GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2019

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Short Title:	PTS Day/Cardiac Task Force/Titus's Law/Data.	(Public)
Sponsors:		
Referred to:		

April 2, 2019

A BILL TO BE ENTITLED

AN ACT DESIGNATING POSTTRAUMATIC STRESS INJURY AWARENESS DAY IN NORTH CAROLINA; ESTABLISHING A JOINT LEGISLATIVE TASK FORCE ON SUDDEN CARDIAC ARREST IN STUDENT ATHLETES; ADDRESSING PARENTAL CONSENT AND THE DISPOSITION OF FETAL REMAINS; AND AUTHORIZING ENGAGEMENT WITH THIRD-PARTY TOXICOLOGY LABORATORIES TO GUIDE RESOURCES.

Whereas, all citizens of the United States possess the basic human right to the preservation of personal dignity; and

Whereas, all citizens of the United States deserve the investment of every possible resource to ensure their lasting physical, mental, and emotional well-being; and

Whereas, the diagnosis known as posttraumatic stress disorder (PTSD) was initially formulated in 1980 by the American Psychiatric Association to more accurately assess and assist veterans who had endured severe combat stress in Vietnam; and

Whereas, combat stress is an invisible wound which has historically been unjustly portrayed as a mental illness caused by a preexisting flaw of character or ability and that the word "disorder" carries a stigma which perpetuates this misconception; and

Whereas, it has been shown through electromagnetic imaging that these invisible wounds can cause physical changes to the brain that more accurately describe an injury than a disorder; and

Whereas, referring to invisible wounds as a disorder can discourage the injured from seeking proper and timely medical treatment; and

Whereas, referring to invisible wounds as posttraumatic stress injury (PTSI) is less stigmatizing and viewed as more honorable, and this designation can favorably influence those affected and encourage them to seek treatment without fear of retribution or shame; and

Whereas, PTSI can occur following exposure to extremely traumatic events other than combat such as interpersonal violence, life-threatening accidents, and natural disasters; and

Whereas, PTSI satisfying criteria A through H of the diagnosis for PTSD in the Diagnostic Statistical Manual deserves disability compensation equal to that allowed for PTSD under the law; and

Whereas, timely and appropriate treatment of PTSI can diminish complications and avert suicides; and

Whereas, all citizens suffering PTSIs deserve our compassion and consideration; those brave men and women of the United States Armed Forces who have received these wounds



in operational action against an enemy of the United States further deserve our clear and obvious recognition; Now, therefore,

The General Assembly of North Carolina enacts:

PART I. DESIGNATE POSTTRAUMATIC STRESS INJURY AWARENESS DAY

SECTION 1. Chapter 103 of the General Statutes is amended by adding a new section to read:

"§ 103-15. Posttraumatic stress injury awareness.

June 27 of each year is designated as Posttraumatic Stress Injury Awareness Day in North Carolina."

PART II. ESTABLISH JOINT LEGISLATIVE TASK FORCE ON SUDDEN CARDIAC ARREST IN STUDENT ATHLETES

SECTION 2. There is created the Joint Legislative Task Force on Sudden Cardiac Arrest in Student Athletes (Task Force).

SECTION 3. The Task Force shall consist of 10 members as follows:

- (1) Two members of the Senate appointed upon the recommendation of the President Pro Tempore of the Senate, with one of those members serving as a cochair.
- (2) Two members of the House of Representatives appointed upon the recommendation of the Speaker of the House of Representatives, with one of those members serving as a cochair.
- (3) The Secretary of Health and Human Services or his or her designee.
- (4) The Superintendent of Public Instruction or his or her designee.
- (5) A representative of the American Heart Association appointed upon the recommendation of the cochairs.
- (6) A representative of the North Carolina High School Athletic Association appointed upon the recommendation of the cochairs.
- (7) A representative of the North Carolina Athletic Trainers' Association appointed upon the recommendation of the cochairs.
- (8) A member of the North Carolina Chapter of the American College of Cardiology appointed upon the recommendation of the cochairs.

SECTION 4. The Task Force shall study the following:

- (1) The frequency of sudden cardiac arrest or other heart conditions in student athletes.
- (2) Other jurisdictions that have implemented strategies to mitigate risks to student athletes, such as mandatory heart exams.
- (3) The cost of requiring student athletes to be tested for heart conditions.
- (4) Any other issue the Task Force considers relevant.

SECTION 5. The Task Force shall meet upon the call of its cochairs. A quorum of the Task Force is a majority of its members. No action may be taken except by a majority vote at a meeting at which a quorum is present. The Task Force, while in the discharge of its official duties, may exercise all powers provided for under G.S. 120-19 and G.S. 120-19.1 through G.S. 120-19.4. The Task Force may contract for professional, clerical, or consultant services, as provided by G.S. 120-32.02. If the Task Force hires a consultant, the consultant shall not be a State employee or a person currently under contract with the State to provide services. Members of the Task Force shall receive per diem, subsistence, and travel allowance as provided in G.S. 120-3.1, 138-5, or 138-6, as appropriate. The expenses of the Task Force shall be considered expenses incurred for the joint operation of the General Assembly.

SECTION 6. The Legislative Services Officer shall assign professional and clerical staff to assist the Task Force in its work. The Director of Legislative Assistants of the House of

Representatives and the Director of Legislative Assistants of the Senate shall assign clerical support to the Task Force.

SECTION 7. Meetings of the Task Force shall begin no later than October 1, 2019. The Task Force shall submit a final report on the results of its study and development, including proposed legislation, to the General Assembly on or before April 1, 2020, by filing a copy of the report with the Office of the President Pro Tempore of the Senate, the Office of the Speaker of the House of Representatives, and the Legislative Library. The Task Force shall terminate on April 1, 2020, or upon the filing of its final report, whichever comes first.

PART III. ADDRESS PARENTAL CONSENT AND THE DISPOSITION OF FETAL REMAINS

SECTION 8.(a) Article 16 of Chapter 130A of the General Statutes is amended by adding a new section to read:

"§ 130A-421. Parental consent to disposition of fetal remains.

In every instance of unintended fetal death resulting from accidental injury, stillbirth, or miscarriage, the attending physician or individual in charge of the institution where the fetal remains were expelled or extracted shall obtain consent from the mother before the disposal of the fetal remains and shall only dispose of the fetal remains by burial, cremation, or incineration in accordance with applicable laws and regulations. If the mother is unable to give consent, and the father is known and able to be contacted within seven days, the attending physician or individual in charge of the institution where the fetal remains were expelled or extracted shall obtain consent from the father and shall only dispose of the fetal remains by burial, cremation, or incineration in accordance with applicable laws and regulations. If neither the mother nor the father is able to give consent within seven days from the time the remains were expelled or extracted, the fetal remains shall only be disposed of by burial, cremation, or incineration in accordance with applicable laws and regulations. Burial or cremation shall be the only method of disposing of fetal remains that have developed beyond completion of the second trimester of gestation."

SECTION 8.(b) This section becomes effective January 1, 2020, and applies to the disposition of fetal remains on or after that date.

PART IV. AUTHORIZE ENGAGEMENT WITH THIRD-PARTY TOXICOLOGY LABORATORIES TO GUIDE RESOURCES

SECTION 9. The Department of Health and Human Services, the Department of Justice, local health departments as defined in G.S. 130A-2(5), and local law enforcement agencies are authorized to engage third-party toxicology laboratories, capable of providing clinical intelligence and data related to prescription and illicit drug usage trends and developments, for the purpose of providing data to guide the delivery of drug treatment and law enforcement resources.

PART V. EFFECTIVE DATE

SECTION 10. Unless otherwise provided, this act is effective when it becomes law.