



**HOUSE COMMITTEE ON APPROPRIATIONS**  
2009-10 Legislative Session

**FISCAL NOTE**

**SENATE: 699**

**PRINTER'S NO: 1888**

**PRIME SPONSOR: Vance**

<b>FISCAL IMPACT SUMMARY</b>	<b>FY 2010/11</b>	<b>FY 2011/12</b>
<b>Expenditure Increase/(Decrease):</b>		
General Fund	\$0	\$76,000

**OVERVIEW:**

Senate Bill 699 establishes the Adult Protective Services Act, which provides for the protection of adults between 18 and 59 years of age who have a physical or mental impairment that substantially limits one or more major life activities. The Department of Public Welfare (DPW) shall administer the adult protective services program.

The act shall take effect in six months.

**ANALYSIS:**

Senate Bill 699 would create an adult protective services program for adults between 18 and 59 years of age. "Protective Services" is defined as those activities, resources and supports provided to adults under this act to detect, prevent, reduce or eliminate abuse, neglect, exploitation and abandonment. DPW shall define geographic areas to be served by local agencies and, through a competitive bidding process, select agencies to provide protective services in each area. At its discretion, DPW may perform protective service duties in a geographic area until an agency has been selected and is operating to serve that area.

Successful bidders for the local agency responsibilities must: demonstrate knowledge and experience working with adults with disabilities; be separate from agencies providing direct services to adults or county mental health and mental retardation programs; demonstrate knowledge of service delivery principles such as individual choice and least restrictive alternatives; demonstrate that the program will be advised by a body that includes at least 51 percent representation of adults and their families; and include letters of support that show collaboration with entities which advocate for adults with disabilities. Each agency shall submit to DPW a proposal that includes a protective services plan.

DPW is responsible to establish, by regulation, procedures to ensure no conflict of interest in the provision of adult protective services and minimum standards of training and experience that agencies shall following in the selection and assignment of staff. DPW is required to conduct an ongoing information campaign regarding the need for and availability of adult protective services. DPW shall work with the Department of Aging to provide coordination with the Older Adults Protective Services system and to ensure that adults who are the subject of a protective service report at the time of their sixtieth birthday have continuity in the delivery of protective services. In addition, DPW must provide annual reports on the program to the Senate Public Health and Welfare Committee and the House of Representatives Human Services Committee.

Agencies shall be responsible for receiving, screening and investigating reports of adults in need of protective services. Investigations shall include situations involving individuals residing in licensed facilities. The bill provides for assigning screened reports to one of four referral categories – priority, nonpriority, another planning and service area, or no need for protective services – and establishes a timeline for investigations. Local agencies shall offer protective services, on a voluntary basis, to adults in need of services and shall have access to all relevant records. An agency may pursue involuntary intervention by emergency court order in the case of adults refusing services, provided there is clear and convincing evidence that the person is at imminent risk of death, serious physical harm or serious bodily injury.

Senate Bill 699 requires mandatory reporting by an employee or an administrator of a facility where there is reasonable cause to suspect an adult is a victim of abuse or neglect. Facilities include: assisted living residences; domiciliary care homes; home health agencies; intermediate care facilities for people with mental retardation; long-term care nursing facilities; older adult daily living centers; personal care homes; residential treatment facilities; and organizations or groups of people that use public funds and are paid, in part, to provide care and support to adults in a licensed or unlicensed setting. The bill provides for the local agency to transmit reports to DPW, coroners, and medical examiners. In addition, the bill provides for investigations by law enforcement officials to determine what criminal charges, if any, will be filed. Certain restrictions shall be placed upon an employee who is alleged to have committed abuse.

In developing rules and regulations to implement this act, DPW shall consult with adults, their families, advocates, and all other departments affected by this legislation. DPW is not required to contract with agencies to provide adult protective services until final regulations are published in the Pennsylvania Bulletin or funding is appropriated by the General Assembly.

Assuming the bill is enacted in October 2010, the provisions of this act would take effect six months later, in April 2011. Because the adult protective services program would not begin until final regulations are promulgated, it is assumed that the program will not be operational before the fourth quarter of 2012/13. Given these assumptions, it is anticipated that DPW will incur no cost in 2010/11 and have minimal state costs of \$76,000 in 2011/12 to fund three staff positions during the last six months of the year. Once the act is implemented and local agencies are contracted to provide protective services, state costs will increase significantly to fund the following: program costs related to adults requiring protective services; the ongoing public education and information campaign; a “hotline” to manage calls related the program; staff to provide 24-hour response related to protective services; and information technology required to develop and maintain comprehensive reporting, data collection and analysis;. DPW estimates costs of \$1.7 million in 2012/13 for one quarter of operations and \$4.6 million in 2013/14 when the program is operational for the full year. These estimates assume existing department staff and resources will be used to the extent possible and that federal Medicaid dollars will cover a significant portion of the costs.

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**DATE:** September 22, 2010

**General Note and Disclaimer:** *This Fiscal Note was prepared pursuant to House Rule 19(a), and the elements considered and reported above are required by Section 5 of the rule. Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.*