SENATE AMENDED

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THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 253 Session of 2021

INTRODUCED BY OWLETT,	TOOHIL,	PICKETT, BO	OBACK, HILL-EVANS,
HOHENSTEIN, RYAN,	STEPHENS,	KAUFFMAN,	ROTHMAN, SCHLOSSBERG,
R. BROWN, CIRESI,	PASHINSKI	, STRUZZI,	WARREN, GLEIM, COX,
MIZGORSKI, GUZMAN,	T. DAVIS	, MCNEILL,	SMITH AND E. NELSON,
JANUARY 26, 2021			

SENATOR BROWNE, APPROPRIATIONS, IN SENATE, RE-REPORTED AS AMENDED, JANUARY 25, 2022

AN ACT

Establishing a task force on the opioid abuse epidemic's impact <--1 2 on children and providing for powers and duties of the taskforce. 3 AMENDING THE ACT OF APRIL 9, 1929 (P.L.343, NO.176), ENTITLED <---4 "AN ACT RELATING TO THE FINANCES OF THE STATE GOVERNMENT; 5 PROVIDING FOR CANCER CONTROL, PREVENTION AND RESEARCH, FOR 6 AMBULATORY SURGICAL CENTER DATA COLLECTION, FOR THE JOINT 7 UNDERWRITING ASSOCIATION, FOR ENTERTAINMENT BUSINESS 8 FINANCIAL MANAGEMENT FIRMS, FOR PRIVATE DAM FINANCIAL 9 ASSURANCE AND FOR REINSTATEMENT OF ITEM VETOES; PROVIDING FOR 10 THE SETTLEMENT, ASSESSMENT, COLLECTION, AND LIEN OF TAXES, 11 BONUS, AND ALL OTHER ACCOUNTS DUE THE COMMONWEALTH, THE 12 COLLECTION AND RECOVERY OF FEES AND OTHER MONEY OR PROPERTY 13 DUE OR BELONGING TO THE COMMONWEALTH, OR ANY AGENCY THEREOF, 14 15 INCLUDING ESCHEATED PROPERTY AND THE PROCEEDS OF ITS SALE, THE CUSTODY AND DISBURSEMENT OR OTHER DISPOSITION OF FUNDS 16 AND SECURITIES BELONGING TO OR IN THE POSSESSION OF THE 17 18 COMMONWEALTH, AND THE SETTLEMENT OF CLAIMS AGAINST THE COMMONWEALTH, THE RESETTLEMENT OF ACCOUNTS AND APPEALS TO THE 19 COURTS, REFUNDS OF MONEYS ERRONEOUSLY PAID TO THE 20 COMMONWEALTH, AUDITING THE ACCOUNTS OF THE COMMONWEALTH AND 21 ALL AGENCIES THEREOF, OF ALL PUBLIC OFFICERS COLLECTING 22 MONEYS PAYABLE TO THE COMMONWEALTH, OR ANY AGENCY THEREOF, 23 AND ALL RECEIPTS OF APPROPRIATIONS FROM THE COMMONWEALTH, 24 25 AUTHORIZING THE COMMONWEALTH TO ISSUE TAX ANTICIPATION NOTES TO DEFRAY CURRENT EXPENSES, IMPLEMENTING THE PROVISIONS OF 26 27 SECTION 7 (A) OF ARTICLE VIII OF THE CONSTITUTION OF PENNSYLVANIA AUTHORIZING AND RESTRICTING THE INCURRING OF 28 CERTAIN DEBT AND IMPOSING PENALTIES; AFFECTING EVERY 29

DEPARTMENT, BOARD, COMMISSION, AND OFFICER OF THE STATE 1 GOVERNMENT, EVERY POLITICAL SUBDIVISION OF THE STATE, AND 2 CERTAIN OFFICERS OF SUCH SUBDIVISIONS, EVERY PERSON, ASSOCIATION, AND CORPORATION REQUIRED TO PAY, ASSESS, OR 3 4 COLLECT TAXES, OR TO MAKE RETURNS OR REPORTS UNDER THE LAWS 5 IMPOSING TAXES FOR STATE PURPOSES, OR TO PAY LICENSE FEES OR 6 7 OTHER MONEYS TO THE COMMONWEALTH, OR ANY AGENCY THEREOF, EVERY STATE DEPOSITORY AND EVERY DEBTOR OR CREDITOR OF THE 8 COMMONWEALTH," IN EMERGENCY COVID-19 RESPONSE, FURTHER 9 PROVIDING FOR MONEY IN ACCOUNT; AND PROVIDING FOR OPIOID 10 ABUSE CHILD IMPACT TASK FORCE AND FOR ARPA HEALTH CARE 11 WORKFORCE SUPPORTS. 12 13 The General Assembly of the Commonwealth of Pennsylvania 14 hereby enacts as follows: Section 1. Short title. 15 <---16 This act shall be known and may be cited as the Opioid Abuse-Child Impact Task Force Act. 17 18 Section 2. Declaration of policy. 19 The General Assembly finds and declares as follows: 20 (1) This Commonwealth is one of the states which has 21 been hardest hit by an epidemic of heroin and prescription-22 opioid abuse and addiction that is plaguing American society. (2) One of the more tragic consequences of this epidemic-23 24 is the devastating impact it has had and continues to have on-25 infants and children. 26 (3) Newborns are suffering through withdrawal from 27 opioids because of prenatal exposure to these drugs. 28 (4) Fatalities and near fatalities of infants and young-29 children have been linked to parental substance abuse. 30 (5) Cases of child abuse and neglect linked to parental 31 substance abuse are increasing, as are the number of children-32 being removed from their homes and placed in protective custody because of their parents' drug addiction. 33 34 (6) The Commonwealth has a responsibility to protect its 35 residents, especially children. Section 3. Definitions. 36

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1	The following words and phrases when used in this act shall
2	have the meanings given to them in this section unless the
3	context clearly indicates otherwise:
4	"Task force." The task force established in section 4.
5	Section 4. Establishment.
6	A task force on the opioid abuse epidemic's impact on
7	children is established. The task force shall focus on improving-
8	the safety, well being and permanency of substance exposed
9	infants and other young children affected by their parents'
10	substance abuse disorders.
11	Section 5. Responsibilities.
12	The task force is responsible for:
13	(1) Identifying strategies and making short-term and
14	long term recommendations to prioritize the prevention of
15	substance-exposed_infants.
16	(2) Improving outcomes for pregnant and parenting women
17	who are striving to recover from addiction.
18	(3) Promoting the health, safety and permanency of
19	substance-exposed infants and other young children at risk of
20	child abuse and neglect or placement in foster care due to-
21	parental alcohol and drug use.
22	(4) Ensuring that the Commonwealth is compliant with the-
23	Child Abuse Prevention and Treatment Act (Public Law 93-247,
24	42 U.S.C. § 5101 et seq.) related to identifying substance-
25	exposed infants and is developing multidisciplinary plans of
26	safe care for these infants.
27	Section 6. Members and meetings.
28	(a) Members. The task force is comprised of the following
29	members:
30	(1) The Secretary of Human Services or a designee who
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1 shall be an employee of the Department of Human Services. The 2 designee shall be appointed by the Secretary of Human-3 Services in writing, and a copy of the appointment shall be submitted to the chairperson of the task force. 4 5 (2) The Secretary of Health or a designee who shall be an employee of the Department of Health. The designee shall 6 7 be appointed by the Secretary of Health in writing, and a 8 copy of the appointment shall be submitted to the chairperson-9 of the task force. 10 (3) The Secretary of Drug and Alcohol Programs or a designee who shall be an employee of the Department of Drug-11 12 and Alcohol Programs. The designee shall be appointed by the 13 Secretary of Drug and Alcohol Programs in writing, and a copy-14 of the appointment shall be submitted to the chairperson of 15 the task force. 16 (4) Three members appointed by the Senate, as follows: (i) two members appointed by the President pro-17 tempore of the Senate, one of whom shall be a layperson-18 19 who is a biological parent, foster parent or adoptive-20 parent of an infant or young child with current or-21 previous involvement in the child welfare system as a 22 result of a parent's substance abuse; and 23 (ii) one member appointed by the Minority Leader of 24 the Senate. 25 (5) Three members appointed by the House of 26 Representatives, as follows: (i) two members appointed by the Speaker of the-27 28 House of Representatives, one of whom shall be a 29 layperson who is a biological parent, foster parent or 30 adoptive parent of an infant or young child with current

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1	or previous involvement in the child welfare system as a
2	result of a parent's substance abuse; and
3	(ii) one member appointed by the Minority Leader of
4	the House of Representatives.
5	(6) Two members appointed by the Governor.
6	(b) Qualifications. Except for laypersons appointed under
7	paragraphs (4)(i) and (5)(i), individuals appointed under
8	subsection (a)(4), (5) or (6) must possess professional
9	experience and expertise in:
10	(1) obstetric medicine;
11	(2) pediatric medicine;
12	(3) behavioral health treatment;
13	(4) early intervention programs;
14	(5) county children and youth agency services;
15	(6) child advocacy; or
16	(7) neonatal intensive care unit nursing.
17	(c) ChairpersonThe Governor shall select the chairperson-
18	of the task force.
19	(d) AppointmentThe members of the task force shall be-
20	appointed within 25 days after the effective date of this
21	section.
22	(e) Quorum. The physical presence of seven members-
23	constitutes a quorum of the task force.
24	(f) Majority vote. An action of the task force shall be
25	authorized or ratified by a majority vote of its members.
26	(g) Meetings
27	(1) The task force shall meet as necessary but no fewer-
28	than five times during the period ending two months prior to-
29	the issuance date of the report. The first meeting shall be
30	convened within 45 days following the effective date of this-
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1 section.

2	(2) Additional meetings may be called by the chairperson
3	as necessary.
4	(3) The chairperson shall schedule a meeting upon-
5	written request of eight members of the task force.
6	(4) A member not physically present may participate by
7	teleconference or video conference.
8	(h) Compensation. Members of the task force shall not
9	receive compensation but shall be reimbursed for reasonable and
10	necessary expenses incurred in service of the task force.
11	Section 7. Duties.
12	The task force has the following duties:
13	(1) To examine and analyze the existing practices,
14	processes, procedures and laws relating to the diagnosis and
15	treatment of substance-exposed infants.
16	(2) To review and analyze the existing practices,
17	processes, procedures and laws relating to the safety, well-
18	being, permanency and placement of children at risk due to
19	their parents' substance abuse disorders.
20	(3) To hold public hearings for the taking of testimony
21	and the requesting of documents.
22	(4) To make relevant recommendations for improving the
23	safety, well-being and permanency of substance-exposed-
24	infants and other children adversely affected by their
25	parents' substance abuse disorders.
26	(5) To issue a report in accordance with section 10.
27	Section 8. Hearings.
28	The task force shall hold public hearings as necessary to
29	obtain the information required to conduct its review.
30	Section 9. Agency cooperation.

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The Department of Human Services, the Department of Health 1 2 and the Joint State Government Commission shall cooperate to-3 provide administrative or other assistance to the task force. Section 10. Reports. 4 5 (a) General rule. The task force shall prepare and submit, two months prior to the expiration date of this act, a final-6 report on its activities, findings and recommendations to the 7 8 Governor, the Senate and the House of Representatives. The task 9 force may file status reports and updates with the Governor, the 10 Senate and the House of Representatives as it deems appropriate. 11 (b) Adoption of report. A report under this section shall 12 be adopted at a public meeting. 13 (c) Public record. A report under this section shall be available to the public. 14 15 Section 11. Expiration. 16 This act expires 12 months after the effective date of this 17 act. 18 Section 12. Effective date. 19 This act shall take effect immediately. 20 SECTION 1. SECTION 111-C(G) OF THE ACT OF APRIL 9, 1929 <---(P.L.343, NO.176), KNOWN AS THE FISCAL CODE, ADDED JUNE 30, 2021 21 22 (P.L.62, NO.24), IS AMENDED TO READ: SECTION 111-C. MONEY IN ACCOUNT. 23 24 * * * 25 (G) TRANSFER.--FEDERAL MONEY FROM THE CORONAVIRUS STATE FISCAL 26 (1)27 RECOVERY FUND IN THE ACCOUNT OTHER THAN AMOUNTS APPROPRIATED UNDER PART XXX OF THE ACT OF JUNE 30, 2021 (P.L.1325, NO.1A), 28 29 KNOWN AS THE GENERAL APPROPRIATION ACT OF 2021, AND ARTICLE <u>I-J,</u> SHALL BE TRANSFERRED TO THE GENERAL FUND FOR USE UNDER 30

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1 [42 U.S.C. § 802(C)(1) (PUBLIC LAW 117-2, 135 STAT. 223)] 2 SECTION 602(C)(1) OF THE SOCIAL SECURITY ACT (49 STAT. 620, 3 42 U.S.C. § 802(C)(1)) FOR FISCAL YEARS BEGINNING AFTER JUNE 30, 2022. 4 5 (2) A TRANSFER UNDER PARAGRAPH (1) SHALL BE MADE BY THE STATE TREASURER ON THE FOLLOWING SCHEDULE: 6 7 FOR THE 2022-2023 FISCAL YEAR, THE TRANSFER (I) 8 SHALL BE MADE NO EARLIER THAN JULY 31, 2022. 9 (II) FOR THE 2023-2024 FISCAL YEAR, THE TRANSFER SHALL BE MADE NO EARLIER THAN JULY 31, 2023. 10 THE AMOUNT OF THE TRANSFER UNDER PARAGRAPH (1) MADE 11 (3) FOR A FISCAL YEAR MAY NOT BE HIGHER THAN THE AMOUNT WHICH MAY 12 13 BE USED FOR THE FISCAL YEAR UNDER 42 U.S.C. § 802(C)(1). 14 (4) ANY MONEY WHICH REMAINS IN THE ACCOUNT AFTER A TRANSFER UNDER PARAGRAPH (1) SHALL BE TRANSFERRED UNDER 15 16 PARAGRAPH (2) IN THE FOLLOWING FISCAL YEAR. SECTION 2. THE ACT IS AMENDED BY ADDING ARTICLES TO READ: 17 18 ARTICLE I-I 19 OPIOID ABUSE CHILD IMPACT TASK FORCE SECTION 101-I. DECLARATION OF POLICY. 20 21 THE GENERAL ASSEMBLY FINDS AND DECLARES AS FOLLOWS: 22 (1) THIS COMMONWEALTH IS ONE OF THE STATES WHICH HAS 23 BEEN HARDEST HIT BY AN EPIDEMIC OF HEROIN AND PRESCRIPTION 24 OPIOID ABUSE AND ADDICTION THAT IS PLAGUING AMERICAN SOCIETY. (2) ONE OF THE MORE TRAGIC CONSEQUENCES OF THIS EPIDEMIC 25 26 IS THE DEVASTATING IMPACT IT HAS HAD AND CONTINUES TO HAVE ON 27 INFANTS AND CHILDREN. 28 (3) NEWBORNS ARE SUFFERING THROUGH WITHDRAWAL FROM 29 OPIOIDS BECAUSE OF PRENATAL EXPOSURE TO THESE DRUGS. (4) FATALITIES AND NEAR FATALITIES OF INFANTS AND YOUNG 30

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1	CHILDREN HAVE BEEN LINKED TO PARENTAL SUBSTANCE ABUSE.
2	(5) CASES OF CHILD ABUSE AND NEGLECT LINKED TO PARENTAL
3	SUBSTANCE ABUSE ARE INCREASING, AS ARE THE NUMBER OF CHILDREN
4	BEING REMOVED FROM THEIR HOMES AND PLACED IN PROTECTIVE
5	CUSTODY BECAUSE OF THEIR PARENTS' DRUG ADDICTION.
6	(6) THE COMMONWEALTH HAS A RESPONSIBILITY TO PROTECT ITS
7	RESIDENTS, ESPECIALLY CHILDREN.
8	SECTION 102-I. DEFINITIONS.
9	THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ARTICLE
10	SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
11	CONTEXT CLEARLY INDICATES OTHERWISE:
12	"TASK FORCE." THE TASK FORCE ESTABLISHED IN SECTION 103-1.
13	SECTION 103-I. ESTABLISHMENT.
14	A TASK FORCE ON THE OPIOID ABUSE EPIDEMIC'S IMPACT ON
15	CHILDREN IS ESTABLISHED. THE TASK FORCE SHALL FOCUS ON IMPROVING
16	THE SAFETY, WELL-BEING AND PERMANENCY OF SUBSTANCE-EXPOSED
17	INFANTS AND OTHER YOUNG CHILDREN AFFECTED BY THEIR PARENTS'
18	SUBSTANCE ABUSE DISORDERS.
19	SECTION 104-I. RESPONSIBILITIES.
20	THE TASK FORCE IS RESPONSIBLE FOR:
21	(1) IDENTIFYING STRATEGIES AND MAKING SHORT-TERM AND
22	LONG-TERM RECOMMENDATIONS TO PRIORITIZE THE PREVENTION OF
23	SUBSTANCE-EXPOSED INFANTS.
24	(2) IMPROVING OUTCOMES FOR PREGNANT AND PARENTING WOMEN
25	WHO ARE STRIVING TO RECOVER FROM ADDICTION.
26	(3) PROMOTING THE HEALTH, SAFETY AND PERMANENCY OF
27	SUBSTANCE-EXPOSED INFANTS AND OTHER YOUNG CHILDREN AT RISK OF
28	CHILD ABUSE AND NEGLECT OR PLACEMENT IN FOSTER CARE DUE TO
29	PARENTAL ALCOHOL AND DRUG USE.
30	(4) ENSURING THAT THE COMMONWEALTH IS COMPLIANT WITH THE

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1	CHILD ABUSE PREVENTION AND TREATMENT ACT (PUBLIC LAW 93-247,
2	<u>42 U.S.C. § 5101 ET SEQ.) RELATED TO IDENTIFYING SUBSTANCE-</u>
3	EXPOSED INFANTS AND IS DEVELOPING MULTIDISCIPLINARY PLANS OF
4	SAFE CARE FOR THESE INFANTS.
5	SECTION 105-I. MEMBERS AND MEETINGS.
6	(A) MEMBERSTHE TASK FORCE IS COMPRISED OF THE FOLLOWING
7	MEMBERS:
8	(1) THE SECRETARY OF HUMAN SERVICES OR A DESIGNEE WHO
9	SHALL BE AN EMPLOYEE OF THE DEPARTMENT OF HUMAN SERVICES. THE
10	DESIGNEE SHALL BE APPOINTED BY THE SECRETARY OF HUMAN
11	SERVICES IN WRITING, AND A COPY OF THE APPOINTMENT SHALL BE
12	SUBMITTED TO THE CHAIRPERSON OF THE TASK FORCE.
13	(2) THE SECRETARY OF HEALTH OR A DESIGNEE WHO SHALL BE
14	AN EMPLOYEE OF THE DEPARTMENT OF HEALTH. THE DESIGNEE SHALL
15	BE APPOINTED BY THE SECRETARY OF HEALTH IN WRITING, AND A
16	COPY OF THE APPOINTMENT SHALL BE SUBMITTED TO THE CHAIRPERSON
17	OF THE TASK FORCE.
18	(3) THE SECRETARY OF DRUG AND ALCOHOL PROGRAMS OR A
19	DESIGNEE WHO SHALL BE AN EMPLOYEE OF THE DEPARTMENT OF DRUG
20	AND ALCOHOL PROGRAMS. THE DESIGNEE SHALL BE APPOINTED BY THE
21	SECRETARY OF DRUG AND ALCOHOL PROGRAMS IN WRITING, AND A COPY
22	OF THE APPOINTMENT SHALL BE SUBMITTED TO THE CHAIRPERSON OF
23	THE TASK FORCE.
24	(4) THREE MEMBERS APPOINTED BY THE SENATE, AS FOLLOWS:
25	(I) TWO MEMBERS APPOINTED BY THE PRESIDENT PRO
26	TEMPORE OF THE SENATE, ONE OF WHOM SHALL BE A LAYPERSON
27	WHO IS A BIOLOGICAL PARENT, FOSTER PARENT OR ADOPTIVE
28	PARENT OF AN INFANT OR YOUNG CHILD WITH CURRENT OR
29	PREVIOUS INVOLVEMENT IN THE CHILD WELFARE SYSTEM AS A
30	RESULT OF A PARENT'S SUBSTANCE ABUSE; AND

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1	(II) ONE MEMBER APPOINTED BY THE MINORITY LEADER OF
2	THE SENATE.
3	(5) THREE MEMBERS APPOINTED BY THE HOUSE OF
4	REPRESENTATIVES, AS FOLLOWS:
5	(I) TWO MEMBERS APPOINTED BY THE SPEAKER OF THE
6	HOUSE OF REPRESENTATIVES, ONE OF WHOM SHALL BE A
7	LAYPERSON WHO IS A BIOLOGICAL PARENT, FOSTER PARENT OR
8	ADOPTIVE PARENT OF AN INFANT OR YOUNG CHILD WITH CURRENT
9	OR PREVIOUS INVOLVEMENT IN THE CHILD WELFARE SYSTEM AS A
10	RESULT OF A PARENT'S SUBSTANCE ABUSE; AND
11	(II) ONE MEMBER APPOINTED BY THE MINORITY LEADER OF
12	THE HOUSE OF REPRESENTATIVES.
13	(6) TWO MEMBERS APPOINTED BY THE GOVERNOR.
14	(B) QUALIFICATIONSEXCEPT FOR LAYPERSONS APPOINTED UNDER
15	SUBSECTION (A)(4)(I) AND (5)(I), INDIVIDUALS APPOINTED UNDER
16	SUBSECTION (A)(4), (5) OR (6) MUST POSSESS PROFESSIONAL
17	EXPERIENCE AND EXPERTISE IN:
18	(1) OBSTETRIC MEDICINE;
19	(2) PEDIATRIC MEDICINE;
20	(3) BEHAVIORAL HEALTH TREATMENT;
21	(4) EARLY INTERVENTION PROGRAMS;
22	(5) COUNTY CHILDREN AND YOUTH AGENCY SERVICES;
23	(6) CHILD ADVOCACY; OR
24	(7) NEONATAL INTENSIVE CARE UNIT NURSING.
25	(C) CHAIRPERSON THE GOVERNOR SHALL SELECT THE CHAIRPERSON
26	OF THE TASK FORCE.
27	(D) APPOINTMENTTHE MEMBERS OF THE TASK FORCE SHALL BE
28	APPOINTED WITHIN 25 DAYS AFTER THE EFFECTIVE DATE OF THIS
29	SECTION.
30	(E) QUORUMTHE PHYSICAL PRESENCE OF SEVEN MEMBERS

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1	CONSTITUTES A QUORUM OF THE TASK FORCE.
2	(F) MAJORITY VOTE AN ACTION OF THE TASK FORCE SHALL BE
3	AUTHORIZED OR RATIFIED BY A MAJORITY VOTE OF ITS MEMBERS.
4	(G) MEETINGS
5	(1) THE TASK FORCE SHALL MEET AS NECESSARY BUT NO FEWER
6	THAN FIVE TIMES DURING THE PERIOD ENDING TWO MONTHS PRIOR TO
7	THE ISSUANCE DATE OF THE REPORT. THE FIRST MEETING SHALL BE
8	CONVENED WITHIN 45 DAYS FOLLOWING THE EFFECTIVE DATE OF THIS
9	SECTION.
10	(2) ADDITIONAL MEETINGS MAY BE CALLED BY THE CHAIRPERSON
11	AS NECESSARY.
12	(3) THE CHAIRPERSON SHALL SCHEDULE A MEETING UPON
13	WRITTEN REQUEST OF EIGHT MEMBERS OF THE TASK FORCE.
14	(4) A MEMBER NOT PHYSICALLY PRESENT MAY PARTICIPATE BY
15	TELECONFERENCE OR VIDEO CONFERENCE.
16	(H) COMPENSATION MEMBERS OF THE TASK FORCE SHALL NOT
17	RECEIVE COMPENSATION BUT SHALL BE REIMBURSED FOR REASONABLE AND
18	NECESSARY EXPENSES INCURRED IN SERVICE OF THE TASK FORCE.
19	<u>SECTION 106-I. DUTIES.</u>
20	THE TASK FORCE HAS THE FOLLOWING DUTIES:
21	(1) TO EXAMINE AND ANALYZE THE EXISTING PRACTICES,
22	PROCESSES, PROCEDURES AND LAWS RELATING TO THE DIAGNOSIS AND
23	TREATMENT OF SUBSTANCE-EXPOSED INFANTS.
24	(2) TO REVIEW AND ANALYZE THE EXISTING PRACTICES,
25	PROCESSES, PROCEDURES AND LAWS RELATING TO THE SAFETY, WELL-
26	BEING, PERMANENCY AND PLACEMENT OF CHILDREN AT RISK DUE TO
27	THEIR PARENTS' SUBSTANCE ABUSE DISORDERS.
28	(3) TO HOLD PUBLIC HEARINGS FOR THE TAKING OF TESTIMONY
29	AND THE REQUESTING OF DOCUMENTS.
30	(4) TO MAKE RELEVANT RECOMMENDATIONS FOR IMPROVING THE

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1	SAFETY, WELL-BEING AND PERMANENCY OF SUBSTANCE-EXPOSED
2	INFANTS AND OTHER CHILDREN ADVERSELY AFFECTED BY THEIR
3	PARENTS' SUBSTANCE ABUSE DISORDERS.
4	(5) TO ISSUE A REPORT IN ACCORDANCE WITH SECTION 109-1.
5	SECTION 107-I. HEARINGS.
6	THE TASK FORCE SHALL HOLD PUBLIC HEARINGS AS NECESSARY TO
7	OBTAIN THE INFORMATION REQUIRED TO CONDUCT ITS REVIEW.
8	SECTION 108-I. AGENCY COOPERATION.
9	THE DEPARTMENT OF HUMAN SERVICES, THE DEPARTMENT OF HEALTH
10	AND THE JOINT STATE GOVERNMENT COMMISSION SHALL COOPERATE TO
11	PROVIDE ADMINISTRATIVE OR OTHER ASSISTANCE TO THE TASK FORCE.
12	SECTION 109-I. REPORTS.
13	(A) GENERAL RULETHE TASK FORCE SHALL PREPARE AND SUBMIT,
14	TWO MONTHS PRIOR TO THE EXPIRATION DATE OF THIS ARTICLE, A FINAL
15	REPORT ON ITS ACTIVITIES, FINDINGS AND RECOMMENDATIONS TO THE
16	GOVERNOR, THE SENATE AND THE HOUSE OF REPRESENTATIVES. THE TASK
17	FORCE MAY FILE STATUS REPORTS AND UPDATES WITH THE GOVERNOR, THE
18	SENATE AND THE HOUSE OF REPRESENTATIVES AS IT DEEMS APPROPRIATE.
19	(B) ADOPTION OF REPORT A REPORT UNDER THIS SECTION SHALL
20	BE ADOPTED AT A PUBLIC MEETING.
21	(C) PUBLIC RECORDA REPORT UNDER THIS SECTION SHALL BE
22	AVAILABLE TO THE PUBLIC.
23	SECTION 110-I. EXPIRATION.
24	THIS ARTICLE EXPIRES 12 MONTHS AFTER THE EFFECTIVE DATE OF
25	THIS SECTION.
26	<u>ARTICLE I-J</u>
27	ARPA HEALTH CARE WORKFORCE SUPPORTS
28	SECTION 101-J. DEFINITIONS.
29	THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ARTICLE
30	SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
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1 <u>CONTEXT CLEARLY INDICATES OTHERWISE:</u>

2	"BEHAVIORAL HEALTH PROVIDER." THE FOLLOWING:
3	(1) A LONG-TERM STRUCTURED RESIDENCE LICENSED UNDER 55
4	PA. CODE CH. 5320 (RELATING TO REQUIREMENTS FOR LONG-TERM
5	STRUCTURED RESIDENCE LICENSURE).
6	(2) A RESIDENTIAL TREATMENT FACILITY FOR ADULTS LICENSED
7	UNDER ARTICLE X OF THE ACT OF JUNE 13, 1967 (P.L.31, NO.21),
8	KNOWN AS THE HUMAN SERVICES CODE.
9	(3) A RESIDENTIAL TREATMENT FACILITY LICENSED UNDER 55
10	PA. CODE CH. 3800 (RELATING TO CHILD RESIDENTIAL AND DAY
11	TREATMENT FACILITIES) THAT MEETS THE MEDICAL ASSISTANCE
12	REIMBURSEMENT REQUIREMENTS FOR THE PROVISION OF MENTAL HEALTH
13	TREATMENT SERVICES PROVIDED IN A RESIDENTIAL TREATMENT
14	FACILITY, AS DETERMINED BY THE DEPARTMENT OF HUMAN SERVICES.
15	THE TERM SHALL INCLUDE PSYCHIATRIC RESIDENTIAL TREATMENT
16	FACILITIES AND NONACCREDITED RESIDENTIAL TREATMENT
17	FACILITIES.
18	(4) A PRIVATE PSYCHIATRIC HOSPITAL LICENSED UNDER 55 PA.
19	CODE CH. 5300 (RELATING TO PRIVATE PSYCHIATRIC HOSPITALS).
20	(5) AN INPATIENT HOSPITAL PSYCHIATRIC UNIT APPROVED
21	<u>UNDER 55 PA. CODE CH. 5100 (RELATING TO MENTAL HEALTH</u>
22	PROCEDURES).
23	"CLINICAL CARE SERVICES." THE DIAGNOSTIC, TREATMENT OR
24	REHABILITATIVE SERVICES PROVIDED IN AN ENTITY, INCLUDING THE
25	FOLLOWING SERVICES:
26	(1) RADIOLOGY AND DIAGNOSTIC IMAGING, SUCH AS MAGNETIC
27	RESONANCE IMAGING AND POSITRON EMISSION TOMOGRAPHY.
28	(2) RADIATION THERAPY.
29	(3) RESPIRATORY THERAPY.
30	(4) PHLEBOTOMY.

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1	(5) ELECTROCARDIOGRAM AND ELECTROENCEPHALOGRAPHY.
2	(6) LABORATORY MEDICAL SERVICES.
3	"CRITICAL ACCESS HOSPITAL." A HOSPITAL THAT MEETS EITHER OF
4	THE FOLLOWING:
5	(1) HAS QUALIFIED UNDER SECTION 1861(MM)(1) OF THE
6	<u>SOCIAL SECURITY ACT (49 STAT. 620, 42 U.S.C. § 1395X(MM)(1))</u>
7	AS A CRITICAL ACCESS HOSPITAL UNDER MEDICARE.
8	(2) A RURAL HOSPITAL THAT IS LICENSED UNDER SECTION 808
9	OF THE ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS THE
10	HEALTH CARE FACILITIES ACT, THAT PROVIDES INPATIENT MEDICAL
11	CARE AND OTHER RELATED SERVICES FOR SURGERY, ACUTE MEDICAL
12	CONDITIONS OR INJURIES AND THAT MEET ALL OF THE FOLLOWING:
13	(I) IS LOCATED IN A COUNTY OF THE SIXTH, SEVENTH OR
14	EIGHTH CLASS THAT HAS NO MORE THAN TWO MEDICAL
15	ASSISTANCE-ENROLLED GENERAL ACUTE CARE HOSPITALS.
16	(II) IS LOCATED IN A COUNTY THAT HAS GREATER THAN
17	17% OF ITS POPULATION THAT ARE ELIGIBLE FOR MEDICAL
18	ASSISTANCE OR HAS GREATER THAN 10,000 PERSONS ELIGIBLE
19	FOR MEDICAL ASSISTANCE.
20	(III) HAS NO MORE THAN 200 LICENSED AND STAFFED
21	BEDS.
22	(IV) DOES NOT QUALIFY AS A CRITICAL ACCESS HOSPITAL
23	<u>under section 1861(MM)(1) of the social security act as a</u>
24	CRITICAL ACCESS HOSPITAL UNDER MEDICARE.
25	"DIRECT PATIENT CARE ACTIVITIES." THE DIRECT PERFORMANCE OF
26	ANY THE FOLLOWING SERVICES TO A PATIENT BY QUALIFIED STAFF:
27	(1) ASSESSMENT.
28	(2) EXAMINATION.
29	(3) TREATMENT.
30	(4) MEDICATION ADMINISTRATION.

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1	(5) REHABILITATION.
2	(6) DIRECT CARE SERVICES.
3	(7) PREPARATION FOR CLINICAL CARE SERVICES.
4	"ENTITY." A BEHAVIORAL HEALTH PROVIDER, CRITICAL ACCESS
5	HOSPITAL, HOSPITAL OR HIGH MEDICAL ASSISTANCE HOSPITAL.
6	"HIGH MEDICAL ASSISTANCE HOSPITAL." AS DETERMINED UNDER THE
7	MEDICAL ASSISTANCE DEPENDENCY PAYMENT PROVISIONS OF THE
8	COMMONWEALTH'S APPROVED TITLE XIX STATE PLAN, BASED ON A
9	HOSPITAL'S APPROVED MEDICAL ASSISTANCE COST REPORT FOR FISCAL
10	<u>YEAR 2018-2019.</u>
11	"HOSPITAL." AS FOLLOWS:
12	(1) THE TERM SHALL INCLUDE THE FOLLOWING:
13	(I) A HOSPITAL LICENSED BY THE DEPARTMENT OF HEALTH
14	UNDER SECTION 808 OF THE HEALTH CARE FACILITIES ACT THAT
15	PROVIDES INPATIENT MEDICAL CARE AND OTHER RELATED
16	SERVICES FOR SURGERY, ACUTE MEDICAL CONDITIONS OR
17	INJURIES.
18	(II) A HOSPITAL LICENSED BY THE DEPARTMENT OF HEALTH
19	UNDER SECTION 808 OF THE HEALTH CARE FACILITIES ACT THAT
20	SPECIALIZES IN SERVICES EXCLUSIVELY TO INFANTS, CHILDREN,
21	ADOLESCENTS AND YOUNG ADULTS FROM BIRTH UP TO THE AGE OF
22	<u>21.</u>
23	(III) A CRITICAL ACCESS HOSPITAL.
24	(2) THE TERM SHALL NOT INCLUDE A FEDERAL VETERANS'
25	AFFAIRS HOSPITAL AND A STATE-OWNED PSYCHIATRIC HOSPITAL.
26	"QUALIFIED STAFF." AN EMPLOYEE OF AN ENTITY WHO IS INVOLVED
27	IN DIRECT PATIENT CARE ACTIVITIES, ENVIRONMENTAL SERVICES OR
28	CLINICAL CARE SERVICES. THE TERM SHALL NOT INCLUDE BEHAVIORAL
29	HEALTH EXECUTIVES, HOSPITAL EXECUTIVES, CONTRACTED STAFF,
30	ADMINISTRATORS AND ADMINISTRATIVE SUPPORT STAFF OR PHYSICIANS.
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1	SECTION 102-J. DEPARTMENT OF HUMAN SERVICES.
2	(A) HOSPITAL QUALIFIED STAFF RETENTION AND RECRUITMENT
3	PAYMENTSFROM MONEY APPROPRIATED TO THE DEPARTMENT OF HUMAN
4	SERVICES UNDER SUBSECTION (E)(1), \$100,000,000 SHALL BE USED FOR
5	MAKING PAYMENTS TO HOSPITALS FOR MAKING RETENTION AND
6	RECRUITMENT PAYMENTS TO QUALIFIED STAFF, WHICH SHALL BE
7	DISTRIBUTED AS ONE-TIME PAYMENTS TO EACH HOSPITAL, DETERMINED AS
8	FOLLOWS:
9	(1) DIVIDE:
10	(I) THE NUMBER OF A HOSPITAL'S LICENSED BEDS AS OF
11	DECEMBER 30, 2021, AS DETERMINED IN CONSULTATION WITH THE
12	DEPARTMENT OF HEALTH; BY
13	(II) THE TOTAL LICENSED HOSPITAL BEDS AS OF DECEMBER
14	30, 2021, AS DETERMINED IN CONSULTATION WITH THE
15	DEPARTMENT OF HEALTH.
16	(2) MULTIPLY:
17	(I) THE QUOTIENT UNDER PARAGRAPH (1); BY
18	<u>(II) \$100,000.</u>
19	(B) OTHER QUALIFIED STAFF RETENTION AND RECRUITMENT
20	PAYMENTSFROM MONEY APPROPRIATED TO THE DEPARTMENT OF HUMAN
21	SERVICES UNDER SUBSECTION (E)(2), \$110,000,000 SHALL BE USED FOR
22	MAKING PAYMENTS TO BEHAVIORAL HEALTH PROVIDERS, CRITICAL ACCESS
23	HOSPITALS AND HIGH MEDICAL ASSISTANCE HOSPITALS FOR STAFF
24	RETENTION AND RECRUITMENT PAYMENTS TO QUALIFIED STAFF, WHICH
25	SHALL BE DISTRIBUTED AS ONE-TIME PAYMENTS TO EACH BEHAVIORAL
26	HEALTH PROVIDER, CRITICAL ACCESS HOSPITAL AND HIGH MEDICAL
27	ASSISTANCE HOSPITAL, DETERMINED AS FOLLOWS:
28	(1) DIVIDE:
29	(I) THE UNDUPLICATED NUMBER OF THE LICENSED BEDS OF
30	A BEHAVIORAL HEALTH PROVIDER, CRITICAL ACCESS HOSPITAL OR
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1	HIGH MEDICAL ASSISTANCE HOSPITAL AS OF DECEMBER 30, 2021,
2	AS DETERMINED IN CONSULTATION WITH THE DEPARTMENT OF
3	HEALTH; BY
4	(II) THE UNDUPLICATED TOTAL LICENSED BEDS OF ALL
5	BEHAVIORAL HEALTH PROVIDERS, CRITICAL ACCESS HOSPITALS
6	AND HIGH MEDICAL ASSISTANCE HOSPITALS AS OF DECEMBER 30,
7	2021, AS DETERMINED IN CONSULTATION WITH THE DEPARTMENT
8	<u>OF HEALTH.</u>
9	(2) MULTIPLY:
10	(I) THE QUOTIENT UNDER PARAGRAPH (1); BY
11	<u>(II) \$110,000.</u>
12	(C) CONDITIONSTHE FOLLOWING APPLY TO RECEIPT OF PAYMENTS
13	RECEIVED UNDER THIS SECTION:
14	(1) A PAYMENT RECEIVED FROM THE DEPARTMENT OF HUMAN
15	SERVICES UNDER THIS SECTION MAY NOT SUPPLANT EXISTING STAFF
16	WAGES AND MAY NOT OTHERWISE BE REIMBURSED BY FEDERAL OR STATE
17	FUNDING.
18	(1.1) A QUALIFIED STAFF MEMBER MAY ONLY RECEIVE ONE
19	PAYMENT FOR RETENTION OR RECRUITMENT UNDER THIS SECTION.
20	(2) AN ENTITY RECEIVING A PAYMENT FROM THE DEPARTMENT OF
21	HUMAN SERVICES UNDER THIS SECTION MUST BE IN OPERATION AS OF
22	DECEMBER 30, 2021, AND MUST MAINTAIN OPERATIONS UNTIL AT
23	LEAST DECEMBER 31, 2022.
24	(3) AN ENTITY RECEIVING A PAYMENT FROM THE DEPARTMENT OF
25	HUMAN SERVICES UNDER THIS SECTION SHALL SPEND THE FUNDS BY
26	THE FOLLOWING DEADLINES:
27	(I) STAFF RETENTION PAYMENTS UNDER SUBSECTIONS (A)
28	AND (B) SHALL BE MADE WITHIN 90 DAYS OF RECEIPT OF
29	PAYMENT.
30	(II) STAFF RECRUITMENT PAYMENTS UNDER SUBSECTIONS
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1	(A) AND (B) SHALL BE MADE WITHIN 180 DAYS OF RECEIPT OF
2	PAYMENT.
3	(4) AN ENTITY RECEIVING A PAYMENT FROM THE DEPARTMENT OF
4	HUMAN SERVICES UNDER THIS SECTION SHALL SUBMIT A REPORT, IN A
5	FORM AND MANNER AS PRESCRIBED BY THE DEPARTMENT OF HUMAN
6	<u>SERVICES, AS FOLLOWS:</u>
7	(I) AN ENTITY RECEIVING A PAYMENT FROM THE
8	DEPARTMENT UNDER SUBSECTIONS (A) AND (B) SHALL SUBMIT A
9	REPORT TO THE DEPARTMENT BY:
10	(A) SEPTEMBER 30, 2022, REGARDING STAFF
11	RETENTION PAYMENTS.
12	(B) DECEMBER 31, 2022, REGARDING STAFF
13	RECRUITMENT PAYMENTS.
14	(II) A REPORT UNDER THIS PARAGRAPH SHALL INCLUDE THE
15	FOLLOWING INFORMATION:
16	(A) THE NUMBER OF STAFF PAYMENTS OR BONUSES,
17	INCLUDING ANY ADDITIONAL RETENTION AND RECRUITMENT
18	INCENTIVES, REGARDLESS OF FUNDING SOURCE.
19	(B) THE RATIO OF PERMANENT STAFF TO CONTRACTED
20	AGENCY/TEMPORARY STAFF AS OF DECEMBER 30, 2021,
21	VERSUS THAT RATIO AS OF THE SUBMISSION DATE OF THE
22	<u>REPORT.</u>
23	(C) THE AMOUNT OF A STAFF PAYMENT OR BONUS PER
24	EMPLOYEE, INCLUDING THE TOTAL NUMBER OF EACH TYPE OF
25	PAYMENT OR BONUS.
26	(D) THE TYPES OR CLASSIFICATION OF EMPLOYEES
27	THAT RECEIVED A BONUS OR PAYMENT.
28	(E) THE CRITERIA USED FOR DETERMINING A STAFF
29	PAYMENT OR BONUS, INCLUDING WHETHER AND HOW STAFF
30	WERE ENGAGED IN THE DETERMINATION.

1	(F) THE PLAN FOR RECRUITMENT AND RETENTION
2	THROUGH DECEMBER 31, 2023.
3	(G) THE NUMBER OF THE EMPLOYEES WHO RECEIVED A
4	BONUS OR PAYMENT, INCLUDING THE NUMBER OF EMPLOYEES
5	WHO RECEIVED A BONUS OR PAYMENT AND ARE STILL
6	EMPLOYED AT THE FACILITY ON THE SUBMISSION DATE OF
7	THE REPORT.
8	(H) ANY OTHER CRITERIA REQUIRED BY FEDERAL OR
9	STATE LAW OR GUIDANCE.
10	(5) THE DEPARTMENT OF HUMAN SERVICES MAY RECOVER A
11	PAYMENT FROM AN ENTITY THAT RECEIVES PAYMENT FROM THE
12	DEPARTMENT UNDER THIS SECTION IF THE ENTITY DOES NOT COMPLY
13	WITH THE PROVISIONS OF THIS SECTION OR WITH FEDERAL OR STATE
14	LAW OR GUIDANCE. AN ENTITY THAT RECEIVES A PAYMENT FROM THE
15	DEPARTMENT UNDER THIS SECTION SHALL PROVIDE DOCUMENTS,
16	RECORDS AND OTHER INFORMATION RELATED TO A PAYMENT MADE UNDER
17	THIS SECTION IN THE TIME, MANNER AND FORMAT REQUESTED BY
18	EITHER THE DEPARTMENT OF HUMAN SERVICES OR BY ANY OTHER
19	COMMONWEALTH OR FEDERAL AGENCY THAT IS AUTHORIZED TO AUDIT
20	THE PAYMENTS.
21	(D) REPORTWITHIN 90 DAYS OF THE REPORTING DEADLINES UNDER
22	SUBSECTION (C), THE DEPARTMENT OF HUMAN SERVICES, IN
23	CONSULTATION WITH THE DEPARTMENT OF HEALTH, SHALL ISSUE A REPORT
24	TO THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE
25	APPROPRIATIONS COMMITTEE OF THE SENATE AND THE CHAIRPERSON AND
26	MINORITY CHAIRPERSON OF THE APPROPRIATIONS COMMITTEE OF THE
27	HOUSE OF REPRESENTATIVES REGARDING THE AGGREGATE EMPLOYEE BONUS
28	AND PAYMENT INFORMATION RECEIVED UNDER SUBSECTION (C). THE
29	REPORT SHALL BE POSTED TO THE DEPARTMENT OF HUMAN SERVICES'
30	PUBLICLY ACCESSIBLE INTERNET WEBSITE. THE PUBLICLY AVAILABLE
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REPORT MAY NOT INCLUDE ANY PROPRIETARY RECRUITMENT AND RETENTION 1 2 PLAN INFORMATION. 3 (E) APPROPRIATION.--THE FOLLOWING FEDERAL AMOUNTS ARE 4 APPROPRIATED ON A CONTINUING BASIS FROM THE COVID-19 RESPONSE 5 RESTRICTED ACCOUNT TO THE DEPARTMENT OF HUMAN SERVICES: 6 (1) THE SUM OF \$100,000,000 IS APPROPRIATED TO THE 7 DEPARTMENT OF HUMAN SERVICES FOR COVID RELIEF - HOSPITAL 8 WORKFORCE ASSISTANCE IN ACCORDANCE WITH THIS SECTION. 9 (2) THE SUM OF \$110,000,000 IS APPROPRIATED TO THE DEPARTMENT OF HUMAN SERVICES FOR COVID RELIEF - HEALTHCARE 10 WORKFORCE ASSISTANCE IN ACCORDANCE WITH THIS SECTION. 11 SECTION 103-J. PENNSYLVANIA HIGHER EDUCATION ASSISTANCE AGENCY. 12 13 (A) STUDENT LOAN RELIEF FOR NURSES PROGRAM.--NOTWITHSTANDING 14 ANY OTHER PROVISION OF LAW, FROM MONEY APPROPRIATED TO THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE AGENCY UNDER SUBSECTION 15 16 (B), \$15,000,000 SHALL BE USED TO FUND THE PENNSYLVANIA STUDENT 17 LOAN RELIEF FOR NURSES PROGRAM. 18 (B) FEDERAL FUNDS.--FROM THE COVID-19 RESPONSE RESTRICTED ACCOUNT, FEDERAL FUNDS ARE APPROPRIATED ON A CONTINUING BASIS IN 19 THE SUM OF \$15,000,000 TO THE PENNSYLVANIA HIGHER EDUCATION 20 ASSISTANCE AGENCY FOR PENNSYLVANIA STUDENT LOAN RELIEF FOR 21 22 NURSES PROGRAM IN ACCORDANCE WITH THIS SECTION.

23 SECTION 3. THIS ACT SHALL TAKE EFFECT IMMEDIATELY.

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