

SENATE APPROPRIATIONS COMMITTEE FISCAL NOTE

BILL NO. House Bill 253

PRINTER NO. 2653

AMOUNT

See Fiscal Impact

FUND

COVID-19 Response Restricted Account

DATE INTRODUCED

January 26, 2021

PRIME SPONSOR

Representative Owlett

DESCRIPTION

House Bill 253 amends the Fiscal Code to establish a task force to review the opioid abuse epidemic's impact on infants and children.

The bill establishes a task force to examine the opioid epidemic's impact on infants and children with a focus on improving the safety, well-being and permanency of substance-exposed infants and other young children affected by their parents' substance abuse disorders.

The task force is responsible for: (1) identifying strategies and making short and long-term recommendations to make prevention of substance-exposed infants a priority; (2) improving outcomes for pregnant and parenting women attempting to recover from addiction; (3) promoting the health, safety and permanency of substance-exposed infants and other young children at risk of child abuse and neglect or placement in foster care due to parental use of alcohol and drugs; and (4) ensuring the state is in compliance with the federal Child Abuse Prevention and Treatment Act.

The task force shall be comprised of the following members:

- The Secretary of Human Services or a designee;
- The Secretary of Health or a designee;
- The Secretary of Drug and Alcohol Programs or a designee;
- Two members appointed by the President Pro Tempore of the Senate;
- Two members appointed by the Speaker of the House;
- One member appointed by the Minority Leader of the Senate;
- One member appointed by the Minority Leader of the House; and
- Two members appointed by the Governor.

One of the two members appointed by the President Pro Tempore and the Speaker of the House must be a biological, foster or adoptive parent of an infant or child who is or was involved in the child welfare system as a result of a parent's addiction. Other appointed members must have professional expertise in:

- Obstetric medicine;
- Pediatric medicine;
- Behavioral health treatment;

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- Early intervention programs;
- County children and youth agency services;
- Child advocacy; or
- Neonatal intensive care unit nursing.

The Governor shall select the chairperson of the task force, and members must be appointed within 25 days after the effective date of this act. The measure also provides for a quorum (seven members) and majority vote of the task force. The bill also sets forth meeting requirements for the task force and reimbursement for members for reasonable and necessary expenses for serving on the task force.

The Task Force shall have the following duties: (1) examine existing practices, processes, procedures and laws relating to the diagnosis and treatment of substance-exposed infants; (2) review existing practices and processes, procedures and laws relating to the safety, well-being, permanency and placement of an at-risk child due to parental addiction; (3) hold public hearings; (4) make recommendations; and (5) issue a report.

The Department of Human Services, the Department of Health and the Joint State Government Commission shall cooperate to provide administrative support and assistance to the task force. The task force shall prepare and submit a report to the Governor, the Senate, and the House no later than two months prior to the expiration date of the act.

House Bill 253 also appropriates funds from the COVID-19 Response Restricted Account for the purpose of making payments to hospital and other eligible staff and for the Student Loan Relief for Nurses Program.

This act shall take effect immediately, and the provisions regarding the Opioid Abuse Child Impact Task Force expire one year after enactment.

FISCAL IMPACT:

Creation of the Opioid Abuse Child Impact Task Force will have a minimal fiscal impact on Commonwealth funds for the reimbursement of travel expenses.

The bill allows for the reimbursement to members for reasonable and necessary expenses for serving on the task force. In addition, the bill requires the task force to have a minimum of five meetings. Assuming five meetings and the eleven members will be in person, the mileage and hotel reimbursements for the task force could cost as much as \$25,000. These costs can be accommodated with funds budgeted to the Department of Health and Department of Human Services in their General Government Operations appropriations.

House Bill 253 also provides for the distribution of \$225 million appropriated from the COVID-19 Response Restricted Account in the following manner:

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- Hospitals - \$210 million for payments to hospitals for the purpose of making retention or recruitment payments to hospital staff.
 - All hospitals - \$100 million
 - To be allocated based on licensed beds for all facilities.
 - All hospitals will receive approximately \$2,800 per bed.
 - Supplemental payments for critical access hospitals, high Medical Assistance hospitals and behavioral health providers of inpatient services - \$ 110 million
 - To be allocated based on a standard per-bed amount.
 - All eligible facilities will receive approximately \$4,400 per bed.
 - Staff retention payments must be made within 90 days of receipt of funding and facilities will have 180 days for any recruitment payments.
- Student Loan Relief for Nurses - \$15 million to fund the Student Loan Relief for Nurses Program.

All federal funding provided through House Bill 253 is a one-time payment for costs related to the COVID-19 outbreak.