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HOUSE BILL 287
Committee Substitute Favorable 3/21/23
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Senate Health Care Committee Substitute Adopted 6/12/24
Senate Health Care Committee Substitute Adopted 6/19/24

Short Title: Health Care Omnibus.

(Public)

Sponsors:

Referred to:

March 8, 2023

A BILL TO BE ENTITLED

AN ACT REQUIRING HEALTH CARE PRACTITIONERS AND PHARMACISTS TO EDUCATE PATIENTS WITH PRESCRIPTIONS FOR OPIOID PAIN MEDICATIONS AND MEDICATIONS TO TREAT OPIOID USE DISORDER ABOUT THE POTENTIAL DANGERS OF OPIOIDS, OVERDOSE PREVENTION, AND THE AVAILABILITY AND USE OF OPIOID ANTAGONISTS TO PREVENT OVERDOSE DEATHS; CLARIFYING MEDICAID BENEFITS FOR INMATES; ALLOWING RECIPROCAL LICENSING FOR MARRIAGE AND FAMILY THERAPISTS; REDUCING THE UNNECESSARY REGULATORY BURDEN ON MASTER'S LEVEL PSYCHOLOGISTS; INCREASING ACCESS TO QUALITY MENTAL HEALTH CARE SERVICES; ELIMINATING CERTIFICATE OF NEED REVIEW FOR INPATIENT REHABILITATION SERVICES, REHABILITATION FACILITIES, AND REHABILITATION BEDS; INCREASING THE NUMBER OF EDUCATION HOURS REQUIRED FOR LICENSURE AS A MASSAGE THERAPIST; AND ENCOURAGING THE USE OF TRIBAL HEALTH FACILITIES BY STATE RESIDENTS SEEKING MENTAL HEALTH TREATMENT.

The General Assembly of North Carolina enacts:

SECTION 1.(a) Article 1 of Chapter 90 of the General Statutes is amended by adding a new section to read:

"§ 90-12.8. Requirement to provide opioid antagonist education.

(a) Consistent with the federal Food and Drug Administration's labeling requirements for opioid pain medication and medication to treat opioid use disorder announced in its Drug Safety Communication dated July 23, 2020, a practitioner as defined in G.S. 90-87(22) shall do all of the following when issuing a prescription for a Schedule II controlled substance described in G.S. 90-90(1):

- (1) Provide information regarding all of the following to each patient receiving the prescription:
 - a. The potential dangers of opioids.
 - b. Overdose prevention.
 - c. The availability and use of a drug approved by the federal Food and Drug Administration as an opioid antagonist for the complete or partial reversal of opioid-induced respiratory depression.



- 1 (2) Provide the information described in sub-subdivisions (1)a. through (1)c. of
 2 this subsection to one or more persons if designated by the patient receiving
 3 the prescription or, for a patient who is a minor, to the minor's parent,
 4 guardian, or person standing in loco parentis.
- 5 (b) When dispensing a Schedule II controlled substance described in G.S. 90-90(1), a
 6 pharmacy, through a pharmacist or pharmacy personnel, shall do one of the following:
 - 7 (1) Make available in electronic or paper form the information described in
 8 sub-subdivisions (a)(1)a. through (a)(1)c. of this section that is consistent with
 9 the federal Food and Drug Administration's labeling requirements for opioid
 10 pain medication and medication to treat opioid use disorder announced in its
 11 Drug Safety Communication dated July 23, 2020.
 - 12 (2) Post signage in a conspicuous place containing the information described in
 13 sub-subdivisions (a)(1)a. through (a)(1)c. of this section. The information
 14 required to be on the signage may be provided through a Quick Response code
 15 or similar technology.
- 16 (c) Nothing in this section shall be construed to do any of the following:
 - 17 (1) Limit a practitioner's liability for negligent diagnosis or treatment of a patient,
 18 as allowed under applicable State or federal law.
 - 19 (2) Constitute negligence per se or create a private right of action against any
 20 practitioner, including a pharmacy, a pharmacist, or pharmacy personnel, who
 21 fails to follow the requirements of this section.
- 22 (d) This section shall not apply to the following:
 - 23 (1) A practitioner providing hospice services as defined in G.S. 131E-201(5b) to
 24 a hospice patient as defined in G.S. 131E-201(4).
 - 25 (2) A veterinarian acting in the practice of veterinary medicine, as defined in
 26 G.S. 90-181, at an animal health center, emergency facility, mobile facility,
 27 veterinary clinic, or veterinary hospital, as defined in G.S. 90-181.1."

28 **SECTION 1.(b)** This section becomes effective December 1, 2025.

29 **SECTION 2.(a)** G.S. 108D-40 reads as rewritten:

30 **"§ 108D-40. Populations covered by PHPs.**

31 (a) Capitated PHP contracts shall cover all Medicaid program aid categories except for
 32 the following categories:

- 33 ...
- 34 (9) Recipients who are inmates of prisons. Upon the recipient's release from
 35 prison, the exception under this subdivision shall continue to apply for a
 36 period that is the shorter of the following:
 - 37 a. The recipient's initial Medicaid eligibility certification period post
 38 release.
 - 39 b. Three hundred sixty-five days.
- 40 (9a) Recipients residing in carceral settings other than prisons and whose Medicaid
 41 eligibility has been suspended. Upon the recipient's release from
 42 incarceration, the exception under this subdivision shall continue to apply for
 43 a period that is the shorter of the following:
 - 44 a. The recipient's initial Medicaid eligibility certification period post
 45 release.
 - 46 b. Three hundred sixty-five days.

47 "

48 **SECTION 2.(b)** This section is effective January 1, 2025.

49 **SECTION 3.(a)** G.S. 90-270.56 reads as rewritten:

50 **"§ 90-270.56. Reciprocal licenses.**

1 (a) Reciprocal License for Marriage and Family Therapist. – The Board ~~may~~ shall issue
2 a license as a marriage and family therapist ~~or a marriage and family therapy associate~~ by
3 reciprocity to any person who applies for the license as prescribed by the Board and who at all
4 times during the application process:

5 (1) ~~Has been licensed for five continuous years and is~~ Meets one of the following:

6 a. Is currently licensed as a marriage and family therapist ~~or marriage~~
7 and family therapy associate in another state and has passed the
8 Board's examination on jurisprudence required by G.S. 90-270.55.

9 b. Is currently licensed as a marriage and family therapist in another state
10 and has been licensed for two continuous years.

11 (2) ~~Has~~ Holds an unrestricted license in good standing in the other state.

12 (3) Has no unresolved complaints in any jurisdiction.

13 (4) Has passed the National Marriage and Family Therapy
14 ~~examination~~ examination or has passed the clinical examination required by
15 the licensing board that regulates marriage and family therapy in the State of
16 California.

17 (b) Applicant Reporting Requirement. – An applicant applying for license as a marriage
18 and family therapist by reciprocity under subsection (a) of this section shall submit a current
19 report from the U.S. Department of Health and Human Services National Practitioner Data Bank
20 to the Board.

21 (c) Licensure Provisions. – Any license issued pursuant to this section shall designate the
22 license as a reciprocal license. The holder of a license to engage in the practice of marriage and
23 family therapy issued pursuant to this section shall be entitled to the same rights and subject to
24 the same obligations, including continuing education, as required of any person holding a license
25 issued pursuant to G.S. 90-270.54.

26 (d) Reciprocal License for Marriage and Family Associate. – The Board shall issue a
27 license as a marriage and family therapy associate by reciprocity to any person who applies for
28 the license as prescribed by the Board and who at all times during the application process:

29 (1) Has been licensed for five continuous years and is currently licensed as a
30 marriage and family therapy associate in another state.

31 (2) Has an unrestricted license in good standing in the other state.

32 (3) Has no unresolved complaints in any jurisdiction.

33 (4) Has passed the National Marriage and Family Therapy examination."

34 **SECTION 3.(b)** G.S. 90-270.55 reads as rewritten:

35 **"§ 90-270.55. Examinations.**

36 (a) Each applicant for licensure as a licensed marriage and family therapist shall pass an
37 examination as determined by the Board.

38 (b) All applicants for reciprocal licensure shall pass an examination described in
39 G.S. 90-270.56(a)(4). Applicants for reciprocal licensure under G.S. 90-270.56(a)(1)a. shall also
40 pass a jurisprudence examination that is limited to testing of the knowledge of the laws and rules
41 of the State.

42 (c) The Board shall set the passing score for examinations. Any request by an applicant
43 for reasonable accommodations in taking the examination shall be submitted in writing to the
44 Board and shall be supported by documentation as may be required by the Board in assessing the
45 request."

46 **SECTION 3.(c)** G.S. 90-270.63(a) reads as rewritten:

47 **"§ 90-270.63. Criminal history record checks of applicants for licensure as a marriage and**
48 **family therapist and a marriage and family therapy associate.**

49 (a) Definitions. – The following definitions shall apply in this section:

50 (1) Applicant. – A person applying for licensure as a licensed marriage and family
51 therapy associate pursuant to G.S. 90-270.54A or G.S. 90-270.56(d) or a

licensed marriage and family therapist pursuant to
~~G.S. 90-270.54.~~G.S. 90-270.54 or G.S. 90-270.56(a).

...."

SECTION 3.(d) This section becomes effective October 1, 2024, and applies to applications for licensure received on or after that date.

SECTION 4.(a) G.S. 90-270.139 reads as rewritten:

"§ 90-270.139. Application; examination; supervision; provisional and temporary licenses.

(e) Except as provided in subsection (e1) of this section:

(1) A licensed psychological associate shall be supervised by a qualified licensed psychologist, or ~~other~~ qualified professionals, licensed psychological associate in accordance with Board rules specifying the format, setting, content, time frame, amounts of supervision, qualifications of supervisors, disclosure of supervisory relationships, the organization of the supervised experience, and the nature of the responsibility assumed by the supervisor.

(2) A licensed psychological associate who provides health services shall be supervised, for those activities requiring supervision, supervised by a qualified licensed psychologist holding health services provider certification or by ~~other~~ a qualified professionals licensed psychological associate under the overall direction of a qualified licensed psychologist holding health services provider certification, in accordance with Board rules.

(3) ~~Except as provided below, supervision, Supervision, including the supervision of health services, is required only when a licensed psychological associate engages in: assessment of personality functioning; neuropsychological evaluation; psychotherapy, counseling, and other interventions with clinical populations for the purpose of preventing or eliminating symptomatic, maladaptive, or undesired behavior; and, the use of intrusive, punitive, or experimental procedures, techniques, or measures. The Board shall adopt rules implementing and defining this provision, and as the practice of psychology evolves, may identify additional activities requiring supervision in order to maintain acceptable standards of practice.~~in the practice of psychology in accordance with Board rules.

(e1) The Board shall approve any licensed psychological associate to engage in independent practice, without supervision by a qualified licensed psychologist or qualified licensed psychological associate, if the licensed psychological associate meets all of the following requirements:

(1) Has 4,000 hours of post-licensure experience in the delivery of psychological services under the supervision of one or more qualified licensed psychologists or qualified licensed psychological associates within a time period of at least 24 consecutive months and less than 60 consecutive months.

(2) Documents that all performance ratings for the 4,000 hours of post-licensure experience required by subdivision (1) of this subsection have been average or above average.

(3) Submits an application for independent practice with proof of the 4,000 hours of post-licensure experience required by subdivision (1) of this subsection.

...."

SECTION 4.(b) G.S. 90-270.145 reads as rewritten:

"§ 90-270.145. Licensure; examination; foreign graduates.

(b) Licensed Psychological Associate. –

...

(3) No licensed psychological associate shall engage in the practice of neuropsychology or forensic psychology without first demonstrating specialized education and training to practice in those areas as the Board may determine by rule. In considering whether the licensed psychological associate has sufficient specialized education and training to engage in the practice of neuropsychology or forensic psychology, the Board may consider the licensed psychological associate's graduate level course work, continuing education, supervised training experience, or any other factors the Board deems appropriate. For purposes of this subdivision, "neuropsychology" is defined as "the branch of science that studies the physiological processes of the nervous system and relates them to behavior and cognition" and "forensic psychology" is defined as "the application of psychological principles and techniques to situations that are involved in the civil and criminal legal systems, including, but not limited to, psychological assessments and expert testimony."

...."

SECTION 4.(c) G.S. 90-270.153 reads as rewritten:

"§ 90-270.153. Provision of health services; certification as health services provider.

(a) Health services, as defined in G.S. 90-270.136(4) and G.S. 90-270.136(8), may be provided by qualified licensed psychological associates, qualified licensed psychologists holding provisional, temporary, or permanent licenses, or qualified applicants. ~~Qualified~~ Except as provided in subsection (h) of this section, qualified licensed psychological associates, qualified licensed psychologists holding provisional or temporary licenses, or qualified applicants may provide health services only under supervision as specified in the duly adopted rules of the Board.

...

(h) A licensed psychological associate who possesses a certification as a health services provider psychological associate in accordance with subsection (c) of this section may provide health services without supervision upon meeting the requirements in G.S. 90-270.139(e1).

(i) Notwithstanding the provisions of subsection (h) of this section, a licensed psychological associate who was licensed before June 30, 2013, who can demonstrate, in accordance with Board rules, that he or she has been engaged in the provision of health services psychology under supervision for 4,000 hours within a time period of at least 24 consecutive months and less than 60 consecutive months, shall meet the requirements for certification as a health services provider psychological associate."

SECTION 4.(d) G.S. 90-270.140 reads as rewritten:

"§ 90-270.140. Psychology Board; appointment; term of office; composition.

For the purpose of carrying out the provisions of this Article, there is created a North Carolina Psychology Board, which shall consist of seven members appointed by the Governor. At all times three members shall be licensed psychologists, two members shall be licensed psychological associates, and two members shall be members of the public who are not licensed under this Article. The Governor shall give due consideration to the adequate representation of the various fields and areas of practice of psychology and to adequate representation from various geographic regions in the State. Terms of office shall be three years. All terms of service on the Board expire June 30 in appropriate years. As the term of a psychologist member expires, or as a vacancy of a psychologist member occurs for any other reason, the Board, the North Carolina Psychological Association, or its successor, shall, and the North Carolina Association of Professional Psychologists, or its successor, shall form a nominating committee and, having sought the advice of the chairs of the graduate departments of psychology in the State, nominees from licensee for each vacancy, shall submit to the Governor a list of the names of three eligible persons. From this list the Governor shall make the appointment for a full term, or for the remainder of the unexpired term, if any. Each Board member shall serve until his or her successor has been

1 appointed. As the term of a member expires, or if one should become vacant for any reason, the
 2 Governor shall appoint a new member within 60 days of the vacancy's occurring. No member,
 3 either public or licensed under this Article, shall serve more than three complete consecutive
 4 terms."

5 **SECTION 4.(e)** This section is effective October 1, 2024.

6 **SECTION 5.(a)** G.S. 131E-176 reads as rewritten:

7 **"§ 131E-176. Definitions.**

8 The following definitions apply in this Article:

- 9 ...
- 10 (9a) Health service. – An organized, interrelated activity that is medical,
 11 diagnostic, therapeutic, ~~rehabilitative~~, or a combination thereof and that is
 12 integral to the prevention of disease or the clinical management of an
 13 individual who is sick or injured or who has a disability. "Health service" does
 14 not include administrative and other activities that are not integral to clinical
 15 management.
- 16 (9b) Health service facility. – A hospital; long-term care hospital; ~~rehabilitation~~
 17 ~~facility~~; nursing home facility; adult care home; kidney disease treatment
 18 center, including freestanding hemodialysis units; intermediate care facility
 19 for individuals with intellectual disabilities; home health agency office;
 20 diagnostic center; hospice office, hospice inpatient facility, hospice residential
 21 care facility; and ambulatory surgical facility.
- 22 (9c) Health service facility bed. – A bed licensed for use in a health service facility
 23 in the categories of (i) acute care beds; ~~(iii) rehabilitation beds~~; ~~(iv)~~ ~~(ii)~~ nursing
 24 home beds; ~~(v)~~ ~~(iii)~~ intermediate care beds for individuals with intellectual
 25 disabilities; ~~(vii)~~ ~~(iv)~~ hospice inpatient facility beds; ~~(viii)~~ ~~(v)~~ hospice
 26 residential care facility beds; ~~(ix)~~ ~~(vi)~~ adult care home beds; and ~~(x)~~ ~~(vii)~~
 27 long-term care hospital beds.
- 28 ...
- 29 (13) Hospital. – A public or private institution which is primarily engaged in
 30 providing to inpatients, by or under supervision of physicians, diagnostic
 31 services and therapeutic services for medical diagnosis, treatment, and care of
 32 injured, disabled, or sick persons, ~~or rehabilitation services for the~~
 33 ~~rehabilitation of injured, disabled, or sick persons~~. The term includes all
 34 facilities licensed pursuant to G.S. 131E-77, except rehabilitation facilities
 35 and long-term care hospitals.
- 36 ...
- 37 (22) Rehabilitation facility. – ~~A public or private inpatient facility which is~~
 38 ~~operated for the primary purpose of assisting in the rehabilitation of~~
 39 ~~individuals with disabilities through an integrated program of medical and~~
 40 ~~other services which are provided under competent, professional~~
 41 ~~supervision.~~ A facility that has been classified and designated as an inpatient
 42 rehabilitation facility by the Centers for Medicare and Medicaid Services
 43 pursuant to Part 412 of Subchapter B of Chapter IV of Title 42 of the Code of
 44 Federal Regulations.

45"

46 **SECTION 5.(b)** This section is effective when it becomes law.

47 **SECTION 6.(a)** G.S. 90-629 reads as rewritten:

48 **"§ 90-629. Requirements for licensure to practice.**

49 Upon application to the Board and the payment of the required fees, an applicant may be
 50 licensed as a massage and bodywork therapist if the applicant meets all of the following
 51 qualifications:

- 1 (1) Has obtained a high school diploma or equivalent.
- 2 (2) Is 18 years of age or older.
- 3 (3) Is of good moral character as determined by the Board.
- 4 (4) Has successfully completed a training program consisting of a minimum of
- 5 ~~500~~650 in-class hours of supervised instruction at a Board-approved school.
- 6 (5) Has passed a competency assessment examination that meets generally
- 7 accepted psychometric principles and standards and is approved by the Board.
- 8 (6) Has submitted fingerprint cards in a form acceptable to the Board at the time
- 9 the license application is filed and consented to a criminal history record check
- 10 by the State Bureau of Investigation.
- 11 (7) Demonstrates satisfactory proof of proficiency in the English language."

12 **SECTION 6.(b)** This section is effective July 1, 2024, and applies to applications
13 for licensure received on or after that date.

14 **SECTION 7.(a)** The Secretary of the Department of Health and Human Services
15 (DHHS) and the local management entity/managed care organizations (LME/MCOs) are
16 encouraged to enter into any intergovernmental agreements allowable under federal and State
17 law with the Eastern Band of Cherokee Indians to facilitate the use of tribal health facilities by
18 any residents of the State seeking voluntary admission to those facilities or subject to involuntary
19 commitment under State law. These agreements may address matters such as transportation of
20 individuals under involuntary commitment and assurances of compliance with State and tribal
21 court orders, and other matters, as necessary.

22 **SECTION 7.(b)** By February 1, 2025, DHHS, in consultation with the LME/MCOs,
23 shall report to the Joint Legislative Oversight Committee on Medicaid on whether any
24 intergovernmental agreements, as described in this section, have occurred. The report shall
25 identify any proposed legislative changes that are necessary to further facilitate the use of tribal
26 health facilities by any residents of the State seeking voluntary admission to those facilities or
27 subject to involuntary commitment under State law.

28 **SECTION 7.(c)** This section shall be effective when it becomes law.

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