

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2013

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HOUSE BILL 605
Committee Substitute Favorable 4/24/13
Third Edition Engrossed 4/25/13

Short Title: Establish Aging Subcommittee/HHS Oversight.

(Public)

Sponsors:

Referred to:

April 9, 2013

1 A BILL TO BE ENTITLED
2 AN ACT ESTABLISHING A SUBCOMMITTEE ON AGING OF THE JOINT
3 LEGISLATIVE OVERSIGHT COMMITTEE ON HEALTH AND HUMAN SERVICES.

4 The General Assembly of North Carolina enacts:

5 **SECTION 1.(a)** The Joint Legislative Oversight Committee on Health and Human
6 Services (HHS Oversight Committee) shall appoint a Subcommittee on Aging to examine the
7 State's delivery of services for older persons in order to (i) determine their service needs and (ii)
8 make recommendations to the HHS Oversight Committee on how to address their service
9 needs.

10 **SECTION 1.(b)** The Subcommittee on Aging shall consist of 21 members,
11 appointed as follows:

12 (1) Two cochairs appointed as follows:

- 13 a. One member of the House of Representatives who is currently
14 serving on the HHS Oversight Committee, appointed by the House of
15 Representatives cochair of the HHS Oversight Committee.
16 b. One member of the Senate who is currently serving on the HHS
17 Oversight Committee, appointed by the Senate cochair of the HHS
18 Oversight Committee.

19 (2) Eight members appointed by the House of Representatives cochair of the
20 Subcommittee with the following qualifications:

- 21 a. Three members of the House of Representatives designated by the
22 Speaker of the House of Representatives.
23 b. One licensed physician who is board certified in geriatric medicine.
24 c. One representative of AARP North Carolina.
25 d. One licensed provider of home care services, as defined in
26 G.S. 131E-136.
27 e. One consumer of services for older persons.
28 f. One licensed provider of home- and community-based services.

29 (3) Eight members appointed by the Senate cochair of the Subcommittee with
30 the following qualifications:

- 31 a. Three members of the Senate designated by the President Pro
32 Tempore of the Senate.
33 b. One licensed long-term care facility operator.
34 c. One representative of the North Carolina Alzheimer's Association.
35 d. One licensed provider of hospice care services.



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- 1 e. One consumer of services for older persons.
2 f. One representative of the North Carolina Health Care Facilities
3 Association.
4 (4) The Director of the Division on Aging and Adult Services or the Director's
5 designee.
6 (5) The Director of the Division of Social Services or the Director's designee.
7 (6) The Director of the Division of Medical Assistance or the Director's
8 designee.

9 **SECTION 1.(c)** Vacancies on the Subcommittee shall be filled by the original
10 appointing authority. The Subcommittee may meet at any time upon the joint call of the
11 cochairs. A quorum of the Subcommittee is nine members. No action may be taken except by a
12 majority vote at a meeting at which a quorum is present.

13 The Subcommittee, while in the discharge of its official duties, may exercise all
14 powers provided for under G.S. 120-19 and G.S. 120-19.1 through G.S. 120-19.4. The
15 Subcommittee may meet in the Legislative Building or the Legislative Office Building. The
16 Subcommittee may contract for professional, clerical, or consultant services as provided by
17 G.S. 120-32.02.

18 The Legislative Services Commission, through the Legislative Services Officer,
19 shall assign professional staff to assist the Subcommittee in its work. The Senate and House of
20 Representatives' Directors of Legislative Assistants shall assign clerical staff to the
21 Subcommittee, and the expenses relating to the clerical employees shall be borne by the
22 Subcommittee. Members of the Subcommittee shall receive subsistence and travel expenses at
23 the rates set forth in G.S. 120-3.1, 138-5, or 138-6, as appropriate.

24 **SECTION 1.(d)** As part of its examination, the Subcommittee shall study all of the
25 following issues:

- 26 (1) Existing services for older persons and any deficiencies in service array,
27 quality of services, accessibility, and availability of services.
28 (2) Current and future service needs of older persons, including supports for
29 older persons residing in institutional and in-home settings.
30 (3) The feasibility of developing mechanisms for allowing older persons to
31 express the setting in which they prefer to receive services and honoring
32 these preferences.
33 (4) Existing service definitions for older persons who receive services through
34 federally funded programs, including Medicaid; through federal block
35 grants; through State-funded programs; through county-funded programs;
36 and through other funding sources, as well as the need for additional or
37 revised service definitions to meet the specific needs of older persons.
38 (5) The adequacy of existing Special Assistance programs in meeting the needs
39 of older persons residing in institutional, in-home, and community settings.
40 (6) Current accessibility of information, educational materials, and family
41 resources for older persons, as well as any deficiencies and needed
42 improvements.
43 (7) Any other matter related to services for older persons and their families.

44 **SECTION 1.(e)** The Subcommittee on Aging shall submit an interim report of its
45 findings and recommendations, including any proposed legislation, to the HHS Oversight
46 Committee on or before May 9, 2014, and shall submit a final report of its findings and
47 recommendations, including any proposed legislation, to the HHS Oversight Committee on or
48 before January 15, 2015, at which time it shall terminate.

49 **SECTION 2.** This act is effective when it becomes law.