



HOUSE BILL 196: 2021 COVID-19 Response & Relief.

This Bill Analysis reflects the contents of the bill as it was presented in committee.

2021-2022 General Assembly

Committee:	House Appropriations	Date:	March 1, 2021
Introduced by:	Reps. Faircloth, Bumgardner, K. Strickland	Prepared by:	Matthew Meinig Staff Attorney
Analysis of:	First Edition		

OVERVIEW: *The bill draft (i) makes modifications to the State COVID-19 relief legislation and (ii) appropriates and provides additional guidance for expenditure of COVID-19 pandemic relief funds from the federal Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA).*

BILL ANALYSIS: The bill draft does the following:

- Section 1.1 appropriates federal CRRSAA funds for various programs to be administered by State agencies.
- Section 1.2 directs the Department of Public Instruction to allocate federal funds received under the Elementary and Secondary School Emergency Relief II Fund (ESSER II) to support various programs and entities in response to the COVID-19 pandemic.
- Section 1.3 directs the State Board of Education to use unallocated ESSER II funds to meet the emergency needs of elementary and secondary schools.
- Section 1.4 provides additional guidelines to the Office of Recovery and Resiliency in the administration of the federal Emergency Rental Assistance program and allocation of the funds received under the program.
- Section 1.5 appropriates certain federal block grant funds in response to the COVID-19 pandemic as follows: (i) Over \$335M in federal Child Care and Development Block Grant funds for cleaning and sanitation, copayment assistance, and other initiatives, as funds are available; provided no funds are to be used for staff bonuses; (ii) over \$47M in federal Community Mental Health Services Block Grant funds for mental health, including \$2.1M for NC-STeP (statewide telepsychiatry program); and (iii) over \$11M in federal Substance Abuse Prevention and Treatment Block Grant funds for services statewide for those in need.
- Section 1.6 allocates the CDC/ELC Enhancing Detection Expansion cooperative agreement grant appropriated to the Division of Public Health (DPH) under Section 1.1(a), for use in accordance with CDC guidance and regulations as follows:
 - (1) \$84M to local health departments (LHDs), based upon the percentage of the State population served by each of the LHDs, for allowable uses under the ELC Enhancing Detection Expansion cooperative agreement grant.
 - (2) \$15M to the NC Policy Collaboratory at UNC Chapel Hill (Collaboratory) to develop and manage a plan for an initiative to implement alternative COVID-19 surveillance methods throughout the State. The plan must complement DPH's activities; comply with the ELC Enhancing Detection Expansion cooperative agreement grant; outline a method for

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- implementing alternative surveillance methods utilizing UNC resources and other partnerships; and include alternative surveillance methods for as many of the 17 constituent institutions as feasible. The DPH is prohibited from allocating, and the Collaboratory is prohibiting from expending, any of these funds without CDC approval. If the CDC disapproves of the use of the funds as outlined in this subdivision and the Collaboratory is unable to gain subsequent CDC approval through revisions to any disapproved plan components, then the disapproved plan components shall not be implemented and DPH may use any unexpended funds for any other CDC-approved activity.
- Section 1.6A directs the DHHS to allocate, as allowed under federal law and guidance, up to \$3M to the Government Data Analytics Center (GDAC) from federal COVID-19 Vaccine Preparedness grant funds or from Federal Emergency Management Agency (FEMA) funds to cover the actual costs associated with (i) integration of the NC COVID Vaccine Management System with NC HealthConnex and (ii) added functionality between those systems to support the State's public health response to COVID-19. If the federal government disapproves of using COVID-19 Vaccine Preparedness grant funds or FEMA funds for these purposes, then the DHHS must allocate to the GDAC up to \$3M from the ELC Enhancing Detection Expansion cooperative agreement grant to cover the actual costs of the project.
 - Section 1.7 appropriates funds received under the CRRSAA for transportation purposes as follows:
 - Subsection (a) appropriates federal funds received as FAA grants-in-aid to the Department of Transportation to be allocated in accordance with the FAA allocation to certain airports.
 - Subsection (b) appropriates federal funds received as apportioned by the Federal Highway Administration (FHWA) to DOT for STI projects, maintenance within the Roadside Environmental Unit, and to be suballocated to urbanized areas with a population over 200,000, as set forth in the FHWA apportionment notice.
 - Subsection (c) appropriates federal funds received through the Federal Transit Administration (FTA) for the Enhanced Mobility of Seniors and People with Disabilities Program (49 U.S.C. § 5310).
 - Subsection (d) prohibits use of CRRSAA funds for DOT employees.
 - Subsection (e) prohibits use of CRRSAA funds to replace funds appropriated to the Department or approved for use in the Department Spend Plan.
 - Subsection (f) requires the Department to maintain a 15%-20% cash balance for FY21-22.
 - Subsection (e) requires the Department to submit quarterly reports to JLTOC on use of CRRSAA funds.
 - Section 1.8 establishes a reporting requirement on the use of federal grant funds appropriated in this bill.
 - Section 2.1 extends the 5% Medicaid fee-for-service rate increases for all provider types that were set to expire March 31, 2021, to June 30, 2021, unless the public health emergency ends, or Executive Order No. 116 expires or is rescinded, prior to that date.
 - Section 2.2 clarifies that funds provided for community and home mobile internet access points for students may be used for internet service provided as part of the purchase price of a device and at no additional or ongoing cost.

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- Section 2.3 retroactively extends the temporary provision from the 2020 session in which UNC constituent institutions were prohibited from charging interest on students' past due accounts, which had expired on September 15, 2020. This provision extends the prohibition to apply between March 13, 2020, and December 31, 2021.
- Section 2.4 allows UNC employees to use accrued vacation, sick, and bonus leave for any COVID-19 related absences, except in certain leave option circumstances.
- Section 2.5 extends the provision that allowed increased enrollment for virtual charter schools for the 2020-2021 school year to have the same increased enrollment for the 2021-2022 school year.
- Section 2.6 further extends the statute of limitations for civil actions involving child sex abuse claims initially extended under S.L. 2019-245. That same act revived, for the period covering January 1, 2020, through December 31, 2021, civil actions time-barred under the prior statute of limitations. This language extends that period by a year, to December 31, 2022.
- Section 2.7 requires a local government to issue temporary certificates of compliance and occupancy to a health service facility if certain specified criteria are met.
- Section 2.8 amends Session Law 2020-3 to require the State Health Director to update any existing statewide standing order to be consistent with federal law, including the PREP Act to allow qualified individuals to administer a COVID-19 vaccine, and provides the corresponding immunity to those qualified individuals.
- Section 2.9 would allow certain pharmacists to administer long-acting injectable medications to adults with valid prescriptions. A pharmacist would be required to maintain certain patient records and must inform the patient's primary care provider within 72 hours of administration.
- Section 2.10 extends the authority to perform notarial acts using video conference technology until the end of 2021 and extends the authority to the signature of a record using video conference technology until the end of 2021.
- Section 2.11 allows the NC Appraisal Board to adopt or amend any emergency rules to modify their educational requirements in accordance with Section 3.20 of SL 2020-97, which currently expires on March 31, 2021, and those rules would instead expire on December 31, 2021.
- Section 2.12 suspends for an additional year, until December 31, 2021, all annual and biennial inspections and regular monitoring by DHSR and local departments of social services for certain licensed facilities, as well as provisions within adopted rules that pertain to monitoring, inspection, or investigative requirements, except as deemed necessary by DHSR to avoid serious injury or death, or as directed by CMS. (The facilities impacted by this section are licensed facilities for individuals with mental illness, intellectual or developmental disabilities, or substance use disorders; adult care homes; hospitals; health care facilities licensed under Article 6 of Chapter 131E; and hospices).
- Section 2.13 removes language from the effective date of the Health Care Provider liability provision from last year to clarify that the immunity did not expire at the end of the 2020 calendar year.
- Section 2.14 amends the "Health Care Provider" definition in the Emergency or Disaster Treatment Protection Act to include individuals who volunteer to assist in the administration of COVID-19 vaccinations.

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- Section 2.15 amends the adult care home licensure statute to add definitions for the terms "person," "owner," "affiliate" and "principal," for the purposes of determining the impact of prior violations and compliance history on applications for new and renewal adult care home licenses. Except for the term "affiliate," these definitions are identical to the definitions that appear in the applicable rules. Also requires the Medical Care Commission to update the rules to reflect the changes enacted by this section.
- Section 2.16 makes permanent a change allowing reduced paperwork for unclaimed property claims of \$250 or less.
- Section 2.17 extends the temporary flexibility given to the Board of Nursing and the Medical Board for quality improvement plan rules in S.L. 2020-3 through the end of 2022.
- Section 2.18 temporarily allows pharmacists to accept expired driver's licenses or other appropriate forms of identification for the dispensing of certain drugs that require the presentation of a valid NC driver's license or other ID, as long as the ID expired during the COVID-19 emergency and the individual seeking the drugs presents a valid prescription, if one is required under current law. This section expires on the earlier of 6 months after the date the Governor signs an executive order rescinding Executive Order No. 116 (2020), Declaration of a State of Emergency to Coordinate Response and Protective Actions to Prevent the Spread of COVID-19, or December 31, 2021.
- Section 2.19 would allow tourism development authorities to enter into a loan agreement under the Paycheck Protection Program. The acceptance of a loan would not obligate the State, a county, or a city to repay the loan. The repayment of any amount that is not forgiven must be repaid from occupancy tax proceeds remitted to the authority.
- Section 2.20 directs that by July 1, 2021, DHHS must grant access to client-specific immunization information contained within the NC Immunization Registry to each prepaid health plan, as defined in G.S. 58-93-5, that is under a capitated contract with the Department of Health and Human Services for the delivery of Medicaid and NC Health Choice services, and to each LME/MCO that is under a capitated contract with the DHHS to operate a BH IDD tailored plan.
- Section 2.21 modifies the extension of certain local government approvals affecting real property development enacted in S.L. 2020-97 to 150 days from the date the Governor's executive order is rescinded.
- Section 2.22 allows CRF funds allocated to DACS for meat processing facilities to also be used for additional types of meat producers and facilities that meet certain State and federal inspection parameters.
- Section 3.1 reallocates certain funding initially allocated in S.L. 2020-4 for various COVID-19 pandemic-related purposes.
- Section 3.2 through Section 3.5: Funds initially appropriated for a PPE project in the City of Conover and funds for a supplementary G.R.E.A.T. program grant process are swapped-out for General Fund Appropriations and the total amounts allocated to/from various CRF funds are adjusted accordingly.

EFFECTIVE DATE: Except as otherwise provided, this act is effective when it becomes law.