



INTRODUCTION

After 9 long months, a 10-week delay in passing the State budget, and the longest session since 2001, an adjournment resolution was finally drafted and the long session came to an end at 4:18 a.m. on Wednesday, September 30th. As we anticipated and is always the case, once the budget was approved the legislative floodgates opened, as members began to see the light at the end of the tunnel and the mad rush toward it began in earnest. The last days of session are always heady and exciting, and are also the most dangerous time of the year. Among the headline-grabbing bills that saw action in the last week: Medicaid reform; regulatory reform; a ban on the sale of fetal remains; economic incentives; a bond package; and several charter school and education bills. There were also a large number of bills, many packed with provisions entirely unrelated to the original content, that moved quickly through the process. Meetings of the House and Senate Rules Committees (essentially, the only policy committees that were still functioning) were packed with lobbyists on the lookout for last-minute surprises. A bill that moved the Presidential and all other primary elections from May to March (and the start of the 2016 session from May to April) became a flashpoint of controversy over a proposal to allow the two main political parties to establish “affiliate committees” that would allow them to bypass the state party operations for fundraising and campaigning, and brought to the surface the “grassroots vs. establishment” divide that has at times made it difficult for the Republican majorities to govern smoothly, dispute having total control of state government. Similar disharmony played out on the floor on the last day of session, as several Republican members of the House joined Democrats in decrying new provisions (which would preempt local governments’ ability to establish ordinances regarding wages, housing, or employment) being added last-minute to an unrelated bill. That bill was rejected by the House and later by a policy committee when sponsors tried again to move it within hours of adjournment, but other ‘new’ provisions were approved as part of omnibus bills that moved quickly on the last day.



NORTH CAROLINA COLLEGE OF EMERGENCY PHYSICIANS



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These maneuvers, the length of session, and sheer exhaustion (the final legislative day effectively began at 8:30 a.m. on Tuesday and ended 20 hours later) clearly wore on members, though there were some lighthearted moments during late-night breaks in the action – a bipartisan serenade of the Senate by two members, a football being tossed on the Senate floor, a House member’s (and mortician) jokingly measuring the dimensions of his sleeping colleagues. After several false starts, the action finally resumed around 3:30 a.m. and wrapped up nearly an hour later, with 8-term Rep. and House Speaker Pro Tem Paul Stam surprising everyone by announcing he will not seek reelection. The final day of session always has a “last day of school” celebratory feel to it, though after so many months the overall sentiment as legislators, lobbyists, and staff filed out of the General Assembly was relief. There will be time for fully assessing all that transpired this session and to plan for the “short” session next year, and in the meantime members and candidates facing a shortened primary election calendar will shift into campaign mode, and interim committees will get to work soon. While the end of session was certainly overdue and came as a welcome relief, the business of politics and policy in North Carolina will continue in earnest over the months to come.

NOTE: This will be our final weekly report. In a few weeks, we will send you a final report with a summary of all relevant legislation that is now law and a list of legislation that is still pending for the short session next year.

BILL UPDATES

HOUSE BILL 8, Court of Appeal Election Modifications. The provisions of this bill were removed in the Senate Rules Committee and replaced with new provisions that would require a candidate for Judge of the Court of Appeals to indicate on the notice of candidacy at the time of filing his or her political party affiliation or unaffiliated status. The candidate’s party designation or unaffiliated status would have to be verified and included on the ballot. **The bill as amended was approved by the Senate Rules Committee and the full Senate. The House voted to concur with the Senate changes and the bill was sent to the Governor.**

HOUSE BILL 327, EMS Personnel Technical Changes, was amended in the conference report to remove the provision that directed the Department of Health and Human Services, Division of Health Service Regulation, in consultation with the North Carolina Medical Care Commission and the Department of Public Safety, Division of Emergency Management, to study how emergency medical service personnel can reduce the threat of bodily harm to them when performing duties necessary for the health and safety of the public. **The bill was approved by the House and Senate and sent to the Governor.**

HOUSE BILL 373, Elections. This bill (which moves the state’s Presidential and state primary elections from May to March 15th, making North Carolina more important in the national campaign cycle – get ready for even more political ads!) became a flashpoint of controversy because of additional provisions that would allow for the formation of “Affiliated Party Committees” (APCs) that could essentially serve the fundraising and campaigning functions traditionally reserved for the state Democratic and Republican political party operations, but be controlled by elected officials rather than state party officials (in recent years both parties have seen control of the state party assumed by Chairmen who represent the “grassroots” activists rather than the party “establishment,” more recently in the case of the NCGOP). Over the course of the final days of session several amendments to the bill were made to limit the scope of the APCs, and a press conference was hastily called to demonstrate that the new Republican

Chairman (a favorite of the party grassroots who surprised many when he beat out the establishment-favored candidate) and legislative leaders were united, if only for the moment. **The bill was approved by the House and Senate and sent to the Governor.**

HOUSE BILL 647, EPI Pens in All Child-Serving Businesses, was amended in the Senate Rules Committee to:

- amend the definition of an *authorized entity* to include any person, corporation, or other entity that owns or operates any entity or organization listed;
- require an authorized entity that acquires and stocks epinephrine auto-injectors to make a good-faith effort to store the supply of epinephrine auto-injectors in accordance with the epinephrine auto-injector manufacturer's instructions for use and any additional requirements that may be established by the Department of Health and Human Services;
- require an authorized entity that elects to acquire and stock a supply of epinephrine auto-injectors to designate employees or agents to complete an anaphylaxis training program;
- require the online training program to be offered by: (1) a nationally recognized organization experienced in training laypersons in emergency health treatment; (2) an entity or individual approved by the Department of Health and Human Services; or (3) an online training course that has been approved by another state;
- clarify that persons listed are immune from criminal liability and from suit in any civil action brought by any person for injuries or related damages that result from any act or omission taken pursuant to the statute;
- remove the immunity exclusion for gross negligence; and
- provide that this section does not create or impose any duty, obligation, or basis for liability on any authorized entity, any employee or agent of an authorized entity, or any other individual to acquire, possess, store, make available, or administer an epinephrine auto-injector.

The bill as amended was approved by the Senate Rules Committee and the full Senate. The House agreed to the changes made by the Senate and the bill has been sent to the Governor.

HOUSE BILL 730, Next Generation 911. The provisions of this bill were removed in the Senate Finance Committee and replaced with new provisions that would:

- create a Next Generation 911 Reserve Fund to implement Next Generation 911;
- define *Next Generation 911 system* as “an IP-enabled emergency communications system using Internet Protocol, or any other available technology, to enable the user of a communications service to reach an appropriate PSAP by sending the digits 911 via dialing, text, or short message service (SMS), or any other technological means”;
- amend the definition of 911 system as an emergency *communications* system *using any available technology* that does enables the user of a communications service connection to reach a PSAP by dialing the digits 911 and provides enhanced 911 service;
- require PSAPs to implement Next Generation 911;
- authorize the 911 Board to establish purchasing agreements for statewide procurement;
- allow the PSAP grant account to be used for expenses used to enhance 911 service;
- amend the limitation of liability for the 911 system; and
- update the 911 statutes to include new technology.

After further amendment on the Senate floor to amend the new definition of a communications service, the bill was approved by the full Senate. The House voted to concur with the Senate changes and the bill was sent to the Governor.

HOUSE BILL 765, Regulatory Reform Act of 2015. The Conference Committee report makes various changes to the bill, including prohibiting an occupational licensing board from

contracting with or employing a person licensed by the board to serve as an investigator or inspector if the licensee is actively practicing in the profession or occupation and is in competition with other members of the profession or occupation over which the board has jurisdiction. This section would not prevent a board from (1) employing licensees who are not otherwise employed in the same profession or occupation as investigators or inspectors or for other purposes, or (2) contracting with licensees of the board to serve as expert witnesses or consultants in cases where special knowledge and experience is required, if the board limits the duties and authority of the expert witness or consultant to serving as an information resource to the board and board personnel. **The bill was approved by the House and Senate and sent to the Governor.**

SENATE BILL 119, GSC Technical Corrections 2015. This bill makes various technical corrections to the General Statutes and session laws, as recommended by the General Statutes Commission, and additional technical and other amendments to the statutes and session laws. The bill was amended within a couple of days in the House Rules Committee, on the House floor, and in the Conference Committee to make the following changes:

- requires the State CIO to use transferred funds for the establishment, administration, and ongoing support of the successor HIE Network, and no later than 30 days after receipt of the transferred funds to negotiate and enter into or amend a contract for services with an effective date no later than 30 days from receipt of the transferred funds; and
- allows the Department of Health and Human Services, Division of Medical Assistance, to charge an application fee of \$100, and the amount federally required, to each provider enrolling in the Medicaid Program at re-credentialing every five years (instead of every three years).

The bill was approved by the House and the Senate and sent to the Governor.

SENATE BILL 279, Amend Qualifications/Practice of Counseling, began as a bill dealing with the qualifications of professional counselors and was later expanded to include a requirement that schools teach about human trafficking as part of their Healthy Living (sexual education) curriculum. A provision added as part of the new requirement also expanded the current standard that materials used in the Healthy Living instruction be age appropriate for use with students, and be “objective and based upon scientific research that is peer reviewed and accepted by professionals and credentialed experts in the field of sexual health education. S279 expands the list of credentialed experts who can review and approve curriculum to those credentialed as experts in adolescent psychology, behavioral counseling, medicine, human anatomy, biology, ethics, or health education as well. The Senate voted not to approve the changes made by the House and a conference committee was assigned to draft a compromise version (known as a conference report). Despite a rule that prohibits new provisions (any not included in either the House or Senate version) from being added to a conference report, when the conference committee met after 11:00 p.m. on Monday September 28th, a new version of the bill was presented by the committee chairs which contained a new section over several pages. The new section would have effectively preempted all current and any future local ordinances on wages, housing and employment, with some limited exceptions. By Tuesday morning the new section was the focus of media attention and representatives of local governments, housing advocates and others were raising strong concerns about the impact of the new provisions, and good government groups joined members of both parties in decrying adding such a significant change to an unrelated bill effectively on the last day of session. Despite the sponsors’ insistence that the provisions’ impacts would be limited, the outcry led to a rare floor defeat, as a bipartisan majority voted to send the bill back to the House Rules Committee. When Rules met later that day a motion to report the bill back to the floor was defeated 14-7, again with members of the

Republican majority voting to reject both the policy and the process by which it was proposed. At 12:41 a.m. on Wednesday the Senate used a procedural motion to approve the previous version of the bill (which includes the counseling and Healthy Living provisions, but not the restrictions on local government). **Approved by the Senate and sent to the Governor without the local government provisions included.**

SENATE BILL 391, County Omnibus Legislation. The provisions of this bill were removed in the House Rules Committee and replaced with a new bill to direct the Revenue Laws Study Committee to study issues relating to the financial impacts on local governments of exempting previously taxable properties from the property tax base when acquired by nonprofits. The Committee could consider any other issues deemed relevant, except for the taxation of real or personal property used for religious purposes, and would report its findings and recommendations on the financial impacts of exempting previously taxable properties to the 2016 Regular Session of the 2015 General Assembly. **The bill as amended was approved by the House Rules Committee and the full House and referred to the Senate Rules Committee, meaning it will not be considered again until the short session convenes in April 2016.**

SENATE BILL 605, Various Changes to the Revenue Laws. This bill which makes a variety of changes to the State's tax laws was amended in the House Finance Committee, including:

- making various changes to the laws regarding the NC Medical Board, (which are included in and have been approved by the House in HOUSE BILL 543, Amend Laws Pertaining to NC Medical Board) to:
 - rename the Peer review provisions as the Health Program for Medical Professionals;
 - allow the North Carolina Medical Board to enter into agreements with the North Carolina Medical Society, the North Carolina Academy of Physician Assistants, and the North Carolina Physicians Health Program to identify, review, and evaluate the ability of licensees of the Board who have been referred to the Program to function in their professional capacity and to coordinate regimens for treatment and rehabilitation;
 - delete specified peer review activities to be covered by the agreement;
 - require the agreement to include guidelines for the following:
 - the assessment, referral, monitoring, support, and education of licensees of the Board by reason of a physical or mental illness, a substance use disorder, or professional sexual misconduct;
 - procedures for the Board to refer licensees to the Program;
 - criteria for the Program to report licensees to the Board;
 - a procedure by which licensees may obtain review of recommendations by the Program regarding assessment or treatment;
 - periodic reporting of statistical information by the Program to the Board, the Society, and the Academy; and
 - maintaining the confidentiality of nonpublic information;
 - provide that the North Carolina Physicians Health Program is an independent organization for medical professionals that provides screening, referral, monitoring, educational, and support services;
 - require the Program to report immediately to the Board detailed information about any licensee of the Board who: (1) constitute an imminent danger to patient care by reason of, mental illness, physical illness, substance use disorder, professional sexual misconduct, or any other reason; or (2) refuse to submit to an assessment

as ordered by the Board, has entered into a monitoring contract and fails to comply with the terms of the Program's monitoring contract, or is still unsafe to practice medicine after treatment;

- provide that information acquired, created, or used in good faith by the Program pursuant to this section is privileged, confidential, and not subject to discovery, subpoena, or other means of legal compulsion for release to any person other than to the Board, the Program, or their employees or consultants, and that no person participating in good faith in the Program could be required in a civil case to disclose the fact of participation in the Program or any information acquired or opinions, recommendations, or evaluations acquired or developed solely in the course of participating in the Program;
 - require the Program, upon the written request of a licensee, to provide the licensee or his or her legal counsel with a copy of a written assessment prepared as part of the licensee's participation in the program, and the licensee would be entitled to a copy of any written assessment created by an alcohol or chemical dependency treatment facility at the recommendation of the Program, to the extent permitted by State and federal laws and regulations; and
 - provide that information furnished to a licensee would be inadmissible in evidence and not subject to discovery in any civil proceeding. However, this provision could not be construed to make information, documents, or records otherwise available for discovery or use in a civil action immune from discovery or use in a civil action merely because the information, documents, or records were included as part of the Program's assessment of the licensee or were the subject of information furnished to the licensee; and
- allowing counties to levy a local sales and use tax of a maximum rate of ½ % to be used for public education when certain conditions are met.

The bill as amended was approved by the House Finance Committee and the full House, and has been referred to the Senate Rules Committee, meaning it will not be considered again until the short session convenes in April 2016.

SENATE BILL 676, Autism Health Insurance Coverage, was amended on the House floor to require all health benefit plans to provide coverage for the screening, diagnosis, and treatment of autism spectrum disorder in accordance with the standards contained in the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, and the applicable regulations. However, coverage for adaptive behavior treatment could be subject to a maximum benefit of up to \$40,000 per year and limited to individuals 18 years of age or younger. Beginning in 2017 and for subsequent years, the amount would be indexed using the Consumer Price Index for All Urban Consumers for the South Region and rounded to the nearest whole thousand dollars. **The bill as amended was approved by the House, the Senate voted to concur with the House changes, and the bill was sent to the Governor.**

SENATE BILL 694, Reagan's Rule/Enforce Pharm. Benefits Management. The provisions of this bill were removed in the House Rules Committee and replaced with new provisions to encourage all physicians, physician assistants, or certified nurse practitioners who provide well-child care to educate and discuss the warning signs of Type I diabetes and symptoms with each parent for each child under his or her care at least once at the following age intervals: (1) birth; (2) twelve months of age; (3) twenty-four months of age; (4) thirty-six months of age; (5) forty-eight months of age; and (6) sixty months of age. **After further amendment on the House floor, the bill was approved by the House. The Senate voted to concur with the House changes, and the bill was sent to the Governor.**

SENATE BILL 698, Legacy Medical Care Facility/CON Exempt. The provisions of this bill were removed in the House Rules Committee and replaced with new provisions that would exempt from certificate of need review the acquisition or reopening of a Legacy Medical Care Facility (generally, this bill would allow the re-opening for the hospital located in Bellhaven). The person seeking to operate a Legacy Medical Care Facility would be required give the Department of Health and Human Services written notice (1) of its intention to acquire or reopen a Legacy Medical Care Facility, and (2) that the hospital will be operational within 36 months of the notice. A "Legacy Medical Care Facility" would be defined as an institution that meets all of the following requirements:

- is not presently operating;
- has not continuously operated for at least the past six months; and
- within the last 24 months was: (1) operated by a person holding a license under GS 131E-77 (Hospital Licensure Act), and (2) primarily engaged in providing to inpatients, by or under supervision of physicians, (i) diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons or (ii) rehabilitation services for the rehabilitation of injured, disabled, or sick persons.

The bill was further amended on the House floor to allow a municipality or hospital authority that has complied with the requirements regarding the sale or lease of a hospital but has not, following good faith negotiations, approved any lease, sale, or conveyance as required to, not less than 120 days following the required public hearing, solicit additional prospective lessees or buyers not previously solicited and approve any lease, sale, or conveyance without the necessity to repeat compliance with the sale or lease requirements, except for the following:

- before considering any proposal to lease or purchase the hospital facility or part thereof, the municipality or hospital authority must require information on charges, services, and indigent care at similar facilities leased, owned, or operated by the proposed lessee or buyer;
- the municipality or hospital authority must declare its intent to approve any lease or sale in the manner authorized by this subsection at a regular or special meeting held on 10 days' public notice. Such notice shall state that copies of the lease, sale, or conveyance proposed for approval will be available 10 days prior to the regular or special meeting required by subdivision (3) of this subsection, and that the lease, sale, or conveyance shall be considered for approval at a regular or special meeting not less than 10 days following the regular or special meeting required by this subsection. Notice must be given by publication in one or more papers of general circulation in the affected area describing the intent to lease, sell, or convey the hospital facility involved and the potential buyer or lessee;
- not less than 10 days following the regular or special meeting required by subdivision (2) of this subsection, the municipality or hospital authority shall approve any lease, sale, or conveyance by a resolution at a regular or special meeting; and
- at least 10 days before the regular or special meeting at which any lease, sale, or conveyance is approved, the municipality or hospital authority must make copies of the proposed contract available to the public.

The bill as amended was approved by the House Rules Committee and the full House. The Senate voted to concur with the House changes and the bill was sent to the Governor.

LEGISLATION ENACTED

HOUSE BILL 272, Appointments Bill 2015, appoints persons to various public offices upon the recommendation of the speaker of the House of Representatives, the President Pro Tempore of the Senate, and the Minority Leader of the Senate as follows. **Effective: September 29, 2015, unless otherwise provided.**

- Dr. Karen McCulloch of Orange County, Dr. Erwin Manalo of Pitt County, Ryan Harshman of Onslow County, Donna White of Wake County, and Carol S. Gouge of Davidson County are appointed to the North Carolina Brain Injury Advisory Council for terms effective October 1, 2015, and expiring on September 30, 2019.
- Kevin T. Stanley of Mecklenburg County and James R. Gusler of Caswell County are appointed to the North Carolina Emergency Medical Services Advisory Council for a term effective January 1, 2016, and expiring on December 31, 2019.
- Lisa P. Shock of Orange County is appointed to the Board of Directors of the North Carolina Institute of Medicine for a term expiring on January 1, 2018, to fill the unexpired term of Ronald Maddox.
- David Sousa of Wake County, Sarah R. Jordan of Watauga County, and Paul R. Cunningham of Pitt County are appointed to the North Carolina Institute of Medicine Board of Directors for terms effective January 1, 2016, and expiring on December 31, 2019.
- Leonard A. Ellis of Mitchell County is appointed to the North Carolina Institute of Medicine Board of Directors for a term expiring on December 31, 2017, to fill the unexpired term of Matthew T. Johnson.
- Matthew A. Grindstaff of Mitchell County, Ashley M. Honeycutt of Wake County, Wanda Moore of New Hanover County, Karen A. McCall of Durham County, Ryan S. Swanson of Wake County, Representative Becky Carney of Mecklenburg County, Representative Dan Bishop of Mecklenburg County, Representative Larry Yarborough of Granville County, Senator Ronald J. Rabin of Harnett County, Senator Chad Barefoot of Wake County, Senator Kathy Harrington of Gaston County, Helen Brann of Person County, Shonda Corbett of Wake County, David Huang of Orange County, Chris Dobbins of Gaston County, and Mike Patil of Orange County are appointed to the Justus-Warren Heart Disease and Stroke Prevention Task Force for terms expiring on June 30, 2017.
- Charles "Wayne" Dixon of Yadkin County is appointed to the Commission for Mental Health, Developmental Disabilities, and Substance Abuse Services for a term expiring on June 30, 2017, to fill the unexpired term of Justin Brackett.
- Dr. Peggy S. Terhune of Randolph County, Ann Shaw of Randolph County, Roger L. Dillard, Jr., of Forsyth County, and Melissa Gott of New Hanover County are appointed to the Commission for Mental Health, Developmental Disabilities, and Substance Abuse Services for terms expiring on June 30, 2018.
- Gregory F. Hauser of Mecklenburg County is appointed to the 911 Board for a term expiring on December 31, 2018, to fill the unexpired term of Johnny T. Cole.
- Danny E. Britt, Jr., of Robeson County, Garth K. Dunklin of Mecklenburg County, Stephanie M. Simpson of Wake County, Margaret Currin of Wake County, John Randolph Hemphill of Wake County, Jeffrey T. Hyde of Guilford County, Robert Bryan of Wake County, and Jeffrey Poley of Wake County are appointed to the Rules Review Commission for terms expiring on June 30, 2017.

- Rebecca Anderson of Forsyth County, Lloyd H. Jordan of Pitt County, and Lisa B. McCanna of Cabarrus County are appointed to the License to Give Trust Fund Commission for terms effective January 1, 2016, and expiring on December 31, 2017.

HOUSE BILL 372, Medicaid Transformation and Reorganization. This Medicaid reform bill was signed into law by the Governor on September 23, 2015. **Effective: September 23, 2015, unless other provided.**

SENATE JOINT RESOLUTION 721, Adjournment Resolution, This joint resolution adjourns the 2015 regular session of the General Assembly from Wednesday, September 30, 2015, until Monday, April 25, 2016 (the short session), and limits the matters that may be considered at that time. When the regular session reconvenes, only the following matters may be considered:

- bills directly and primarily affecting the State budget, including the budget of an occupational licensing board for fiscal year 2016-2017;
- bills amending the State Constitution;
- bills and resolutions introduced in 2015 and having approved third reading in 2015 in the house in which introduced, received in the other house in accordance with Senate Rule 41 or House Rule 31.1(h), as appropriate, and not disposed of in the other house by tabling, unfavorable committee report, indefinite postponement, or failure to pass any reading, and which do not violate the rules of the receiving house;
- bills and resolutions implementing the recommendations of:
 - study commissions, authorities, and statutory commissions authorized or directed to report to the 2016 Regular Session;
 - the General Statutes Commission, the Courts Commission, or any commission created under Chapter 120 of the General Statutes that is authorized or directed to report to the General Assembly;
 - the House Ethics Committee;
 - select committees; or
 - the Joint Legislative Ethics Committee or its Advisory Subcommittee.
- a local bill that has been submitted to the Bill Drafting Division of the Legislative Services Office by 4:00 P.M. Tuesday, May 3, 2016, is introduced in the House of Representatives or filed for introduction in the Senate by 4:00 P.M. Tuesday, May 19, 2016, and is accompanied by a certificate signed by the principal sponsor stating that no public hearing will be required or asked for by a member on the bill, the bill is noncontroversial, and that the bill is approved for introduction by each member of the House of Representatives and the Senate whose district includes the area to which the bill applies;
- selection, appointment, or confirmation as required by law, including the filling of vacancies of positions for which the appointees were elected by the General Assembly upon recommendation of the Speaker of the House of Representatives, President of the Senate, or President Pro Tempore of the Senate;
- any matter authorized by joint resolution approved by a two-thirds majority of the members of the House of Representatives present and voting and by a two-thirds majority of the members of the Senate present and voting, and a joint resolution authorizing the introduction of a bill pursuant to this section;
- bills primarily affecting any State or local pension or retirement system;
- joint resolutions, House resolutions, and Senate resolutions authorized for introduction under Senate or House rules;

- bills:
 - revising the Senate districts and the apportionment of senators among those districts;
 - revising the Representative districts and the apportionment of representatives among those districts;
 - revising the districts for the election of members of the House of Representatives of the US Congress and the apportionment of representatives among those districts;
 - responding to actions related to the Voting Rights Act of 1965;
 - responding to actions related to litigation concerning Congressional, State House, or State Senate districts;
- bills returned by the Governor with objections, but solely for the purpose of considering overriding of the veto upon reconsideration of the bill;
- bills relating to election laws; and
- bills to disapprove rules under the Administrative Procedure Act.

The resolution also allows the Speaker of the House and the President Pro Tempore of the Senate to authorize appropriate committees or subcommittees to meet during the interims between sessions to: (1) review matters related to the State budget for the 2015-2017 fiscal biennium; (2) prepare reports, including revised budgets; or (3) consider any other matters as the Speaker of the House or the President Pro Tem of the Senate deems appropriate. **Since a Studies bill was not approved during the long session, this authority will allow the Speaker and the President Pro Tem to decide what issues to study in the interim. Effective: September 30, 2015.**

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