Public Instruction to assist and support public school units in providing remote instruction in response to the impacts of COVID-19 by expanding the learning management platform provided by the Department of Public Instruction to local school administrative units, charter schools, regional schools, the Innovative School District, and any other public school units, in the discretion of the Department.
- (12) \$5,000,000 to the Department of Public Instruction to provide nondigital remote instruction resources to students with limited connectivity, in order to continue learning growth during the school closure period related to COVID-19.
- (13) \$17,900,000 to the Department of Public Instruction to provide Extended School Year Services or future services, as appropriate, to exceptional children who qualify for these services due to the impacts of COVID-19.
- (14) \$621,000 to the Department of Public Instruction for the Governor Morehead School for the Blind, Eastern North Carolina School for the Deaf, and North Carolina School for the Deaf for school nutrition, cleaning and sanitizing, digital and nondigital remote learning resources, compensatory services, and Extended School Year Services related to the impacts of COVID-19.
- (15) \$6,000,000 to the Department of Public Instruction for the Extended Learning and Integrated Student Supports Competitive Grant Program (Program) for the 2019-2020 and 2020-2021 fiscal years. Of these funds, the Department of Public Instruction may use up to two hundred thousand dollars (\$200,000) to administer the Program. The purpose of the Program is to fund high-quality, independently validated extended learning and integrated student support service programs for at-risk students whose learning has been negatively affected by COVID-19 impacts. The programs funded shall raise standards for student academic outcomes by focusing on the following:
 - a. Use of an evidence-based model with a proven track record of success.
 - b. Inclusion of rigorous, quantitative performance measures to confirm effectiveness of the program.
 - c. Deployment of multiple tiered supports in schools to address student barriers to achievement, such as strategies to improve chronic absenteeism, antisocial behaviors, academic growth, and enhancement of parent and family engagement.
 - d. Alignment with State performance measures, student academic goals, and the North Carolina Standard Course of Study.

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- e. Prioritization in programs to integrate clear academic content, in particular, science, technology, engineering, and mathematics (STEM) learning opportunities or reading development and proficiency instruction.
- f. Minimization of student class size when providing instruction or instructional supports and interventions.
- g. Expansion of student access to high-quality learning activities and academic support that strengthen student engagement and leverage community-based resources, which may include organizations that provide mentoring services and private-sector employer involvement.
- h. Utilization of digital content to expand learning time, when appropriate.

Grants shall be used to award funds for new or existing eligible programs for at-risk students operated by (i) nonprofit corporations and (ii) nonprofit corporations working in collaboration with local school administrative units. Grant participants are eligible to receive grants in an amount of up to five hundred thousand dollars (\$500,000) each year. Programs should focus on serving (i) at-risk students not performing at grade level as demonstrated by statewide assessments or not on-track to meet year-end expectations as of March 16, 2020 as demonstrated by existing indicators including teacher identification, (ii) students at risk of dropout, and (iii) students at risk of school displacement due to suspension or expulsion as a result of antisocial behaviors. Priority consideration shall be given to applications demonstrating models that focus services and programs in schools that are identified as low-performing, pursuant to G.S. 115C-105.37. A grant participant shall provide certification to the Department of Public Instruction that the grants received under the program shall be matched on the basis of three dollars (\$3.00) in grant funds for every one dollar (\$1.00) in nongrant funds. Matching funds shall not include State funds. The Department shall also give priority consideration to an applicant that is a nonprofit corporation working in partnership with a local school administrative unit resulting in a match utilizing federal funds under Part A of Title I of the Elementary and Secondary Education Act of 1965, as amended, or Title IV of the Higher Education Act of 1965, as amended, and other federal or local funds. Matching funds may include in-kind contributions for up to fifty percent (50%) of the required match. A nonprofit corporation may act as its own fiscal agent for the purposes of this Program. Grant recipients shall report to the Department of Public Instruction for the year in which grant funds were expended on the progress of the Program, including alignment with State academic standards, data collection for reporting student progress, the source and amount of matching funds, and other measures. Grant recipients shall also submit a final report on key performance data, including statewide test results, attendance rates, graduation rates, and promotion rates, and financial sustainability of the program. The Department of Public Instruction shall provide a report on the Program to the Joint Legislative Education Oversight Committee by February 15, 2021. The report shall include the results of the Program and recommendations regarding effective program models, standards, and performance measures based on student performance, leveraging of community-based resources to expand student access to learning activities, academic and behavioral support services, and potential opportunities for the State to invest in proven models for future grants programs.

- (16) \$25,000,000 to the Community Colleges System Office to be used by the System Office and to be allocated to community college campuses for the following purposes to effectively respond to COVID-19 impacts: (i) to enhance online learning capacity and cover increased costs associated with moving to online education for students, (ii) to cover necessary eligible expenses for resources and supports for faculty and staff, (iii) to provide Small Business Center counselors for small business needs, (iv) to cover expenses for expanded demands on information technology, including devices for campuses in rural areas, and (v) to provide facility sanitation and other necessary eligible expenses for services for ongoing campus operations.
- (17) \$48,690,529 to the Board of Governors of The University of North Carolina to be allocated to constituent institutions for the following purposes to effectively respond to COVID-19 impacts: (i) to cover increased costs related to moving coursework and exams online, (ii) to implement a digital learning accelerator, (iii) to provide for facility sanitation prior to reopening campuses and during the operation of campuses and for other necessary eligible expenses for services for ongoing campus operations, and (iv) to cover necessary eligible expenses for assistance to students and employees, including counseling services and information technology support.
- (18) \$30,000,000 to the Board of Governors of The University of North Carolina to be allocated to the State Education Assistance Authority (Authority) for the Authority to provide funds to each eligible private postsecondary institution, as defined in G.S. 116-280(3), by apportioning an amount equal to the following:
 - a. Seventy-five percent (75%) of the institution's relative share of full-time equivalent students who were enrolled as of March 13, 2020, who received scholarships pursuant to Article 34 of Chapter 116 of the General Statutes for the spring semester of the 2019-2020 academic year.
 - b. Twenty-five percent (25%) of the institution's relative share of full-time equivalent students who were enrolled as of March 13, 2020, who had not received scholarships pursuant to Article 34 of Chapter 116 of the General Statutes for the spring semester of the 2019-2020 academic year.

These funds shall be used to transition to online education for students, for necessary eligible institutional expenditures related to COVID-19, and to provide funds for students and families impacted by COVID-19. An eligible postsecondary institution receiving funds pursuant to this subdivision shall not use these funds for purposes other than for actions taken to respond to COVID-19 in accordance with the provisions of this act and in compliance with federal law requirements.

- (19) \$110,000,000 to OSBM to establish the COVID-19 Response Research Fund. OSBM shall allocate the monies from the fund as follows:
 - a. \$100,000,000 shall be allocated to the North Carolina Policy Collaboratory (Collaboratory) at the University of North Carolina at Chapel Hill to coordinate efforts among entities being provided funds pursuant to this subdivision. The Collaboratory shall facilitate best practices and strategies for those entities to maximize resources and achieve a comprehensive response to COVID-19. The Collaboratory may assemble an advisory panel of representatives from entities receiving funds pursuant to this subdivision as necessary to discuss,

review, and analyze progress towards meeting the goals for the use of the funds. Funds shall be provided to the following entities to be used for (i) the rapid development of a countermeasure of neutralizing antibodies and other strategies for COVID-19 that can be used as soon as possible to both prevent infection, and for those infected, treat infection, (ii) bringing a safe and effective COVID-19 vaccine to the public as soon as possible, (iii) community testing initiatives, and (iv) other research related to COVID-19:

- 1. \$25,000,000 shall be allocated to the Duke University Human Vaccine Institute (DHVI) of the Duke University School of Medicine.
- 2. \$25,000,000 shall be allocated to the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill
- 3. \$25,000,000 shall be allocated to the Brody School of Medicine at East Carolina University.
- 4. \$25,000,000 shall be allocated to the Wake Forest School of Medicine.
- b. \$10,000,000 shall be allocated to the Campbell University School of Osteopathic Medicine for a community and rural-focused primary care workforce response to COVID-19, including, but not limited to, (i) supporting community testing initiatives, (ii) providing treatment in community-based health care settings, (iii) monitoring rural populations, (iv) educating health professionals on best practices for a pandemic response, and (v) supporting rural communities through primary care.

By September 1, 2020, the Collaboratory, DHVI, Gillings School of Global Public Health, Brody School of Medicine, and Wake Forest School of Medicine shall submit a report to the House Appropriations Subcommittee on Health and Human Services, the Senate Appropriations Committee on Health and Human Services, and the Joint Legislative Oversight Committee on Health and Human Services on all of the following:

- a. Progress on the development of a countermeasure, other strategies, and a vaccine for COVID-19.
- b. Findings from the community testing initiatives.
- c. Other research related to COVID-19.
- d. A breakdown of all expenditures from the appropriated funds received under this subdivision.
- e. The source and amount of all other funds received for the purposes described in this subdivision.

By September 1, 2020, Campbell University School of Osteopathic Medicine shall report to the House Appropriations Subcommittee on Health and Human Services, the Senate Appropriations Committee on Health and Human Services, and the Joint Legislative Oversight Committee on Health and Human Services on all of the following:

- a. Findings from the supported community testing initiatives.
- b. A description of the education provided to health professionals.
- c. Best practices for treating rural populations and supporting community-based hospitals during a pandemic.
- d. A breakdown of all expenditures from the appropriated funds received under this subdivision.

- e. The source and amount of all other funds received for the purposes described in this subdivision.
- (20) \$25,000,000 to the Department of Health and Human Services to support public health efforts, the State Laboratory of Public Health, local health departments, and rural health providers in building capacity to respond to the COVID-19 pandemic.
- (21) \$25,000,000 to the Department of Health and Human Services to provide funds to support behavioral health and crisis services to respond to the COVID-19 pandemic. These funds shall be used for at least all of the following purposes:
 - a. To divert individuals experiencing behavioral health emergencies from emergency departments.
 - b. To allocate \$12,600,000 to be distributed as a one-time payment to each local management entity/managed care organization (LME/MCO) for the purposes of providing temporary additional funding assistance for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) services on a per diem basis.
- (22) \$40,000,000 to the Department of Health and Human Services, Division of Health Benefits, for coverage of additional costs related to the Medicaid program, including any of the following costs:
 - a. Funding for the support of COVID-19 related priorities in the Medicaid program as they evolve, including additional provider support for long-term care, primary care, and other providers most at risk of insolvency as a result of severely disrupted revenue during the COVID-19 pandemic.
 - b. Additional funding for COVID-19 testing and the treatment of patients who test positive for COVID-19.
 - c. Costs associated with increased enrollment due to the COVID-19 pandemic.
- (23) \$50,000,000 to OSBM for allocation to the Department of Health and Human Services and the Division of Emergency Management within the Department of Public Safety for the following purposes:
 - a. To purchase personal protective equipment that meets CDC guidelines for infection control. As used in this section, personal protective equipment includes gloves, gowns and aprons, surgical and respiratory masks, goggles, face shields, and other protective clothing that meet CDC guidelines for infection control.
 - b. To purchase other supplies and equipment related to emergency protective measures to address immediate threats to life, public health, and safety related to COVID-19, such as ventilators, touch-free thermometers, disinfectant, and sanitizing wipes.

Any supplies and equipment purchased with funds allocated in this subdivision may be made available to both public and private health care providers and other entities the Department of Health and Human Services or the Division of Emergency Management deem essential to the State's response to COVID-19. The Department of Health and Human Services and the Division of Emergency Management shall ensure that funds appropriated in this subdivision are expended in a manner that does not adversely affect any person's or entity's eligibility for federal funds that are made available, or that are anticipated to be made available, as a result of the COVID-19 pandemic. The Department of Health and Human Services and the Division of

Emergency Management shall also, to the extent practicable, avoid using State funds to cover costs that will be, or likely will be, covered by federal funds.

- \$25,000,000 to the Department of Health and Human Services to expand public and private initiatives for COVID-19 testing, contact tracing, and trends tracking and analysis through, but not limited to, all of the following ways:
 - a. Building capacity for widespread COVID-19 diagnostic testing to enable rapid case-based interventions.
 - b. Building capacity for widespread COVID-19 antibody testing to enable rapid deployment when such testing becomes available.
 - c. Expanding contact tracing workforce and infrastructure to routinely identify potentially exposed persons and take appropriate public health actions.
 - d. Increasing research and data tools and analysis infrastructure to support better predictive models, surveillance and response strategies.
- (25) \$25,000,000 to the Department of Health and Human Services to provide funding for (i) adult and child protective services response, (ii) support for homeless and domestic violence shelters and housing security, including prevention, diversion, and rapid re-housing assistance, (iii) child care response, and (iv) technology modifications to support COVID-19 emergency relief beneficiaries.
 - a. From funds received pursuant to this subdivision, the sum of \$6,000,000 is allocated equally among each of the six food banks in this State in support of responses to the COVID-19 emergency.
 - b. From funds received pursuant to this subdivision, the sum of \$2,500,000 is allocated to Reinvestment Partners, a nonprofit organization, for its Produce Prescription Program, which provides a monthly forty-dollar (\$40.00) per household benefit for each eligible Food and Nutrition Services recipient enrolled by the recipient's health care provider, in serving individuals impacted by the COVID-19 emergency.
 - c. Subparagraph b. of this subdivision is effective when it becomes law and expires three months from the date this section becomes effective. The remainder of this subdivision is effective when it becomes law.
- \$2,250,000 to the Department of Health and Human Services, Division of Social Services, to assist in serving children in foster care during the COVID-19 emergency. These funds shall be used for monthly supplemental payments in the amount of one hundred dollars (\$100.00) for each child receiving foster care assistance payments for the months of April 2020 through June 2020.
- \$25,000,000 to the Department of Health and Human Services, Division of Social Services, for facilities licensed to accept State-County Special Assistance. These funds shall be used to provide a one-time payment to these facilities to offset the increased costs of serving residents during the COVID-19 emergency. Each eligible facility shall receive an amount equal to one thousand three hundred twenty-five dollars (\$1,325) for each resident of the facility who is a recipient of State-County Special Assistance between March 10, 2020, through July 30, 2020. In the case of a recipient who transfers from one facility to another during this time period, only the first eligible facility of residence will receive the payment authorized under this section. Nothing in this section shall be construed as an obligation by the General

Assembly to appropriate funds for the purpose of this section, or as an entitlement by any facility, resident of a facility, or other person to receive financial assistance under this section. The following definitions apply in this section:

- a. Facility licensed to accept State-County Special Assistance payments.
 Any residential care facility that is (i) licensed by the Department of Health and Human Services and (ii) authorized to accept State-County Special Assistance payments from its residents.
- b. State-County Special Assistance. The program authorized by G.S. 108A-40.
- (28) \$25,000,000 to the Department of Health and Human Services to provide funds to support rural and underserved communities especially hard hit by the COVID-19 pandemic, which may include directed grants to health care providers other than rural hospitals; targeted Medicaid assistance for rural providers; enhanced telehealth services; transportation for critical services; health care security for the uninsured; and other related purposes. These funds may be used to fund items not addressed by federal relief funds or as needed to address critical health care needs until federal funds are received for such purposes.
- (29)\$75,000,000 to the OSBM to provide a directed grant to the North Carolina Healthcare Foundation (NCHF), a nonprofit corporation. NCHF shall use these funds to award grants to rural hospitals to offset expenses incurred for providing patient care in North Carolina to respond to the COVID-19 pandemic. NCHF shall award grants to eligible rural hospitals within 30 days after receipt of an application and on the basis of need according to tier designation, county health ranking, and hospital-specific financial data. NCHF shall provide technical assistance to grant recipients for a period of five years following distribution of funds to (i) ensure that funds are utilized according to the intended purpose, (ii) assist recipient facilities in interpreting and implementing waivers and other federal guidance related to COVID-19 response and recovery, and (iii) support recipient facilities in preparing for post-COVID-19 sustainability. Grant recipients shall not use these funds for any purpose other than to offset the following costs related to patient care provided in North Carolina as a result of the COVID-19 pandemic:
 - a. Up to sixty percent (60%) of lost revenues from foregone elective procedures during the emergency period, net of federal funds received from the CARES Act.
 - b. Supplies and equipment purchased in accordance with Centers for Disease Control guidelines.
 - c. Rapidly ramping up infection control and triage training for health care professionals.
 - d. Retrofitting separate areas to screen and treat patients with suspected COVID-19 infections, including isolation areas in or around hospital emergency departments.
 - e. Increasing the number of patient care beds to provide surge capacity.
 - f. Transporting patients with confirmed or suspected COVID-19 safely to or from rural facilities.
 - g. Planning, training, and implementing expanded telehealth capabilities.
 - h. Procuring staff or consultants to help mitigate the burden of extensive review of new and incoming federal and State regulatory guidelines.
 - i. Salary support for furloughed employees.

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- By November 1, 2020, grant recipients shall submit to NCHF a detailed written report on the use of the funds appropriated in this subdivision. By December 1, 2020, NCHF shall submit to OSBM, the Joint Legislative Oversight Committee on Health and Human Services, and the Fiscal Research Division a detailed written report on the use of funds appropriated in this subdivision, along with recommendations on how recipient facilities can prepare for post-COVID-19 sustainability.
- (30) \$1,400,000 to the Department of Health and Human Services, Division of Central Management and Support, Office of Rural Health, to provide directed grants of equal amounts to the 67 member clinics of the North Carolina Association of Free and Charitable Clinics, to offset costs for providing health care and prescription medications during the COVID-19 emergency.
- (31) \$1,500,000 to the Department of Health and Human Services to provide a directed grant to NC MedAssist, a nonprofit corporation, to offset increased costs for providing prescription assistance services during the COVID-19 pandemic to individuals who are indigent or uninsured.
- (32) \$25,000,000 to the OSBM to establish the COVID-19 Teaching Hospitals Relief Fund. OSBM shall allocate the monies in the fund as directed grants to hospitals located within the State that are classified as teaching hospitals by the Centers for Medicare and Medicaid Services, for the purpose of offsetting expenses incurred for providing patient care in North Carolina as a result of the COVID-19 pandemic. OSBM shall award grants to eligible teaching hospitals based on the amount of charitable care provided in North Carolina and the amount of lost revenue sustained within North Carolina as a result of the COVID-19 pandemic. Grant recipients shall not use these funds for any purpose other than the following to offset costs related to patient care provided in North Carolina to respond to the COVID-19 pandemic:
 - a. Up to sixty percent (60%) of lost revenues from foregone elective procedures during the COVID-19 emergency, net of federal funds received from the CARES Act.
 - b. Supplies and equipment purchased in accordance with Centers for Disease Control guidelines.
 - c. Rapidly ramping up infection control and triage training for health care professionals.
 - d. Retrofitting separate areas to screen and treat patients with suspected COVID-19 infections, including isolation areas in or around hospital emergency departments.
 - e. Increasing the number of patient care beds to provide surge capacity.
 - f. Transporting patients with confirmed or suspected COVID-19 safely to or from health care facilities.
 - g. Planning, training, and implementing expanded telehealth capabilities.
 - h. Procuring staff or consultants to help mitigate the burden of extensive review of new and incoming federal and State regulatory guidelines.
 - i. Salary support for furloughed employees.

As a condition of receiving the funds allocated in this subdivision, each grant recipient shall submit a detailed written report to the House Appropriations Subcommittee on Health and Human Services, the Senate Appropriations Committee on Health and Human Services, and the Joint Legislative Oversight Committee on Health and Human Services by December 1, 2020, that contains (i) a breakdown of all expenditures from the appropriated funds received under this section by the categories listed in this subdivision and (ii)

- the total amount of funds received from the Provider Relief Fund provided for in P.L. 116-136 and any other federal legislation passed during calendar year 2020 to support the national response to COVID-19.
- (33) \$25,000,000 to the OSBM to establish the COVID-19 General Hospitals Relief Fund. OSBM shall allocate the monies in the fund as directed grants to hospitals located within the State that are not classified as rural hospitals or teaching hospitals by the Centers for Medicare and Medicaid Services, for the purpose of offsetting expenses incurred for providing care to patients in North Carolina as a result of the COVID-19 pandemic. OSBM shall award grants to eligible large hospitals based on the amount of charitable care provided in North Carolina and the amount of lost revenue sustained within North Carolina as a result of the COVID-19 pandemic. Grant recipients shall not use these funds for any purpose other than to offset the following costs related to patient care provided in North Carolina to respond to the COVID-19 pandemic:
 - a. Up to sixty percent (60%) of lost revenues from foregone elective procedures during the emergency period, net of federal funds received from the CARES Act.
 - b. Supplies and equipment purchased in accordance with Centers for Disease Control guidelines.
 - c. Rapidly ramping up infection control and triage training for health care professionals.
 - d. Retrofitting separate areas to screen and treat patients with suspected COVID-19 infections, including isolation areas in or around hospital emergency departments.
 - e. Increasing the number of patient care beds to provide surge capacity.
 - f. Transporting patients with confirmed or suspected COVID-19 safely to or from health care facilities.
 - g. Planning, training, and implementing expanded telehealth capabilities.
 - h. Procuring staff or consultants to help mitigate the burden of extensive review of new and incoming federal and State regulatory guidelines.
 - i. Salary support for furloughed employees.

As a condition of receiving the funds allocated in this subdivision, each grant recipient shall submit a detailed written report to the House Appropriations Subcommittee on Health and Human Services, the Senate Appropriations Committee on Health and Human Services, and the Joint Legislative Oversight Committee on Health and Human Services by December 1, 2020, that contains (i) a breakdown of all expenditures from the appropriated funds received under this section by the categories listed in this subdivision and (ii) the total amount of funds received from the Provider Relief Fund provided for in P.L. 116-136 and any other federal legislation passed during calendar year 2020 to support the national response to COVID-19.

(34) \$300,000,000 to OSBM for the Department of Transportation. OSBM shall not transfer these allocated funds to the Department for use until the guidelines in "Coronavirus Relief Fund Guidance for State, Territorial, Local, and Tribal Governments" dated April 22, 2020 are revised by the United States Department of the Treasury or a subsequent act of Congress authorizes the use of funds from the Coronavirus Relief Fund for the purpose of replacing lost revenue due to the COVID-19 emergency. 30 days prior to the transfer of funds pursuant to this subsection, OSBM shall submit a report to the Joint Legislative Commission on Governmental Operations. On or before April 1,

2021, the Department shall submit a report on the status of utilizing these funds and a revenue update to the Joint Legislative Transportation Oversight Committee (JLTOC) and the Fiscal Research Division.

- (35)\$350,000,000 to OSBM for allocation to counties ineligible to receive direct funding from the federal Coronavirus Relief Fund established by the Coronavirus Aid, Relief, and Economic Security (CARES) Act, P.L. 116-136. The OSBM shall allocate these funds on a per capita basis using the US Census Bureau's Vintage 2019 county population totals, provided that no county eligible to receive an allocation under this section shall be allocated less than \$500,000. A county may allocate a portion of these funds for use by municipalities within the county, but only if the transfer qualifies as a necessary expenditure incurred due to the public health emergency and meets the other criteria of section 601(d) of the Social Security Act. Such funds are subject to recoupment by the U.S. Treasury Inspector General if they have not been used in a manner consistent with section 601(d) of the Social Security Act. Further, the funds may only be used to support expenditures by counties and municipalities that are consistent with the most recently published U.S. Treasury Department guidance for the federal Coronavirus Relief Fund. Counties and municipalities are liable to the State for any misuse or mishandling of these funds, and subject to clawback and other appropriate measures, including the reduction or elimination of other State funds. Any local government officer, official, or employee who violates this section shall be subject to a civil action by the State and held personally liable to reimburse the State. Beginning October 1, 2020, and then quarterly thereafter, each county and municipality receiving funds under this section shall report to the OSBM on the use of allocated funds until all funds are expended and accounted for.
- (36) \$30,000,000 to OSBM, for allocation to State agencies negatively impacted by the loss of anticipated receipts. OSBM shall not transfer the allocated funds to the State agencies for use until the guidelines in "Coronavirus Relief Fund Guidance for State, Territorial, Local, and Tribal Governments" dated April 22, 2020 are revised by the United States Department of the Treasury or a subsequent act of Congress authorizes the use of funds from the Coronavirus Relief Fund for the purpose of replacing lost revenue due to the COVID-19 emergency. Prior to the transfer of funds pursuant to this subsection, OSBM shall submit a report to the Joint Legislative Commission on Governmental Operations.
- \$80,000,000 to OSBM to be used for the continuity of operation needs across State government. Costs eligible under this subdivision may include, but are not limited to, covering overtime costs at mental health institutions, prisons, juvenile facilities, and veterans homes; purchasing critical information technology equipment and software licenses; enhancing telepresence services in public safety facilities and the court system; providing COVID-19 testing for employees of the Division of Prisons at the Department of Public Safety; and purchasing emergency sanitation and hygienic supplies. Provided that the United States Department of Labor does not approve additional funding for the Customer Call Center operated by the Division of Employment Security, funds may also be used to hire additional time-limited staff in the Customer Call Center to meet the unprecedented demand for services. In addition, these funds may be used for the following purposes:

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- Up to ten million dollars (\$10,000,000) of the funds allocated in this a. subdivision may be further allocated to the Department of Agriculture and Consumer Services to be used for animal depopulation and disposal activities to address possible future supply chain impacts from the closure of animal processing plants due to COVID-19.
- b. Up to two million dollars (\$2,000,000) of the funds allocated in this subdivision may be used to establish a temporary North Carolina Pandemic Recovery Office in accordance with Section 3B.1 of this act.
- Up to five hundred thousand dollars (\$500,000) of the funds allocated c. in this subdivision may be further allocated to the Office of the State Auditor to perform the requirements set forth in Section 4.2 of this act.

OSBM shall provide a report to the Joint Legislative Commission on Governmental Operations no later than August 15, 2020, detailing the allocation of funds under this subdivision. The report shall include which State agencies received allocations, the amounts disbursed, the amount spent in the 2019-2020 fiscal year, and for what purposes the funds were used by fund code and line-item detail.

PART III-A. MEDICAID COVID-19 AUTHORIZATION AND RESPONSE

MEDICAID PROVIDER RATE INCREASES

SECTION 3A.1. In addition to the five percent (5%) rate increases already requested by the Department of Health and Human Services (DHHS) in the 1135 Medicaid disaster State Plan amendment (SPA) submitted to the Centers for Medicare and Medicaid Services on April 8, 2020, for certain provider types, DHHS shall increase the fee-for-service Medicaid rates paid directly by the Division of Health Benefits for all remaining provider types by five percent (5%). The rate increases authorized under this section shall be effective March 1, 2020, through the duration of the declared nationwide public health emergency as a result of the 2019 novel coronavirus.

PROVIDE MEDICAID COVERAGE FOR COVID-19 TESTING TO UNINSURED INDIVIDUALS IN NORTH CAROLINA DURING THE NATIONWIDE PUBLIC **HEALTH EMERGENCY**

SECTION 3A.2. The Department of Health and Human Services, Division of Health Benefits (DHB), is authorized to provide the Medicaid coverage described in 42 U.S.C.A. § 1396a(a)(10)(A)(ii)(XXIII), which covers COVID-19 testing for certain uninsured individuals during the period in which there is a declared nationwide public health emergency as a result of the 2019 novel coronavirus. DHB is authorized to provide this medical assistance retroactively to the earliest date allowable.

TEMPORARY MEDICAID COVERAGE FOR THE PREVENTION, TESTING, AND **TREATMENT OF COVID-19**

SECTION 3A.3.(a) The Department of Health and Human Services, Division of Health Benefits (DHB), is authorized to provide temporary, targeted Medicaid coverage to individuals with incomes up to two hundred percent (200%) of the federal poverty level, as requested by the Secretary of the Department of Health and Human Services in the 1115 waiver application submitted to the Centers for Medicare and Medicaid Services (CMS) on March 27, 2020. If CMS grants approval for different coverage or a different population than requested in that 1115 waiver application, DHB may implement the approved temporary coverage, provided that all the following criteria are met:

- (1) The coverage is only provided for a limited time period related to the declared nationwide public health emergency as a result of the 2019 novel coronavirus.
- (2) The coverage is not provided for services other than services for the prevention, testing, or treatment of COVID-19.
- (3) The income level to qualify for the coverage does not exceed two hundred percent (200%) of the federal poverty level.

SECTION 3A.3.(b) The Department of Health and Human Services, Division of Health Benefits, is authorized to provide this Medicaid coverage retroactively to the earliest date allowable.

IMPLEMENT TEMPORARY PROVIDER ENROLLMENT CHANGES AUTHORIZED UNDER THE MEDICAID 1135 WAIVER

SECTION 3A.4. In order for the Department of Health and Human Services, Division of Health Benefits, to implement the temporary provider enrollment changes under the 1135 waiver approved by the Centers for Medicare and Medicaid Services for the North Carolina Medicaid program and NC Health Choice program, the following statutes shall not apply to the North Carolina Medicaid program and the NC Health Choice program from March 1, 2020, through the duration of the declared nationwide public health emergency as a result of the 2019 novel coronavirus:

- (1) G.S. 108C-2.1.
- (2) G.S. 108C-4(a).
- (3) G.S. 108C-9(a) with respect to any required trainings prior to enrollment.
- (4) G.S. 108C-9(c).

PART III-B. ESTABLISHMENT OF TEMPORARY PANDEMIC RECOVERY OFFICE

SECTION 3B.1. OSBM shall establish a temporary North Carolina Pandemic Recovery Office (Office) to oversee and coordinate funds made available under COVID-19 Recovery Legislation. This Office shall also provide technical assistance and ensure coordination of federal funds received by State agencies and local governments and ensure proper reporting and accounting of all funds. The authorization set forth in this section expires 12 months from the effective date of this act and the Office shall cease to operate upon expiration of the authorization.

PART IV. ADDITIONAL ALLOCATIONS AND APPROPRIATIONS

APPROPRIATION OF COVID-19 FEDERAL GRANT FUNDS AND RECEIPTS

SECTION 4.1.(a) Except for funds subject to subsection (c) of this section or Section 2.1 of this act, funds received from federal grants authorized under the COVID-19 Recovery Legislation are appropriated in the amounts provided in the notification of award from the federal government or any entity acting on behalf of the federal government to administer the federal funds. State agencies may, with approval of the Director of the Budget, spend funds received from federal receipts and federal grants resulting from enactment of the COVID-19 Recovery Legislation that are not otherwise subject to Section 2.1 of this act. Section 2.2(c) of S.L. 2019-192 shall not apply to grant funds received under the COVID-19 Recovery Legislation.

SECTION 4.1.(b) The programs and grant amounts in the schedule set forth in this subsection are estimates of North Carolina's allocations from the COVID-19 Recovery Legislation to be deposited in the State's Treasury and administered by State agencies. This schedule is meant to be illustrative of federal grants that have, or will be, received by the State in addition to the approximately three billion five hundred million dollars (\$3,500,000,000) from the Coronavirus Relief Fund created under the CARES Act, P.L. 116-136. These amounts are

not inclusive of federal funds distributed or paid directly to individuals, businesses, health care providers, or private postsecondary institutions:

2	providers, or private postsecondary institutions:	
3	<u>Program</u>	<u>Amount</u>
4	Governor's Emergency Education Relief Fund	\$95,600,000
5	Elementary and Secondary School Emergency Relief Fund	\$396,300,000
6	Higher Education Emergency Relief Fund	\$179,700,000
7	Child Care and Development Block Grant	\$118,100,000
8	Community Services Block Grant	\$25,900,000
9	Low Income Home Energy Assistance Program	\$49,900,000
10	Child Welfare Services	\$1,600,000
11	Supportive Services	\$6,200,000
12	Congregate and Home-Delivered Meals	\$7,400,000
13	Congregate and Home-Delivered Meals	\$14,800,000
14	Family Caregivers	\$3,100,000
15	Protection of Vulnerable Older Americans	\$600,000
16	Centers for Independent Living	\$2,200,000
17	Ryan White HIV/AIDS	\$1,100,000
18	CDC Grant	\$13,800,000
19	Minimum CDC Grant	\$15,400,000
20	Homeless Assistance/ ESG – State	\$18,400,000
21	Housing Opportunities for Persons with AIDS	\$1,200,000
22	Supplemental Nutrition Program for Women, Infants, and Children	\$13,900,000
23	Community Health Center	\$78,000
24	Small Rural Hospital Improvement Program	\$2,500,000
25	Hospital Preparedness Program	\$770,000
26	Emergency Grant to Address SA	\$2,000,000
27	Unemployment Insurance Base – Administration	\$22,500,000
28	Unemployment Insurance Supplemental – Administration	\$22,500,000
29	Dislocated Worker Grants	\$6,000,000
30	Emergency Food Assistance Program (TEFAP) Commodities	\$19,700,000
31	TEFAP Administration	\$8,200,000
32	Manufacturing Extension	\$1,500,000
33	CDBG – State	\$28,500,000
34	National Endowment for the Arts	\$507,000
35	Institute for Museum and Library Sciences	\$948,000
36	Justice Assistance Grants – State	\$15,400,000
37	Emergency Performance Management Grant	\$2,600,000
38	Family Violence Prevention	\$777,000
39	Urbanized Area Formula Program	\$38,473,000
40	Formula Grants for Rural Area Program	\$94,941,000
41	Airports Grants	\$2,765,000
42	Total Estimated Funding	\$1,235,859,000

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LIMITATION ON STATE BOARD OF ELECTIONS BUDGETING

SECTION 4.1.(c) It is the intent of the General Assembly to address the State's additional elections needs resulting from the COVID-19 pandemic in separate legislation. Therefore, and notwithstanding any law to the contrary, no funds appropriated in this act and no funds appropriated in the budget of the State Board of Elections for the 2019-2020 fiscal year shall be expended to meet the matching requirements for additional federal funds awarded to the State after enactment of S.L. 2019-239.

PART '	V.	SEVER	ABIL	ITY
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SECTION 5.1. If any provision of this act is declared unconstitutional or invalid by the courts, it does not affect the validity of this act as a whole or any part other than the part declared unconstitutional or invalid.

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PART VI. EFFECTIVE DATE

7 **SECTION 6.1.** Except as otherwise provided, this act is effective when it becomes 8 law.