**Legislative Report June 2021**

While it looked like the Senate and House may not be able to come to an agreement on an amount for this next fiscal year’s budget, they announced on June 8 that they had finally found a compromise both chambers can live with… about a month behind schedule. Because the new fiscal year begins on July 1, it looks like there will not be a budget in place by then. The government will continue operating under a continuing resolution until a new budget is passed and signed into law. The Senate is now predicted to roll out its budget the week of June 14. Once it passes the Senate, the House will roll their own version out sometime in the following weeks. It has yet to be seen if Governor Cooper will approve of whatever version passes the full General Assembly, but the governor and legislative leaders met earlier in the year and have expressed optimism that they can work together to pass a budget this year. Fingers crossed!

Because of the showdown over a budget number agreement, much of the business before the General Assembly has been almost at a standstill. While leadership worked together behind the scenes on budget negotiations, there haven’t been as many committee meetings held or bills moving. That will hopefully change now that there has been an agreement.

As far as the NCCA helping with the opioid epidemic, we have met several times with Representative Wayne Sasser, a pharmacist who very much wants to help with the epidemic also. Originally we had hoped to amend HB93, Require Opioid Antagonist Education with Opioid Scripts. Unfortunately, the Medical Society is very much against this bill and anything that mandates or regulates their time with the patient so we have been told that the Senate will not take up this legislation. Representative Sasser has another bill, HB683 which requires pharmacists to provide education in prescriptions on how to dispose of medication. He wants to add language requiring patients receiving an opioid prescription to be provided with information on alternative care for their pain, including chiropractic, physical therapy, acupuncture, etc. This bill passed the House and is now in the Senate. He has met with the Senate Health Chairs and they have agreed to hear the bill in committee, so he feels comfortable with it. He has also spoken with the pharmacy board about requiring pharmacies to provide the information to patients, and they have agreed to it. While we would prefer that the education be given by the physician, this seems to best current alternative.

It looks like the legislature is going to be in session for much of the year this year. The Senate Health Chairs told him that it probably won’t be until later this year before the bill comes up in committee. If things keep moving slowly at the legislature, it could possibly be next year’s short session before it moves in the Senate. But he has assured us that this language will be included when it does move and that he will work with us on details closer to time.