

When someone dies unexpectedly in North Carolina, it can take months, or even more than a year, before a required autopsy is completed. The state's huge delays leave families wondering and in limbo, unable to move on and do crucial things like claim insurance money. That's according to an investigation by the The Charlotte Observer and News and Observer of Raleigh, which found the delays have grown significantly worse over the past decade.

Joining us now to talk more about it is The Charlotte Observer's Ames Alexander, one of the reporters who wrote the story.

Marshall Terry: So you found in some cases, it's more than a year before these medical examinations are taking place. How long should it be before an autopsy occurs?

Ames Alexander: Well, I mean, ideally you'd like it to happen as soon as possible. I know in many places they're done within six weeks or so. This matters profoundly to a lot of families because without a cause of death, you can't get a death certificate. Without a death certificate, you can't get life insurance payments. You can't get access to the assets that you're supposed to inherit.

Beyond that, families just want to know why their loved ones died, and waiting for more than a year can be agonizing.

Terry: Why is it taking so long in North Carolina? What's going on here?

Alexander: In a nutshell, it's just caused by too many bodies and too few pathologists and toxicologists to handle the load. Of course, there's been a huge surge in opioid deaths in recent years, and the staffing problems at the chief medical examiner's office have been a problem for years, but they're worse than ever now.

Just to give you an example, there are 16 forensic pathologist positions at the chief medical examiner's office. Nine of those positions are vacant and there's just one forensic toxicologist to certify all of the drug test results. You know, pathologists in that chief medical examiner's office are performing, on average, about 560 autopsies apiece each year. And that's more than twice the number recommended by a national accrediting group.

A big reason why there's such a shortage in staff is just low pay. The starting annual salary for forensic pathologists in North Carolina is about \$177,000 bucks. That may sound like a lot of money, but that's lower than what's offered by South Carolina, Tennessee, Kentucky, West Virginia. Nationally, the average pay for pathologists is about \$340,000. We're obviously well behind the curve, and we're losing pathologists to states that pay better.

Terry: Well, aside from being a headache and, of course, heartache for families already dealing with the unexpected death of a loved one, what harm does this delay do to surviving relatives?

Alexander: Often it's just agonizing because they really want to know why their loved ones died.

I'll give you an example. One woman here in Indian Trail lost her son two years ago. She suspected it was due to his medications. He was taking, among other things, methadone for an addiction that he had to prescription medications. And she was wondering if there was something wrong with this methadone that he was taking that caused him to overdose. She had another close relative who was taking methadone. And she wanted to know, do I have to warn people about some problem with methadone?

So she and her husband called and called and called the medical examiner's office. It was more than a year before they found out why their son died. It was a result of a combination of methadone and another medication that he was taking.

Terry: Well, you also write that it affects criminal charges if a crime has occurred. Or that you mentioned earlier, the collection of insurance benefits as well, right?

Alexander: Yeah. If families can't access life insurance payments, they can't access other assets that they're supposed to inherit. You know, if you're supposed to inherit a house or a car or whatever, you can't get that house or that car until you get that death certificate. You can't get that death certificate until that medical examiner's investigation is done. And yes, this is hurting authorities and the criminal justice system as well. Police and prosecutors can't file homicide charges and some death cases — infant deaths, deaths from drugs, for instance, until they know the definitive cause of death. So if these cases are delayed for months, potentially dangerous criminals remain on the street a lot longer.

There were a couple of cases out of Union County. There was one guy who was found dead in the front seat of his car in 2020, and Union County Sheriff (deputies) had to wait five months for the toxicology results that showed he died from a heroin overdose. And only then could they file what's called a death by distribution charge against the suspected dealer. This is a guy who had a very long criminal record — more than a dozen other drug crimes over the past five years. They couldn't file the charges for five months, and, meanwhile, this guy is out there possibly dealing more fentanyl-laced drugs.

Terry: How does North Carolina compare to other states?

Alexander: This is a problem all over the country because of the opioid crisis, because of the shortage of pathologists. But North Carolina seems to be in much worse shape

than many other states. There's a national accrediting group that requires medical examiner's offices to complete 90% of their medical examinations within 90 days — North Carolina is only completing 24% that quickly. So we're well behind what's recommended.

Terry: So, Ames, what's being done to fix all this?

Alexander: The legislature is proposing some changes that may help. We have eight contract autopsy centers that do autopsies for the state. Those senators are only being paid \$2,800 for each autopsy now and that's less than half the cost of doing those exams. So there's state legislative proposals that would increase that to \$5,800 per autopsy. Lawmakers are also asking counties to pick up a lot of that tab.

Beyond that, I mean, the legislature could increase salaries for medical examiner staff. It could expand staff, and policymakers could do a lot more to reduce the large number of overdose deaths. For instance, public officials could provide more funding for opioid treatment for those who are uninsured or whose insurance will cover treatment, and they could make overdose prevention medication broadly available. So there are many things that could be done to improve this situation.