

**Draft Recommendations for Consideration by the
Joint Legislative Oversight Committee on Health and Human Services
(JLOC-HHS)**

3/12/2018

AGING	BACKGROUND
<p>RECOMMENDATION 1: CONTINUATION OF THE SUBCOMMITTEE ON AGING.</p> <p>The Joint Legislative Oversight Committee on Health and Human Services recommends that Cochairs of the Joint Legislative Oversight Committee on Health and Human Services allow the Subcommittee on Aging to continue its study of the State’s delivery of services for older adults during the interim period following the 2018 Regular Session of the 2017 North Carolina General Assembly.</p>	<p>S.L. 2017-57, Sec. 11D.3 allowed the JLOC-HHS to appoint a subcommittee on aging.</p> <p>This is a recommendation from the Subcommittee on Aging. The interim report was presented to the JLOC-HHS on March 13, 2018.</p>
MEDICAL EDUCATION & MEDICAL RESIDENCY	BACKGROUND
<p>RECOMMENDATION 2: CONTINUED STUDY AND DEVELOPMENT OF A PLAN TO SUPPORT MEDICAL EDUCATION AND MEDICAL RESIDENCY PROGRAMS IN A MANNER THAT ADDRESSES THE HEALTH CARE NEEDS OF THE STATE.</p> <p>The Joint Legislative Oversight Committee on Health and Human Services encourages the General Assembly to enact legislation allowing continued study and development of a plan to support medical education and medical residency programs in a manner that addresses the health care needs of the State.</p>	<p>S.L. 2017-57, Sec. 11J.2, required the JLOC-HHS and the Joint Legislative Education Oversight Committee to each appoint a subcommittee to jointly examine the use of State funds to support medical education and medical residency programs.</p> <p>This is a recommendation from the Joint Subcommittee on Medical Education and Medical Residency. The report was presented to the JLOC-HHS on March 13, 2018.</p>
<p>RECOMMENDATION 3: DEVELOPMENT OF MEASURABLE OBJECTIVES TO BE USED WHEN FUNDING MEDICAL EDUCATION AND RESIDENCY PROGRAMS.</p> <p>The Joint Legislative Oversight Committee on Health and Human Services encourages the General Assembly to enact legislation requiring the Department of Health and Human Services to gather and report information to facilitate the development of measurable objectives, along with specified timeframes for achievement, which will</p>	<p>Same background as referenced above.</p>

<p>be used by the State when funding medical education and residency programs addressing the health care needs of residents throughout the State and to provide the Department of Health and Human Services direction in designing programs to support those objectives.</p>	
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<p>TELEMEDICINE</p>	<p>BACKGROUND</p>
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RECOMMENDATION 4: IMPLEMENTATION OF A STATUTORY FRAMEWORK FOR TELEMEDICINE IN NORTH CAROLINA AND FURTHER STUDY OF ISSUES RELATED TO TELEMEDICINE.

The Joint Legislative Oversight Committee on Health and Human Services encourages the General Assembly to enact legislation (i) establishing the framework for the practice of telemedicine in the state of North Carolina to include definitions, the provision of services by providers licensed under Chapter 90 of the General Statutes, informed consent standards, guidelines for handling protected health information, and a standard of care; and (ii) directing the Department of Health and Human Services to conduct studies on reimbursement of telemedicine by private health benefit plans, a program to ensure all North Carolina residents have access to broadband internet sufficient to support telemedicine, metrics and other data to be used in assessing the quality of care provided by telemedicine, and licensing standards for individuals providing healthcare through telemedicine.

S.L. 2017-133, Sec. 2 required the Department of Health and Human Services (DHHS) to submit a report containing findings, recommendations, and a proposed telemedicine policy, to the JLOC-HHS. It further provided that based on the Department's report, the Committee must consider making a recommendation to the 2017 General Assembly during the 2018 Regular Session.

DHHS presented a report to the JLOC-HHS on October 10, 2017.

<p>PSYPACT</p>	<p>BACKGROUND</p>
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RECOMMENDATION 5: NORTH CAROLINA PARTICIPATION IN THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT (PSYPACT).

The Joint Legislative Oversight Committee on Health and Human Services encourages the General Assembly to enact legislation allowing North Carolina to participate in the Psychology Interjurisdictional Compact (PSYPACT) and to require the Department of Health and Human Services and the North Carolina Psychology Board to foster continuity of care by exploring the participation of PSYPACT participants in NC HealthConnex health information exchange.

S.L. 2017-133, Sec. 2 required the Department of Health and Human Services (DHHS) to submit a report containing findings and a recommendation on the PSYPACT to the JLOC-HHS. It further provided that based on the Department's report, the Committee must consider making a recommendation to the 2017 General Assembly during the 2018 Regular Session.

DHHS presented a report to the JLOC-HHS on October 10, 2017.

HEALTH ISSUES IN LOCAL CONFINEMENT FACILITIES

BACKGROUND

RECOMMENDATION 6: HEALTH ISSUES IN LOCAL CONFINEMENT FACILITIES.

The Joint Legislative Oversight Committee on Health and Human Services encourages the General Assembly to enact legislation to (i) clarify that the death of a prisoner in the custody of a local confinement facility shall be reported regardless of the physical location of the prisoner; (ii) to require the Secretary of the Department of Health and Human Services to undertake a study to improve prisoner health screening to determine when a prisoner has been prescribed life-saving prescription medications and to ensure the timely administration of those prescription medications; and (iii) to encourage the Department of Public Safety, the Department of Health and Human Services, and the Department of Information Technology's Government Data Analytics Center, to pursue State prisons becoming full participants in the NC HealthConnex health information exchange and to explore participation of local confinement facilities in the NC HealthConnex health information exchange.

The JLOC-HHS heard presentations on this issue from the Division of Health Service Regulation, DHHS, and the Department of Public Safety on February 28, 2018.

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