

DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF GOVERNMENT AFFAIRS

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH
SECRETARY

M. BEN POPKIN, JD, MPH ASSISTANT SECRETARY FOR LEGISLATION

March 31, 2017

SENT VIA ELECTRONIC MAIL

The Honorable Tim Moore, Co-Chair Joint Legislative Commission on Governmental Operations North Carolina General Assembly Room 2304, Legislative Building Raleigh, NC 27601-1096 The Honorable Phil Berger, Co-Chair Joint Legislative Commission on Governmental Operations North Carolina General Assembly Room 2007, Legislative Building Raleigh, NC 27601-2808

Dear Chairmen:

North Carolina General Statute 143B-10(d) requires the Department of Health and Human Services to submit an annual report listing committees or councils that have been created to consult and advise the Department, the total membership on each, the cost in the last 12 months and the source of funding, and the title of the person who made the appointments to the Joint Legislative Commission on Governmental Operations by March 31 of each year.

Pursuant to the provisions of law, the Department is pleased to submit the attached report.

Sincerely,

Ben Popkin

Assistant Secretary for Legislation

cc: Lindsey Dowling Joyce Jones

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Department of Health and Human Services Committees and Councils March 31, 2017

Reporting Requirement:

§ 143B-10. Powers and duties of heads of principal departments.

department. The General Assembly declares its policy that insofar as feasible, such committees or councils shall consist of no more than 12 members, with not more than one from each congressional district. If any department head desires to vary this policy, he must make a request in writing to the Governor, stating the reasons for the request. The Governor may approve the request, but may only do so in writing. Copies of the request and approval shall be transmitted to the Joint Legislative Commission on Governmental Operations. The members of any committee or council created by the head of a principal department shall serve at the pleasure of the head of the principal department and may be paid per diem and necessary travel and subsistence expenses within the limits of appropriations and in accordance with the provisions of G.S. 138-5, when approved in advance by the Director of the Budget. Per diem, travel, and subsistence payments to members of the committees or councils created in connection with federal programs shall be paid from federal funds unless otherwise provided by law. An annual report listing these committees or councils, the total membership on each, the cost in the last 12 months and the source of funding, and the title of the person who made the appointments shall be made to the Joint Legislative Commission on Governmental Operations by March 31 of each year.

| Committee or Council | Number of Members | Cost In the Last 12 Months | Source of Funding | Title of Person Who Made the Appointment of Members | Purpose of Committee/Council (brief) |
|---|----------------------|----------------------------------|--|--|---|
| Medical Care Advisory Committee (MCAC) | 18 | \$ 4,828 | 50% Federal (Medicaid Administration) and 50% State | Department of Health and Human Services Secretary | Federal law requires that state Medicaid agencies have a Medical Care Advisory Committee (MCAC). MCAC members advise NC Medical Assistance on health and medical care services that may be covered by the NC Medicaid program. This includes current policy revisions and accessing services. The MCAC is advisory and does not set policy. |
| NC Drug Utilization Review (DUR) Board | 11 | \$ - | 50% Federal (Medicaid Administration) and 50% State | Director of Division of Medical Assistance | The NC Medicaid Drug Utilization Review (DUR) program for outpatient drugs ensures Medicaid recipients receive appropriate, medically necessary prescriptions that are unlikely to result in adverse medical events. |

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| NC Medicaid Preferred Drug List (PDL) Review Panel | 10 | \$ - | 50% Federal (Medicaid Administration) and 50% State | Department of Health and Human Services Secretary | The Secretary of the North Carolina Department of Health and Human Services (DHHS) established a Preferred Drug List (PDL) Review Panel to review the Medicaid and Health Choice PDL recommendations of the DHHS, the Division of Medical Assistance (DMA) and the Physicians Advisory Group (PAG) Pharmacy and Therapeutics (P&T) Committee. https://www2.ncdhhs.gov/dma/pharmacy/PDL-Guidelines-07-2014.pdf |
| DHHS Waiver Advisory Council (DWAC) | 15 | \$ - | / | Department of Health and Human Services Secretary; Division of Medical Assistance Leadership; Division of Mental Health/Developmental Disabilities/Substance Abuse Services Leadership | The DHHS Waiver Advisory Committee (DWAC) is an advisory body to DHHS that provides input and consultation over the following:Implementation/Operational phases of the 1915 b/c Medicaid waivers; andOngoing LME-MCO operations (Medicaid managed care, Innovations, and LME operations). |
| Mental Health Planning and Advisory Council | 28 | \$ 800 | Federal Mental Health Block Grant | Department of Health and Human Services Secretary | Established by the DHHS Secretary (Directive #III-7)to meet the federal funding requirements as specified in Title XIX, Part B, Subpart I, Section 1914 of the Public Health Services Act and is required under federal legislation P.L. 102-321. |
| External Advisory Team | 10 | \$ - | N/A | Services Director | Provide regular, recurring forum to discuss and provide input on policy matters related to the operation and transformation of the mental health /developmental disabilities/substance abuse service system |
| Mental Health Advisory Council for the Deaf and Hard of Hearing | 13 | Sign Language Interpreters (\$1600.00) | 100% State | Division of Mental Health /Developmental Disabilities/Substance Abuse Services Director | Established by settlement agreement (Wilson v. DHR, 1992); advises the Division on provision of services to the deaf, hard of hearing, and deaf-blind population. |

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| Employment First State Leadership Mentoring Program Employment Stakeholder Workgroup | 35 | \$ - | N/A | Division of Mental Health /Developmental Disabilities/Substance Abuse Services Director; Division of Vocational Rehabilitation Services Director | Established to discuss and provide input on the Division of Mental Health/Developmental Disabilities/Substance Abuse Services' provision of, creation of, and updates-to employment-related services, including ideas and thoughts around improving alignment of employment-related services between the Division of Vocational Rehabilitation Services, the Division of Medical Assistance, and the Division of Mental Health/ Developmental Disabilities/ Substance Abuse Services. |
| Executive Employment Policy Team | 10 | \$ - | N/A | Division of Mental Health /Developmental Disabilities/Substance Abuse Services Director; Division of Vocational Rehabilitation Services Director; NC Council on Developmental Disabilities | Established under North Carolina's involvement in US Department of Labor Office of Disability Employment Policy Employment First State Leadership Mentoring Program to discuss and review ideas and strategies for adopting state policies and practices that lead to increased integrated employment outcomes for individuals with significant disabilities |
| Home and Community Based Services Stakeholder Advisory Committee | 56 | \$ - | N/A | Division of Mental Health /Developmental Disabilities /Substance Abuse Services Director; Division of Medical Assistance Director | This group works together with the Department of Health and Human Services to develop and implement a shared approach for crafting North Carolina's Home and Community Based Services Statewide Transition Plan |
| Subsidy Advisory Committee | 20 | \$ - | N/A | Program Manager, Child Care Subsidy, Division of Child Development and Early Education (DCDEE) | A group of stakeholders from a variety of early childhood agencies across the state of North Carolina who provide guidance to the Division's Subsidy Services Section with policies and procedures. |
| NC Pre-Kindergarten Advisory Committee | 26 | \$ 2,500 | Pre-K (state lottery receipts) | Director, Division of Child Development and Early Education | Provide programmatic and policy recommendations for the NC Pre- Kindergarten Program |

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| Human Rights Committee - Black Mount Neuro- Medical Treatment Center | 5 | | 9.55% State | | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Broughton Hospital | 10 | \$ | 79.26% Stat 20.74% Recei | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Caswell Developmental Center | 10 | \$ 2,0 | 1.08% State 98.92% Recei | I I | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Central Regional Hospital | 10 | \$ 3,6 | 19 80.50% Stat 19.50% Recei | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Cherry Hospital | 10 | \$ | - 87.53% Stat 12.47% Recei | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - J. Iverson Riddle Developmental Center | 10 | \$ 2,3 | 3.18% State 96.82% Recei | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Julian F. Keith Alcohol & Drug Addiction Center | 5 | \$ | - 100% Receip | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Longleaf Neuro-Medical Treatment Center | 5 | \$ | 15.70% Stat 84.30% Recei | • | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Murdoch Developmental Center | 10 | \$ 1,5 | 79 1.50% State 98.50% Recei | 1 | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |

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| Human Rights Committee - O'Berry Neuro-Medical Treatment Center | 5 | \$ 1,521 | .71% State 99.29% Receipts | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - R.J. Blackley Alcohol & Drug Addiction Center | 5 | \$ - | 100% Receipts | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Walter B. Jones Alcohol & Drug Addiction Center | 5 | \$ 957 | 100% Receipts | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Whitaker PRTF | 5 | \$ - | 100% Receipts | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| Human Rights Committee - Wright School | 5 | \$ - | 100% State | Department of Health and Human Services Secretary | To provide an additional safeguard for protecting the human, civil, legal and treatment rights of clients. |
| NC Farmworker Health Program Board | 9 | \$ 1,000 | Federal | NC Farmworker Health Program Manager coordinates selection of members and Board makes final approval | The Board provides leadership and guidance in support of the Program's mission, working in collaboration with NC Department of Health and Human Services to provide governance and oversight of the operation of the NC Farmworker Health Program. Through monthly meetings and conference calls, the Board will provide guidance on specific program activities and help develop short and long-term strategic goals. |
| AIDS Drug Assistance Program (ADAP) Medical Advisory Committee | 11 | \$ - | N/A | ADAP Manager and HIV/STD Director (both in DPH Communicable Disease Branch), with approval from sitting members. | Advises the ADAP Program about medications to add to the formulary for client access, in order to assure optimum health and wellness, as well as viral suppression, for people who are living with HIV. |

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| North Carolina HIV/AIDS Prevention and Care Advisory Committee (HPCAC) | 18 | \$ 3,000 | Federal | Voted by sitting members after staff recommendations from HIV/STD Prevention and Care Unit in the Division of Public Health Communicable Disease Branch | Provides advice, input and direction to the HIV/STD Unit in our applications for funding to Health Resources and Services Administration (HRSA), Centers for Disease Control (CDC) and others, as well as for required planning elements such as Quality Management and Integration of Care and Prevention. |
| Tuberculosis (TB) Medical Advisory Committee | 10 | \$ - | N/A | DPH TB Medical Director, Communicable Disease Branch | The board provides a diverse expert panel to ensure that the Tuberculosis program functions in accordance with best practices while utilizing resources in the most cost-effective manner. |