

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2023

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HOUSE BILL 190

Short Title: Dept. of Health and Human Services Revisions.-AB (Public)

Sponsors: Representative Potts.

For a complete list of sponsors, refer to the North Carolina General Assembly web site.

Referred to: Health, if favorable, State Government, if favorable, Rules, Calendar, and Operations of the House

February 27, 2023

A BILL TO BE ENTITLED

AN ACT MAKING TECHNICAL, CONFORMING, AND OTHER MODIFICATIONS TO
LAWS PERTAINING TO THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.

The General Assembly of North Carolina enacts:

PART I. LAWS PERTAINING TO THE DIVISION OF AGING AND ADULT SERVICES

AUTHORIZATION FOR SECRETARY OF HEALTH AND HUMAN SERVICES TO ADOPT AND ENFORCE RULES TO IMPLEMENT EMERGENCY SOLUTIONS GRANT PROGRAM

SECTION 1.1. Article 3 of Chapter 143B of the General Statutes is amended by adding a new section to read:

"§ 143B-139.1A. Secretary of Health and Human Services; rules to implement the Emergency Solutions Grant Program.

The Secretary of Health and Human Services may adopt rules to implement the Emergency Solutions Grant Program. The Department of Health and Human Services shall enforce any rules adopted under this section."

ALIGNMENT OF STATE-COUNTY SPECIAL ASSISTANCE PROGRAM WITH FEDERAL REGULATIONS/REMOVAL OF PROPERTY TAX THRESHOLD WHEN DETERMINING ELIGIBILITY

SECTION 1.2. G.S. 108A-41 reads as rewritten:

"§ 108A-41. Eligibility.

...

(c) When determining whether a person has insufficient resources to provide a reasonable subsistence compatible with decency and health, there shall be excluded from consideration the person's primary place of residence and the land on which it is situated, and in addition there shall be excluded real property contiguous with the person's primary place of ~~residence in which the property tax value is less than twelve thousand dollars (\$12,000)~~residence.

...."

EQUALIZATION OF STATE-COUNTY SPECIAL ASSISTANCE PAYMENTS FOR RECIPIENTS RESIDING IN LICENSED FACILITIES APPROVED TO ACCEPT



1 STATE-COUNTY SPECIAL ASSISTANCE AND RECIPIENTS RESIDING IN
2 IN-HOME LIVING ARRANGEMENTS

3 SECTION 1.3. G.S. 108A-47.1(a) reads as rewritten:

4 "(a) The Department of Health and Human Services may use funds from the existing
5 State-County Special Assistance budget to provide Special Assistance payments to eligible
6 individuals 18 years of age or older in in-home living arrangements. The standard monthly
7 payment to individuals enrolled in the Special Assistance in-home program shall be one hundred
8 percent (100%) of the monthly payment the individual would receive if the individual resided in
9 an adult care home and qualified for Special Assistance, ~~except if a lesser payment amount is~~
10 ~~appropriate for the individual as determined by the local case manager.~~ Assistance. The
11 Department shall implement Special Assistance in-home eligibility policies and procedures to
12 assure that in-home program participants are those individuals who need and, but for the in-home
13 program, would seek placement in an adult care home facility. The Department's policies and
14 procedures shall include the use of ~~a functional~~ an assessment."

15
16 PART II. LAWS PERTAINING TO THE DIVISION OF CENTRAL MANAGEMENT
17 AND SUPPORT

18
19 CONTRACTING REFORM

20 SECTION 2.1. Section 2 of S.L. 2022-52 reads as rewritten:

21 "SECTION 2.(a) Contract Time and Continuity. – In efforts to support the continuity of
22 services provided by ~~nonprofit grantees receiving state and federal funds, a nonprofit grantee~~
23 ~~receiving State or federal funds or any combination of State and federal funds through a financial~~
24 ~~assistance contract,~~ the Department of Health and Human Services (Department) shall enter into
25 a contract agreement for a minimum of a two-year contract agreement two years with such
26 nonprofit grantees/~~recipients grantee~~ if all of the following requirements are met:

- 27 (1) The nonprofit ~~grantee/recipient grantee~~ is receiving nonrecurring funding
28 funds for each year of a fiscal biennium.
29 (2) The nonprofit ~~grantee/recipient grantee~~ is receiving recurring funding funds
30 for each year of a fiscal biennium.
31 (3) The nonprofit grantee is receiving any combination of recurring and
32 nonrecurring funds for each year of a fiscal biennium.
33 ~~(3)(4)~~ Multiyear contracts are not otherwise prohibited by the funding source.

34 "SECTION 2.(a1) Nonprofit grantees/recipients Option for Contract Extension. – A
35 nonprofit grantee receiving recurring federal grant funding shall have funds through a financial
36 assistance contract has the option to extend the contract for up to one additional year at the end
37 of the contract's initial term of the contract if all of the following requirements are met:

- 38 (1) The extension is mutually agreed upon by the Department and the nonprofit
39 grantee, through a written amendment as provided for in the ~~General Terms~~
40 ~~and Conditions.~~ terms and conditions of the contract.
41 (2) Funding for the contract remains available.

42 "SECTION 2.(a2) Automatic Contract Extension. – The Department shall allow any
43 nonprofit ~~grantee/recipient grantee~~ receiving recurring or nonrecurring ~~state and/or State or~~
44 ~~federal funding funds,~~ or any combination of State and federal funds, through a financial
45 assistance contract for each year of a fiscal biennium to automatically activate a limited-time
46 extensions contract extension for a period of up to three months for to preserve continuity of
47 services when a formal contract extension or renewal process has not been completed within 10
48 business days of after the subsequent contract start date if all of expiration of the original contract;
49 provided, however, that all of the following requirements are met:

- 50 (1) The nonprofit ~~grantee/recipient grantee~~ is receiving recurring funding funds,
51 or nonrecurring ~~state and/or federal funding~~ State or federal funds, or any

1 combination of nonrecurring State and federal funds, for each year of a fiscal
 2 biennium.

- 3 (2) The nonprofit ~~grantee/recipient~~ grantee has received an unqualified audit
 4 report on its most recent financial audit when an audit is required by
 5 G.S. 159-34 or 09 NCAC 03M.
- 6 (3) The nonprofit ~~grantee/recipient~~ grantee has a track record of timely
 7 performance and financial reporting to the Department as required by the
 8 contract.
- 9 (4) The nonprofit ~~grantee/recipient~~ grantee has not been identified by the
 10 Department as having a record of noncompliance with requirements of any
 11 funding source used to support the contract and has not received an undisputed
 12 notice of such noncompliance from the Department. For purposes of this
 13 requirement, noncompliance does not include issues stemming from late
 14 execution of a contract or mutually agreed upon changes to scope of work or
 15 deliverables, and undisputed notice of noncompliance does not include notice
 16 of noncompliance where the nonprofit grantee has provided written evidence
 17 of actual compliance to the Department within 30 days ~~of~~ after receipt of a
 18 notice of noncompliance.
- 19 (5) The nonprofit ~~grantee/recipient~~ grantee has been in operation for at least five
 20 years.

21 In the event of an automatic contract extension pursuant to this subsection, the terms of the
 22 expired contract shall govern the relationship and obligations of the party until the end of the
 23 three-month contract extension period or until the execution of a formal contract extension or
 24 renewal, whichever occurs first.

25 "**SECTION 2.(b)** Directed Grant Contacts. – Within 15 days after the date the Current
 26 Operations Appropriations Act of 2022 (the "Act") becomes law, the Fiscal Research Division
 27 shall provide the Department of Health and Human Services, Division of Budget and Analysis,
 28 with a list of preliminary information for all non-State entities receiving directed grants through
 29 the Act. At a minimum, this list shall include all of the following information:

- 30 (1) The legal name of the non-State entity.
 31 (2) The mailing address of the non-State entity.
 32 (3) The name, email address, and phone number for each of the non-State entity's
 33 points of contact for communications related to the directed grant contracting
 34 and funds disbursement process.

35 "**SECTION 2.(c)** Negotiated Overhead Rates. – The negotiation, determination, or
 36 settlement of the reimbursable amount of overhead under cost-reimbursement type contracts is
 37 accomplished on an individual contract basis and is based upon the federally approved indirect
 38 cost rate. For ~~vendors who~~ grantees, including nonprofit grantees, that (i) are receiving financial
 39 assistance and do not have a federally approved indirect cost rate, rate from a federal agency or
 40 (ii) have a previously negotiated but expired rate, the Department may allow the grantee, in
 41 accordance with 2 C.F.R. § 200.332(a)(4) or 2 C.F.R. § 200.414(f), the de minimis rate of ten
 42 percent (10%) of modified total direct costs shall apply to use the de minimis rate or ten percent
 43 (10%) of modified total direct costs. Alternatively, the grantee may negotiate or waive an indirect
 44 cost rate with the Department. If State or federal law or regulations establish a limitation on the
 45 amount of funds the grantee may use for administrative purposes, then that limitation controls,
 46 in accordance with 2 C.F.R. § 200.414(c)(3)."

47
 48 **PART III. LAWS PERTAINING TO THE DIVISION OF CHILD AND FAMILY**
 49 **WELL-BEING**

50
 51 **CONFORMING CHANGES RELATED TO ESTABLISHMENT OF NEW DIVISION**

1 **SECTION 3.1.** G.S. 7B-1402(b)(5) reads as rewritten:

2 "(5) The Director of the ~~Maternal and Child Health Section~~ Division of Child and
3 Family Well-Being of the Department of Health and Human Services."

4 **SECTION 3.2.** G.S. 7B-1404(b) reads as rewritten:

5 "(b) The State Team shall be composed of the following 11 members of whom nine
6 members are ex officio and two are appointed:

7 (1) The Chief Medical Examiner, who shall chair the State ~~Team~~; Team.

8 (2) The Attorney ~~General~~; General.

9 (3) The Director of the Division of Social Services, Department of Health and
10 Human ~~Services~~; Services.

11 (4) The Director of the State Bureau of ~~Investigation~~; Investigation.

12 (5) The Director of the Division of ~~Maternal and Child Health~~ Child and Family
13 Well-Being of the Department of Health and Human ~~Services~~; Services.

14 (6) The Superintendent of Public ~~Instruction~~; Instruction.

15 (7) The Director of the Division of Mental Health, Developmental Disabilities,
16 and Substance Abuse Services, Department of Health and Human
17 ~~Services~~; Services.

18 (8) The Director of the Administrative Office of the ~~Courts~~; Courts.

19 (9) The pediatrician appointed pursuant to G.S. 7B-1402(b) to the Task
20 ~~Force~~; Force.

21 (10) A public member, appointed by the ~~Governor~~; and Governor.

22 (11) The Team Coordinator.

23 The ex officio members other than the Chief Medical Examiner may designate a
24 representative from their departments, divisions, or offices to represent them on the State Team."

25 **SECTION 3.3.** G.S. 122C-113(b1) reads as rewritten:

26 "(b1) The Secretary shall cooperate with the State Board of Education and the Division of
27 Juvenile Justice of the Department of Public Safety in coordinating the responsibilities of the
28 Department of Health and Human Services, the State Board of Education, the Division of
29 Juvenile Justice of the Department of Public Safety, and the Department of Public Instruction for
30 adolescent substance abuse programs. The Department of Health and Human Services, through
31 its Division of Mental Health, Developmental Disabilities, and Substance Abuse ~~Services~~;
32 Services and its Division of Child and Family Well-Being, in cooperation with the Division of
33 Juvenile Justice of the Department of Public Safety, shall be responsible for intervention and
34 treatment in non-school based programs. The State Board of Education and the Department of
35 Public Instruction, in consultation with the Division of Juvenile Justice of the Department of
36 Public Safety, shall have primary responsibility for in-school education, identification, and
37 intervention services, including student assistance programs."

38 **SECTION 3.4.** G.S. 122C-142.2(g) reads as rewritten:

39 "(g) The Rapid Response Team shall be comprised of representatives of the Department
40 of Health and Human Services from the Division of Social Services; the Division of Mental
41 Health, Developmental Disabilities, and Substance Abuse Services; the Division of Child and
42 Family Well-Being; and the Division of Health Benefits. Upon receipt of a notification from a
43 director, the Rapid Response Team shall evaluate the information provided and coordinate a
44 response to address the immediate needs of the juvenile, which may include any of the following:

45 (1) Identifying an appropriate level of care for the juvenile.

46 (2) Identifying appropriate providers or other placement for the juvenile.

47 (3) Making a referral to qualified services providers.

48 (4) Developing an action plan to ensure the needs of the juvenile are met.

49 (5) Developing a plan to ensure that relevant parties carry out any responsibilities
50 to the juvenile."
51

1 **PART IV. LAWS PERTAINING TO THE DIVISION OF HEALTH SERVICE**
2 **REGULATION**

3
4 **AUTHORIZATION FOR TRIENNIAL INSPECTION OF HIGH PERFORMING**
5 **ADULT CARE HOME FACILITIES**

6 **SECTION 4.1.(a)** G.S. 131D-2.11 reads as rewritten:

7 **"§ 131D-2.11. Inspections, monitoring, and review by State agency and county departments**
8 **of social services.**

9 (a) State Inspection and Monitoring. – The Department shall ensure that adult care homes
10 required to be licensed by this Article are monitored for licensure compliance on a regular basis.
11 All facilities licensed under this Article and adult care units in nursing homes are subject to
12 inspections at all times by the Secretary. Except as provided in subsection (a1) of this section,
13 the Division of Health Service Regulation shall inspect all adult care homes and adult care units
14 in nursing homes on an annual basis. ~~Beginning July 1, 2012, the~~ The Division of Health Service
15 Regulation shall include as part of its inspection of all adult care homes a review of the facility's
16 compliance with G.S. 131D-4.4A(b) and safe practices for injections and any other procedures
17 during which bleeding typically occurs. In addition, the Department shall ensure that adult care
18 homes are inspected every two years to determine compliance with physical plant and life-safety
19 requirements.

20 If the ~~annual or biennial~~ annual, biennial, or triennial licensure inspection of an adult care
21 home is conducted separately from the inspection required every two years to determine
22 compliance with physical plant and life-safety requirements, then the Division of Health Service
23 Regulation shall not cite, as part of the ~~annual or biennial~~ annual, biennial, or triennial licensure
24 inspection, any noncompliance with any law or regulation that was cited during a physical plant
25 and life-safety inspection, unless, in consultation with the section within the Division of Health
26 Service Regulation that conducts physical plant and life-safety inspections, any of the following
27 conditions are met:

- 28 (1) The noncompliance with the law or regulation continues and the
29 noncompliance constitutes a Type A1 Violation, a Type A2 Violation, or a
30 Type B Violation, as defined in G.S. 131D-34.
31 (2) The facility has not submitted a plan of correction for the physical plant or
32 life-safety citation that has been accepted by the section within the Division
33 of Health Service Regulation that conducts physical plant and life-safety
34 inspections.
35 (3) The noncompliance with the physical plant or life-safety law and regulation
36 cited by the section within the Division of Health Service Regulation that
37 conducts physical plant and life-safety inspections has not been corrected
38 within the time frame allowed for correction or has increased in severity.

39 Nothing in this subsection prevents a licensing inspector from referring a concern about
40 physical plant and life-safety requirements to the section within the Division of Health Service
41 Regulation that conducts physical plant and life-safety inspections.

42 (a1) Waiver of Annual State Inspection. – The Division of Health Service Regulation may
43 waive the annual inspection requirement under subsection (a) of this section for one year for any
44 adult care home that has achieved the highest rating in accordance with rules adopted by the
45 North Carolina Medical Care Commission pursuant to G.S. 131D-10. ~~However, at least once~~
46 ~~every two years the Division of Health Service Regulation shall inspect any adult care home for~~
47 ~~which the annual inspection requirement was waived.~~

48 The Division of Health Service Regulation may waive the annual inspection requirement
49 under subsection (a) of this section for two years for any adult care home that has, for five
50 consecutive years, achieved the highest rating in accordance with rules adopted by the North
51 Carolina Medical Care Commission pursuant to G.S. 131D-10.

1"

2 SECTION 4.1.(b) This section becomes effective October 1, 2023.

3
4 **MEDICAL CARE COMMISSION CLARIFICATION OF POWERS AND DUTIES**

5 SECTION 4.2. G.S. 143B-165 reads as rewritten:

6 "§ 143B-165. North Carolina Medical Care Commission – creation, powers and duties.

7 There is hereby created the North Carolina Medical Care Commission of the Department of
8 Health and Human Services with the power and duty to ~~promulgate-adopt rules and regulations~~
9 to be followed in the construction and maintenance of public and private hospitals, medical
10 centers, and ~~related facilities with the power and duty regulated under Chapters 131D and 131E~~
11 of the General Statutes; to adopt, amend and rescind rules and regulations under and not
12 inconsistent with the laws of the State as necessary to carry out the provisions and purposes of
13 this Article. ~~Article; and to protect the health, safety, and welfare of the individuals served by~~
14 these facilities.

15 (1) The North Carolina Medical Care Commission ~~has the duty to~~ shall adopt
16 statewide plans for the construction and maintenance of hospitals, medical
17 centers, and ~~related facilities,~~ facilities regulated under Chapters 131D and
18 131E of the General Statutes, or such other plans as may be found desirable
19 and necessary ~~in order to~~ meet the requirements and receive the benefits of
20 any applicable federal legislation with regard thereto. ~~legislation.~~

21 (2) The Commission ~~is authorized to~~ may adopt such rules and regulations as may
22 be necessary to carry out the intent and purposes of Article ~~13-4~~ of Chapter
23 ~~131-131E~~ of the General Statutes of North Carolina. ~~Statutes.~~

24 (3) ~~The Commission may adopt such reasonable and necessary standards with~~
25 ~~reference thereto as may be proper to cooperate fully with the Surgeon~~
26 ~~General or other agencies or departments of the United States and the use of~~
27 ~~funds provided by the federal government as contained and referenced in~~
28 ~~Article 13 of Chapter 131 of the General Statutes of North Carolina.~~

29 (4) The Commission ~~shall have~~ has the power and duty to approve projects in the
30 amounts of grants-in-aid from funds supplied by the federal and State
31 governments for the planning and construction of hospitals and other related
32 medical facilities ~~according to the provisions of Article 13 in accordance with~~
33 Articles 4 and 5 of Chapter 131-131E of the General Statutes of North
34 Carolina. ~~Statutes.~~

35 (5) Repealed by Session Laws 1981 (Regular Session, 1982), c. 1388, s. 3.

36 (6) The Commission ~~has the duty to~~ shall adopt rules and regulations and
37 ~~standards with respect to~~ establishing standards for the licensure, inspection,
38 and operation of, and the provision of care and services by, the different types
39 of hospitals to be licensed under ~~the provisions of Article 13A- Articles 2 and~~
40 5 of Chapter 131-131E of the General Statutes of North Carolina. ~~Statutes.~~

41 (7) The Commission ~~is authorized and empowered to~~ may adopt such rules and
42 ~~regulations,~~ rules, not inconsistent with the laws of this State, as may be
43 required by the federal government ~~for to secure federal grants-in-aid for~~
44 ~~medical facility services and licensure which may be made available to the~~
45 ~~State by the federal government.~~ licensure. This section ~~is to~~ shall be liberally
46 construed in order that the State and its citizens may benefit from such
47 grants-in-aid.

48 (8) The Commission shall adopt such ~~rules and regulations,~~ rules, consistent with
49 the provisions of this Chapter. All rules and regulations ~~not inconsistent with~~
50 ~~the provisions of this Chapter heretofore~~ adopted by the North Carolina
51 ~~Medical Care Commission~~ since the enactment of Chapter 131E of the

1 General Statutes that are not inconsistent with the provisions of this Chapter
2 shall remain in full force and effect unless and until repealed or superseded by
3 action of the North Carolina Medical Care Commission. All rules and
4 regulations adopted by the Commission shall be enforced by the Department
5 of Health and Human Services.

6 (9) ~~The Commission shall have the power and duty to~~ may adopt rules and
7 ~~regulations with regard to~~ concerning emergency medical services in
8 accordance with the provisions of Article ~~26-7~~ of Chapter ~~130-131E~~ and
9 Article 56 of Chapter 143 of the General Statutes of North Carolina. Statutes.

10 (10) ~~The Commission shall have the power and duty to~~ shall adopt rules for the
11 operation of nursing homes, as defined by Article 6 of Chapter 131E of the
12 General Statutes.

13 (11) ~~The Commission is authorized to~~ may adopt such rules as ~~may be~~ necessary
14 to ~~carry out the provisions of Part C of Article 6, and Article 10,~~ establish
15 standards for the licensure, inspection, and operation of, and the provision of
16 care and services by, facilities licensed under Articles 6 and 10 of Chapter
17 131E of the General Statutes of North Carolina. Statutes.

18 (12) The Commission shall adopt rules, ~~including temporary rules pursuant to G.S.~~
19 ~~150B-13,~~ rules providing for the accreditation of facilities that perform
20 mammography procedures and for laboratories evaluating screening pap
21 smears. Mammography accreditation standards shall address, but are not
22 limited to, the quality of mammography equipment used and the skill levels
23 and other qualifications of personnel who administer mammographies and
24 personnel who interpret mammogram results. The Commission's standards
25 shall be no less stringent than those established by the United States
26 Department of Health and Human Services for Medicare/Medicaid coverage
27 of screening mammography. These rules shall also specify procedures for
28 waiver of these accreditation standards on an individual basis for any facility
29 providing screening mammography to a significant number of patients, but
30 only if there is no accredited facility located nearby. The Commission may
31 grant a waiver subject to any conditions it deems necessary to protect the
32 health and safety of patients, including requiring the facility to submit a plan
33 to meet accreditation standards.

34 (13) ~~The Commission shall have the power and duty to~~ shall adopt rules
35 establishing standards for the inspection and licensure of licensure, inspection,
36 and operation of, and the provision of care and services by, adult care homes
37 ~~and operation of adult care homes,~~ as defined by Article 1 of Chapter 131D of
38 the General Statutes, and for personnel requirements of staff employed in
39 adult care homes, except ~~where~~ when rule-making authority is assigned by
40 law to the Secretary.

41 (14) The Commission shall adopt rules establishing standards for the following
42 with respect to facilities used as multiunit assisted housing with services, as
43 defined by Article 1 of Chapter 131D of the General Statutes:

- 44 a. Registration and deregistration.
- 45 b. Disclosure statements.
- 46 c. Agreements for services.
- 47 d. Personnel requirements.
- 48 e. Resident admissions and discharges."

50 **PART V. LAWS PERTAINING TO THE DIVISION OF MENTAL HEALTH,**
51 **DEVELOPMENTAL DISABILITIES, AND SUBSTANCE ABUSE SERVICES**

1
2 **TECHNICAL CHANGES/POPULATIONS COVERED BY LME/MCOS**

3 **SECTION 5.1.(a)** G.S. 122C-115 reads as rewritten:

4 "**§ 122C-115. Duties of counties; appropriation and allocation of funds by counties and**
5 **cities.**

6 ...

7 (e) ~~Beginning on the date that capitated contracts under Article 4 of Chapter 108D of the~~
8 ~~General Statutes begin, July 1, 2021, LME/MCOs shall cease managing Medicaid services for~~
9 ~~all Medicaid recipients other than recipients described in G.S. 108D-40(a)(1), (4), (5), (6), (7),~~
10 ~~(10), (11), (12), and (13) who are enrolled in a standard benefit plan.~~

11 (e1) Until BH IDD tailored plans become operational, all of the following shall occur:

- 12 (1) LME/MCOs shall continue to manage the Medicaid services that are covered
13 by the LME/MCOs under the combined 1915(b) and (c) waivers for Medicaid
14 recipients ~~described in G.S. 108D-40(a)(1), (4), (5), (6), (7), (10), (11), (12),~~
15 ~~and (13) who are covered by the those waivers and who are not enrolled in a~~
16 ~~standard benefit plan.~~
- 17 (2) The Division of Health Benefits shall negotiate actuarially sound capitation
18 rates directly with the LME/MCOs based on the change in composition of the
19 population being served by the LME/MCOs.
- 20 (3) Capitation payments under contracts between the Division of Health Benefits
21 and the LME/MCOs shall be made directly to the LME/MCO by the Division
22 of Health Benefits.

23 (f) ~~Entities LME/MCOs operating the BH IDD tailored plans under G.S. 108D-60 may~~
24 ~~continue to manage the behavioral health, intellectual and developmental disability, and~~
25 ~~traumatic brain injury services for any Medicaid recipients described in G.S. 108D-40(a)(4), (5),~~
26 ~~(7), (10), (11), (12), and (13) under any contract with the Department in accordance with~~
27 ~~G.S. 108D-60(b) who are not enrolled in a BH IDD tailored plan."~~

28 **SECTION 5.1.(b)** G.S. 108D-60(b) reads as rewritten:

29 "(b) The Department may contract with entities operating BH IDD tailored plans under a
30 capitated or other arrangement for the management of behavioral health, intellectual and
31 developmental disability, and traumatic brain injury services for any recipients ~~excluded from~~
32 ~~PHP coverage under G.S. 108D-40(a)(4), (5), (7), (10), (11), (12), and (13) who are not enrolled~~
33 ~~in a BH IDD tailored plan."~~

34 **SECTION 5.1.(c)** G.S. 122C-3 reads as rewritten:

35 "**§ 122C-3. Definitions.**

36 The following definitions apply in this Chapter:

37 ...

38 (2b) ~~"Behavioral Behavioral health and intellectual/developmental disabilities~~
39 ~~tailored plan" plan or "BH-BH IDD tailored plan" has the same meaning as~~
40 ~~plan. – As defined in G.S. 108D-1.~~

41 ...

42 (29b) ~~"Prepaid-Prepaid health plan" has the same meaning as plan. – As defined in~~
43 ~~G.S. 108D-1.~~

44 ...

45 (35b) Specialty services. – Services that are provided to consumers from
46 low-incidence populations.

47 (35c) ~~State or Local Consumer Advocate. — The individual carrying out the duties~~
48 ~~of the State or Local Consumer Advocacy Program Office in accordance with~~
49 ~~Article 1A of this Chapter.~~

50 (35d) Standard benefit plan. – As defined in G.S. 108D-1.

1 (35e) State Plan. – The State Plan for Mental Health, Developmental Disabilities,
2 and Substance Abuse Services.
3 ~~(35e)~~(35f) State resources. – State and federal funds and other receipts administered
4 by the Division.
5 "

7 **CHANGES TO EFFECTUATE RENAMING OF DIVISION**

8 **SECTION 5.2.(a)** G.S. 143B-138.1(a)(4) reads as rewritten:

9 "(4) Division of Mental Health, Developmental Disabilities, and Substance Abuse
10 Use Services."

11 **SECTION 5.2.(b)** Throughout the General Statutes, the Revisor of Statutes shall
12 replace the phrase "Division of Mental Health, Developmental Disabilities, and Substance Abuse
13 Services" with the phrase "Division of Mental Health, Developmental Disabilities, and Substance
14 Use Services."

15 **SECTION 5.2.(c)** Throughout the General Statutes, the Revisor of Statutes shall
16 replace the phrase "MH/DD/SAS" with the phrase "MH/DD/SUS."

18 **PART VI. LAWS PERTAINING TO THE DIVISION OF PUBLIC HEALTH**

20 **EXPANSION OF PERMISSIBLE USES FOR NEWBORN SCREENING EQUIPMENT** 21 **REPLACEMENT AND ACQUISITION FUND**

22 **SECTION 6.1.** G.S. 130A-125(d) reads as rewritten:

23 "(d) The Newborn Screening Equipment Replacement and Acquisition Fund (Fund) is
24 established as a nonreverting fund within the Department. Thirty-one dollars (\$31.00) of each
25 fee collected pursuant to subsection (c) of this section shall be credited to this Fund and applied
26 to the Newborn Screening Program to be used as directed in this subsection. The Department
27 shall not use monies in this Fund for any purpose other than to ~~purchase or replace~~ purchase,
28 replace, maintain, or support laboratory instruments, equipment, and information technology
29 systems used in the Newborn Screening Program. The Department shall notify and consult with
30 the Joint Legislative Commission on Governmental Operations whenever the balance in the Fund
31 exceeds the following threshold: the sum of (i) the actual cost of new equipment necessary to
32 incorporate conditions listed on the RUSP into the Newborn Screening Program and (ii) one
33 hundred percent (100%) of the replacement value of existing equipment used in the Newborn
34 Screening Program. Any monies in the Fund in excess of this threshold shall be available for
35 expenditure only upon an act of appropriation by the General Assembly."

37 **EXPANSION OF QUALIFIED PROFESSIONALS ELIGIBLE TO SERVE AS COUNTY** 38 **MEDICAL EXAMINERS**

39 **SECTION 6.2.** G.S. 130A-382 reads as rewritten:

40 "**§ 130A-382. County medical examiners; appointment; term of office; vacancies; training**
41 **requirements; revocation for cause.**

42 (a) The Chief Medical Examiner shall appoint two or more county medical examiners for
43 each county for a three-year term. In appointing medical examiners for each county, the Chief
44 Medical Examiner shall give preference to physicians licensed to practice medicine in this State
45 but may also appoint ~~licensed~~ the following professionals:

- 46 (1) Dentists, physician assistants, nurse practitioners, nurses, or emergency
47 physical therapists as long as the appointee is licensed to practice in this State.
- 48 (2) Emergency medical technician-technicians or paramedics credentialed under
49 G.S. 131E-159.
- 50 (3) Pathologists' assistants certified by the American Society for Clinical
51 Pathology.

1 (4) Pathologists' assistants or medicolegal death investigators certified by a
 2 nationally recognized certifying body determined by the Chief Medical
 3 Examiner to have an appropriate certification process for pathologists'
 4 assistants or medicolegal death investigators to demonstrate readiness to serve
 5 as a county medical examiner.

6 A medical examiner may serve more than one county. The Chief Medical Examiner may take
 7 jurisdiction in any case or appoint another medical examiner to do so.

8 (a1) During a state of emergency declared by the Governor or by a resolution of the
 9 General Assembly pursuant to G.S. 166A-19.20, or by the governing body of a municipality or
 10 county pursuant to G.S. 166A-19.22, the Chief Medical Examiner may appoint temporary county
 11 medical examiners to serve until the expiration of the declared state of emergency. In appointing
 12 temporary county medical examiners pursuant to this subsection, the Chief Medical Examiner
 13 may appoint any individual determined by the Chief Medical Examiner to have the appropriate
 14 training, education, and experience to serve as a county medical examiner during a declared state
 15 of emergency.

16 "

18 **PART VII. LAWS PERTAINING TO THE DIVISION OF SOCIAL SERVICES**

20 **ALIGNMENT OF TIME LINE FOR COUNTY TANF PLAN SUBMISSIONS**

21 **SECTION 7.1.(a)** G.S. 108A-24(1e) reads as rewritten:

22 "(1e) "County Plan" is the ~~biennial-triennial~~ Work First Program plan prepared by
 23 each Electing County pursuant to this Article and submitted to the Department
 24 for incorporation into the State Plan that also includes the Standard Work First
 25 Program."

26 **SECTION 7.1.(b)** G.S. 108A-27.3(a)(12) reads as rewritten:

27 "(12) Develop, adopt, and submit to the Department a ~~biennial-triennial~~ County
 28 Plan;"

29 **SECTION 7.1.(c)** G.S. 108A-27.4(a) reads as rewritten:

30 "(a) Each Electing County shall submit to the Department, according to the schedule
 31 established by the Department and in compliance with all federal and State laws, rules, and
 32 regulations, a ~~biennial-triennial~~ County Plan."
 33

34 **AMENDMENT OF CHILD ABUSE AND NEGLECT SCHOOL POSTERS**

35 **SECTION 7.2.(a)** G.S. 115C-12(47) reads as rewritten:

36 "(47) Duty Regarding Child Abuse and Neglect. – The State Board of Education, in
 37 consultation with the Superintendent of Public Instruction, shall adopt a rule
 38 requiring information on child abuse and neglect, including age-appropriate
 39 information on sexual abuse, to be provided by public school units to students
 40 in grades six through 12. This rule shall also apply to high schools under the
 41 control of The University of North Carolina. Information shall be provided in
 42 the form of (i) a document provided to all students at the beginning of each
 43 school year and (ii) a display posted in visible, high-traffic areas throughout
 44 each public secondary school. The document and display shall include, at a
 45 minimum, the following information:

- 46 a. Likely warning signs indicating that a child may be a victim of abuse
 47 or neglect, including age-appropriate information on sexual abuse.
- 48 b. The telephone number used for reporting abuse and neglect to the
 49 department of social services in the county in which the school is
 50 located, in accordance with G.S. 7B-301.

- 1 c. A statement that information reported pursuant to sub-subdivision b.
2 of this subdivision shall be held in the strictest confidence, to the extent
3 permitted by law, pursuant to G.S. 7B-302(a1).
4 d. ~~Available resources developed pursuant to G.S. 115C-105.51,
5 including the anonymous safety tip line application."~~

6 **SECTION 7.2.(b)** This section is effective when it becomes law and applies
7 beginning with the 2023-2024 school year.

8
9 **AUTHORIZATION FOR APPLICATION OF FEDERALLY MANDATED TOOLS TO**
10 **ENFORCE CHILD SUPPORT PAYMENTS**

11 **SECTION 7.3.(a)** G.S. 110-129 reads as rewritten:

12 **"§ 110-129. Definitions.**

13 As used in this Article:

14 ...

15 (6a) "Financial Management Services" (FMS) means the unit of the U.S.
16 Department of the Treasury, which, under federal law, offsets certain federal
17 payments to satisfy support arrears.

18 ...

19 (9a) "Internal Revenue Service" (IRS) means the unit of the U.S. Department of
20 the Treasury, which, under federal law, offsets income tax refunds against
21 certain support arrears.

22 ...

23 (12a) "Offset" means withholding by the IRS or FMS of all or part of an income tax
24 refund or certain federal payments due an obligor and remitting payments to
25 the federal Office of Child Support Enforcement for transmittal to the State.

26"

27 **SECTION 7.3.(b)** G.S. 110-129.1(a) reads as rewritten:

28 "(a) In addition to other powers and duties conferred upon the Department of Health and
29 Human Services, Child Support Enforcement Program, by this Chapter or other State law, the
30 Department shall have the following powers and duties:

31 ...

32 (10) Certify obligors to the federal Office of Child Support Enforcement for the
33 Passport Denial Program under G.S. 110-143.

34 (11) Certify to the federal Office of Child Support Enforcement determinations that
35 an obligor in a IV-D case owes support arrears in an amount equal to or greater
36 than the federally mandated thresholds for offset of federal income tax refunds
37 under 42 U.S.C. § 664(b)(2) if the arrears are assigned to the State and 45
38 C.F.R. § 303.72(a)(2) if the arrears are not assigned to the State.

39 (12) Certify obligors to the federal Office of Child Support Enforcement for the
40 Administrative Offset Program under G.S. 110-144."

41 **SECTION 7.3.(c)** Article 9 of Chapter 110 of the General Statutes is amended by
42 adding the following new sections to read:

43 **"§ 110-143. Passport Denial Program.**

44 (a) Participation. – The Department of Health and Human Services shall participate in
45 the federal Passport Denial Program for the denial, revocation, or limitation of an obligor's
46 passports under 42 U.S.C. § 654(31) and 42 U.S.C. § 652(k).

47 (b) Certification. – The Department shall annually certify to the federal Office of Child
48 Support Enforcement (OCSE) an obligor in a IV-D case whose support arrears exceed the
49 federally mandated threshold in 42 U.S.C. § 654(31). The OCSE shall transmit the certification
50 to the U.S. Department of State pursuant to the federal Passport Denial Program.

1 (c) Notice. – The Department shall send written notice of the certification to the obligor
2 at the obligor's last known address. The notice shall advise the obligor of all of the following:

3 (1) The amount of the arrears as of the date of the notice.

4 (2) The possibility that the obligor's passport may be denied, revoked, or
5 restricted by the U.S. Department of State.

6 (3) The procedure to contest the certification.

7 (d) Appeal. – Within 60 days of the date the notice is placed in the mail to the obligor,
8 the obligor may file a contested case petition with the North Carolina Office of Administrative
9 Hearings to contest the certification. The contested case shall be conducted in accordance with
10 Article 3 of Chapter 150B of the General Statutes. The obligor may contest the certification only
11 if one of the following applies:

12 (1) An arrearage does not exist.

13 (2) An arrearage does exist, but never exceeded the federally mandated threshold.

14 (3) There is a claim of mistaken identity.

15 (e) Withdrawal of Certification. – The Department shall notify the OCSE if the obligor's
16 support arrears are paid in full.

17 **"§ 110-144. Administrative Offset Program.**

18 (a) Participation. – The Department of Health and Human Services shall participate in
19 the federal Administrative Offset Program for the offset of certain federal payments under 31
20 C.F.R. § 285.1.

21 (b) Certification. – The Department shall annually certify to the federal Office of Child
22 Support Enforcement (OCSE) an obligor in a IV-D case whose support arrears are (i) equal to or
23 greater than one hundred fifty dollars (\$150.00) if the arrears are assigned to the State and (ii)
24 equal to or greater than five hundred dollars (\$500.00) if the arrears are not assigned to the State.

25 (c) Notice. – At least 30 days before certification, the Department shall send written
26 notice of the certification to the obligor at the obligor's last known address. The notice shall
27 advise the obligor of all of the following:

28 (1) The amount of the arrears as of the date of the notice.

29 (2) The possibility that the obligor may have certain federal payments offset by
30 FMS.

31 (3) The procedures to contest the certification.

32 Without further notice to the obligor, the Department shall provide OCSE with updates to
33 adjust the amount of arrears to reflect any payments or additional arrears that accrue after the
34 date of certification.

35 (d) Appeal. – Within 60 days of the date the notice is placed in the mail to the obligor,
36 the obligor may file a contested case petition with the North Carolina Office of Administrative
37 Hearings to contest the certification. The contested case shall be conducted in accordance with
38 Article 3 of Chapter 150B of the General Statutes. The obligor may contest the certification only
39 if either of the following applies:

40 (1) The amount of arrears stated in the notice is incorrect.

41 (2) There is a claim of mistaken identity."

42
43 **AUTHORIZATION FOR DSS TO GRANT EXCEPTIONS FOR EQUIVALENT CHILD**
44 **WELFARE TRAINING COMPLETED IN ANOTHER STATE**

45 **SECTION 7.4.** G.S. 131D-10.6A reads as rewritten:

46 **"§ 131D-10.6A. Training by the Division of Social Services required.**

47 ...

48 (b) The Division of Social Services shall establish minimum training requirements for
49 child welfare services staff. The minimum training requirements established by the Division are
50 as follows:

- 1 (1) Child welfare services workers shall complete a minimum of 72 hours of
 2 preservice training before assuming direct client contact responsibilities. In
 3 completing this requirement, the Division of Social Services shall ensure that
 4 each child welfare worker receives training on family centered practices and
 5 State and federal law regarding the basic rights of individuals relevant to the
 6 provision of child welfare services, including the right to privacy, freedom
 7 from duress and coercion to induce cooperation, and the right to parent.
- 8 (2) Child protective services workers shall complete a minimum of 18 hours of
 9 additional training that the Division of Social Services determines is necessary
 10 to adequately meet training needs.
- 11 (3) Foster care and adoption workers shall complete a minimum of 39 hours of
 12 additional training that the Division of Social Services determines is necessary
 13 to adequately meet training needs.
- 14 (4) Child welfare services supervisors shall complete a minimum of 72 hours of
 15 preservice training before assuming supervisory responsibilities and a
 16 minimum of 54 hours of additional training that the Division of Social
 17 Services determines is necessary to adequately meet training needs.
- 18 (5) Child welfare services staff shall complete 24 hours of continuing education
 19 annually. In completing this requirement, the Division of Social Services shall
 20 provide each child welfare services staff member with annual update
 21 information on family centered practices and State and federal law regarding
 22 the basic rights of individuals relevant to the provision of child welfare
 23 services, including the right to privacy, freedom from duress and coercion to
 24 induce cooperation, and the right to parent.

25 (c) The Division of Social Services may grant an exception in whole or in part to the
 26 requirement under subdivision ~~(1) of this subsection~~ (b)(1) of this section to child welfare
 27 workers who ~~satisfactorily meet either of the following:~~

- 28 (1) Satisfactorily complete or are enrolled in a masters or bachelors program after
 29 July 1, 1999, from a North Carolina social work program accredited pursuant
 30 to the Council on Social Work Education. The program's curricula must cover
 31 the specific preservice training requirements as established by the Division of
 32 Social Services.
- 33 (2) Have child welfare work experience in another state and have completed child
 34 welfare training equivalent to training in this State.

35 (d) The Division of Social Services shall ensure that training opportunities are available
 36 for county departments of social services and consolidated human service agencies to meet the
 37 training requirements of ~~this subsection~~ subsection (b) of this section."

39 CLARIFICATION OF WHO SETS MAXIMUM DAILY RATE FOR ADULT DAY 40 CARE SERVICES

41 **SECTION 7.5.** G.S. 143B-153(2a)b.3. reads as rewritten:

- 42 "3. Maximum rates of payment for the provision of social services,
 43 except there shall be no maximum statewide reimbursement
 44 rate for adult day care services, adult day health services, and
 45 the associated transportation services, as these reimbursement
 46 rates shall be determined at the local level by the county
 47 department of social services or a designee of the board of
 48 county commissioners to allow flexibility in responding to
 49 local variables."
 50

1 **PART VIII. LAWS PERTAINING TO THE DIVISION OF VOCATIONAL**
2 **REHABILITATION SERVICES**

3
4 **CHANGES TO EFFECTUATE RENAMING OF DIVISION**

5 **SECTION 8.1.** G.S. 108A-26 reads as rewritten:

6 **"§ 108A-26. Certain financial assistance and in-kind goods not considered in determining**
7 **assistance paid under Chapters 108A and 111.**

8 Financial assistance and in-kind goods or services received from a governmental agency, or
9 from a civic or charitable organization, shall not be considered in determining the amount of
10 assistance to be paid any person under Chapters 108A and 111 of the General Statutes provided
11 that such financial assistance and in-kind goods and services are incorporated in the rehabilitation
12 plan of such person being assisted by the Division of ~~Vocational Rehabilitation Services~~
13 Inclusive Employment and Independence or the Division of Services for the Blind of the
14 Department of Health and Human Services, except where such goods and services are required
15 to be considered by federal law or regulations."

16 **SECTION 8.2.** G.S. 111-11.1 reads as rewritten:

17 **"§ 111-11.1. Jurisdiction of certain Divisions within the Department of Health and Human**
18 **Services.**

19 For the purpose of providing rehabilitative services to people who are visually impaired, the
20 Division of Services for the Blind and the Division of ~~Vocational Rehabilitation Services~~
21 Inclusive Employment and Independence shall develop and enter into an agreement specifying
22 which agency can most appropriately meet the specific needs of this client population. If the
23 Divisions cannot reach an agreement, the Secretary of Health and Human Services shall
24 determine which Division can most appropriately meet the specific needs of this client
25 population."

26 **SECTION 8.3.** G.S. 122C-22(a)(7) reads as rewritten:

27 "(7) Persons subject to rules and regulations of the Division of ~~Vocational~~
28 ~~Rehabilitation Services;~~Inclusive Employment and Independence."

29 **SECTION 8.4.** G.S. 131D-2.3 reads as rewritten:

30 **"§ 131D-2.3. Exemptions from licensure.**

31 The following are excluded from this Article and are not required to be registered or obtain
32 licensure under this Article:

- 33 (1) Facilities licensed under Chapter 122C or Chapter 131E of the General
34 ~~Statutes;~~Statutes.
- 35 (2) Persons subject to rules of the Division of ~~Vocational Rehabilitation~~
36 ~~Services;~~Inclusive Employment and Independence.
- 37 (3) Facilities that care for no more than four persons, all of whom are under the
38 supervision of the United States Veterans ~~Administration;~~Administration.
- 39 (4) Facilities that make no charges for housing, amenities, or personal care
40 service, either directly or ~~indirectly;~~ and indirectly.
- 41 (5) Institutions that are maintained or operated by a unit of government and that
42 were established, maintained, or operated by a unit of government and exempt
43 from licensure by the Department on September 30, 1995."

44 **SECTION 8.5.** G.S. 143-545.1(a) reads as rewritten:

45 "(a) Policy. – Recognizing that disability is a natural part of human experience, the State
46 establishes as its policy that individuals with physical and mental disabilities should be able to
47 participate to the maximum extent of their abilities in the economic, educational, cultural, social,
48 and political activities available to all citizens of the State. To implement this policy, the
49 Department of Health and Human Services shall establish and operate comprehensive and
50 accountable programs of vocational rehabilitation and independent living for persons with
51 disabilities. These programs are to be administered by the Division of ~~Vocational Rehabilitation~~

1 ~~Services-Inclusive Employment and Independence~~ in collaboration with the Division of Services
2 for the Blind, which conducts vocational rehabilitation and independent living programs for
3 individuals who are blind or visually impaired, pursuant to Chapter 111 of the General Statutes
4 and the rules of the Commission for the Blind adopted pursuant to G.S. 143B-157. The programs
5 so provided shall be administered according to the following principles:

6"

7 **SECTION 8.6.** G.S. 143-547 reads as rewritten:

8 "**§ 143-547. Subrogation rights; withholding of information a misdemeanor.**

9 ...

10 (b) In furnishing a person rehabilitation services, including medical case services under
11 this Chapter, the Division of ~~Vocational Rehabilitation Services-Inclusive Employment and~~
12 Independence is subrogated to the person's right of recovery from:

13 (1) Personal insurance;

14 (2) Worker's Compensation;

15 (3) Any other person or personal injury caused by the other person's negligence
16 or wrongdoing; or

17 (4) Any other source.

18 (c) The Division of ~~Vocational Rehabilitation Services'-Inclusive Employment and~~
19 Independence's right to subrogation is limited to the cost of the rehabilitation services provided
20 by or through the Division for which a financial needs test is a condition of the service provisions.
21 Those services that are provided without a financial needs test are excluded from these
22 subrogation rights.

23 (d) The Division of ~~Vocational Rehabilitation Services-Inclusive Employment and~~
24 Independence may totally or partially waive subrogation rights when the Division finds that
25 enforcement would tend to defeat the client's process of rehabilitation or when client assets can
26 be used to offset additional Division costs.

27 (e) The Division of ~~Vocational Rehabilitation Services-Inclusive Employment and~~
28 Independence may adopt rules for the enforcement of its rights of subrogation.

29 (f) It is a Class 1 misdemeanor for a person seeking or having obtained assistance under
30 this Part for himself or another to willfully fail to disclose to the Division of ~~Vocational~~
31 Rehabilitation Services-Inclusive Employment and Independence or its attorney the identity of
32 any person or organization against whom the recipient of assistance has a right of recovery,
33 contractual or otherwise."

34 **SECTION 8.7.** G.S. 143-548 reads as rewritten:

35 "**§ 143-548. Vocational State Rehabilitation Council.**

36 (a) There is established the Vocational State Rehabilitation Council (Council) in support
37 of the activities of the Division of ~~Vocational Rehabilitation Services-Inclusive Employment and~~
38 Independence to be composed of not more than 18 appointed members. Appointed members shall
39 be voting members except where prohibited by federal law or regulations. The Director of the
40 Division of ~~Vocational Rehabilitation Services-Inclusive Employment and Independence~~ and one
41 vocational rehabilitation counselor who is an employee of the Division shall serve ex officio as
42 nonvoting members. The President Pro Tempore of the Senate shall appoint six members, the
43 Speaker of the House of Representatives shall appoint six members, and the Governor shall
44 appoint five or six members. The appointing authorities shall appoint members of the Council
45 after soliciting recommendations from representatives of organizations representing a broad
46 range of individuals with disabilities. Terms of appointment shall be as specified in subsection
47 (d1) of this section. Appointments shall be made as follows:

48 ...

49 (b1) Additional Qualifications. – In addition to ensuring the qualifications for membership
50 prescribed in subsection (a) of this section, the appointing authorities shall ensure that a majority

1 of Council members are individuals with disabilities and are not employed by the Division of
2 ~~Vocational Rehabilitation Services-Inclusive Employment and Independence.~~
3"

5 PART IX. MISCELLANEOUS

7 MODIFICATION OF EDUCATIONAL REQUIREMENTS FOR REGISTERED 8 ENVIRONMENTAL HEALTH SPECIALISTS

9 SECTION 9.1.(a) G.S. 90A-53 reads as rewritten:

10 "§ 90A-53. Qualifications and examination for registration as an environmental health 11 specialist or environmental health specialist intern.

12 (a) The Board shall issue a certificate to a qualified person as a registered environmental
13 health specialist or a registered environmental health specialist intern. A certificate as a registered
14 environmental health specialist or a registered environmental health specialist intern shall be
15 issued to any person upon the Board's determination that the ~~person;person~~ satisfies all of the
16 following criteria:

- 17 (1) Has made application to the Board on a form prescribed by the Board and paid
18 a fee not to exceed one hundred dollars ~~(\$100.00);(\$100.00).~~
- 19 (2) Is of good moral and ethical character and has signed an agreement to adhere
20 to the Code of Ethics adopted by the ~~Board;Board.~~
- 21 (3) Meets any of the following combinations of education and practice experience
22 standards:
 - 23 a. ~~Graduated from a baccalaureate with a bachelor's degree or~~
24 ~~postgraduate degree from a program that is accredited by the National~~
25 ~~Environmental Health Science and Protection Accreditation Council~~
26 ~~(EHAC) and has one or more years of experience in the field of~~
27 ~~environmental health practice; or(EHAC).~~
 - 28 b. ~~Graduated from a baccalaureate or postgraduate degree program that~~
29 ~~is accredited by an accrediting organization recognized by the United~~
30 ~~States Department of Education, Council for Higher Education~~
31 ~~Accreditation (CHEA) with a bachelor's degree or postgraduate degree~~
32 ~~and meets both of the following:~~
 - 33 ~~1. Earned—earned~~ a minimum of 30 semester hours or its
34 ~~equivalent—45 quarter hours~~ in the ~~physical or biological~~
35 ~~sciences; and~~physical, biological, natural, life, or health
36 sciences and has one
 - 37 ~~2. Has two or more years of experience in the field of~~
38 ~~environmental health practice.~~
 - 39 c. ~~Graduated from a baccalaureate program rated as acceptable by the~~
40 ~~Board and meets both of the following;with a bachelor's degree or~~
41 ~~postgraduate degree in public health and has one or more years of~~
42 ~~experience in the field of environmental health practice.~~
 - 43 ~~1. Earned a minimum of 30 semester hours or its equivalent in the~~
44 ~~physical or biological sciences; and~~
 - 45 ~~2. Has two or more years of experience in the field of~~
46 ~~environmental health practice.~~
- 47 (4) Has satisfactorily completed a course in specialized instruction and training
48 approved by the Board in the practice of environmental ~~health;health.~~
- 49 (5) Repealed by Session Laws 2009-443, s. 4, effective August 7, 2009.
- 50 (6) Has passed an examination administered by the Board designed to test for
51 competence in the subject matters of environmental health sanitation. The

1 examination shall be in a form prescribed by the Board and may be oral,
2 written, or both. The examination for applicants shall be held annually or more
3 frequently as the Board may by rule prescribe, at a time and place to be
4 determined by the Board. A person shall not be registered if such person fails
5 to meet the minimum grade requirements for examination specified by the
6 Board. Failure to pass an examination shall not prohibit such person from
7 being examined at subsequent times and places as specified by the ~~Board;~~
8 ~~and Board.~~

9 (7) Has paid a fee set by the Board not to exceed the cost of purchasing the
10 examination and an administrative fee not to exceed one hundred fifty dollars
11 (\$150.00).

12 (b) The Board may issue a certificate to a person serving as a registered environmental
13 health specialist intern without the person meeting the full requirements for experience of a
14 registered environmental health specialist for a period not to exceed ~~three~~ two years from the date
15 of initial registration as a registered environmental health specialist intern, provided, the person
16 meets the educational requirements in G.S. 90A-53 and is in the field of environmental health
17 practice."

18 **SECTION 9.1.(b)** This section becomes effective October 1, 2023.

19
20 **PART X. EFFECTIVE DATE**

21 **SECTION 10.1.** Except as otherwise provided, this act is effective when it becomes
22 law.