

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1367 Session of
2007

INTRODUCED BY DeWEESE, McCALL, COHEN, SURRA, DERMODY, EACHUS,
D. EVANS, MUNDY AND CALTAGIRONE, MAY 21, 2007

SENATOR ERICKSON, PUBLIC HEALTH AND WELFARE, IN SENATE, AS
AMENDED, JUNE 26, 2007

AN ACT

1 Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An
2 act to consolidate, editorially revise, and codify the public
3 welfare laws of the Commonwealth," further providing for
4 medical assistance payments for institutional ~~care~~, CARE; ←
5 PROVIDING FOR PHARMACEUTICAL AND THERAPEUTICS COMMITTEE;
6 FURTHER PROVIDING for definitions, for authorization, for
7 amount, for repayment, for regulations and for time periods;
8 and providing for the Senior Care and Services Study
9 Commission.

10 The General Assembly of the Commonwealth of Pennsylvania
11 hereby enacts as follows:

12 Section 1. Section 443.1 of the act of June 13, 1967
13 (P.L.31, No.21), known as the Public Welfare Code, amended July
14 7, 2005 (P.L.177, No.42), is amended to read:

15 Section 443.1. Medical Assistance Payments for Institutional
16 Care.--The following medical assistance payments shall be made
17 in behalf of eligible persons whose institutional care is
18 prescribed by physicians:

19 (1) Payments as determined by the department for inpatient
20 hospital care consistent with Title XIX of the Social Security

1 Act (49 Stat. 620, 42 U.S.C. § 1396 et seq.). To be eligible for
2 such payments a hospital must be qualified to participate under
3 Title XIX of the Social Security Act and have entered into a
4 written agreement with the department regarding matters
5 designated by the secretary as necessary to efficient
6 administration, such as hospital utilization, maintenance of
7 proper cost accounting records and access to patients' records.
8 Such efficient administration shall require the department to
9 permit participating hospitals to utilize the same fiscal
10 intermediary for this Title XIX program as such hospitals use
11 for the Title XVIII program;

12 (2) The cost of skilled nursing and intermediate nursing
13 care in State-owned geriatric centers, institutions for the
14 mentally retarded, institutions for the mentally ill, and the
15 cost of skilled and intermediate nursing care provided prior to
16 June 30, 2004, in county homes which meet the State and Federal
17 requirements for participation under Title XIX of the Social
18 Security Act and which are approved by the department. This cost
19 in county homes shall be as specified by the regulations of the
20 department adopted under Title XIX of the Social Security Act
21 and certified to the department by the Auditor General;
22 elsewhere the cost shall be determined by the department;

23 (3) Rates on a cost-related basis established by the
24 department for skilled nursing home or intermediate care in a
25 non-public nursing home, when furnished by a nursing home
26 licensed or approved by the department and qualified to
27 participate under Title XIX of the Social Security Act and
28 provided prior to June 30, 2004;

29 (4) Payments as determined by the department for inpatient
30 psychiatric care consistent with Title XIX of the Social

1 Security Act. To be eligible for such payments a hospital must
2 be qualified to participate under Title XIX of the Social
3 Security Act and have entered into a written agreement with the
4 department regarding matters designated by the secretary as
5 necessary to efficient administration, such as hospital
6 utilization, maintenance of proper cost accounting records and
7 access to patients' records. Care in a private mental hospital
8 provided under the fee for service delivery system shall be
9 limited to thirty days in any fiscal year for recipients aged
10 twenty-one years or older who are eligible for medical
11 assistance under Title XIX of the Social Security Act and for
12 recipients aged twenty-one years or older who are eligible for
13 general assistance-related medical assistance. Exceptions to the
14 thirty-day limit may be granted under section 443.3. Only
15 persons aged twenty-one years or under and aged sixty-five years
16 or older shall be eligible for care in a public mental hospital.
17 This cost shall be as specified by regulations of the department
18 adopted under Title XIX of the Social Security Act and certified
19 to the department by the Auditor General for county and non-
20 public institutions;

21 [(5) On or after July 1, 2004, and until such time as
22 regulations are adopted pursuant to subclause (iii), payments to
23 county and nonpublic nursing facilities certified to participate
24 as providers under Title XIX of the Social Security Act for
25 nursing facility services shall be calculated and made as
26 specified in the department's regulations in effect on July 1,
27 2003, except as may be otherwise required by:

28 (i) the Commonwealth's approved Title XIX Plan for nursing
29 facility services;

30 (ii) regulations promulgated by the department pursuant to

1 section 454; and

2 (iii) regulations promulgated by the department pursuant to
3 section 204(1)(iv) of the act of July 31, 1968 (P.L.769,
4 No.240), referred to as the Commonwealth Documents Law,
5 specifying the methods and standards which the department will
6 use to set rates and make payments for nursing facility services
7 effective July 1, 2006. Notwithstanding any other provision of
8 law, including section 814-A, the promulgation of regulations
9 under this subsection shall, until June 30, 2006, be exempt from
10 the following:

11 (A) Section 205 of the Commonwealth Documents Law.

12 (B) Section 204(b) of the act of October 15, 1980 (P.L.950,
13 No.164), known as the "Commonwealth Attorneys Act."

14 (C) The act of June 25, 1982 (P.L.633, No.181), known as the
15 "Regulatory Review Act."]

16 (5) After June 30, 2004 and before June 30, 2007, payments
17 to county and non-public nursing facilities enrolled in the
18 medical assistance program as providers of nursing facility
19 services shall be calculated and made as specified in the
20 department's regulations in effect on July 1, 2003, except that
21 if the Commonwealth's approved Title XIX State Plan for nursing
22 facility services in effect for the period of July 1, 2004,
23 through June 30, 2007, specifies a methodology for calculating
24 county and non-public nursing facility payment rates that is
25 different than the department's regulations in effect on July 1,
26 2003, the department shall follow the methodology in the
27 Federally-approved Title XIX State plan.

28 (6) For public nursing home care provided on or after July
29 1, 2005, the department shall recognize the costs incurred by
30 county nursing facilities to provide services to eligible

1 persons as medical assistance program expenditures to the extent
2 the costs qualify for Federal matching funds and so long as the
3 costs are allowable as determined by the department and reported
4 and certified by the county nursing facilities in a form and
5 manner specified by the department. Expenditures reported and
6 certified by county nursing facilities shall be subject to
7 periodic review and verification by the department or the
8 Auditor General. Notwithstanding this paragraph, county nursing
9 facilities shall be paid based upon rates determined in
10 accordance with [paragraph (5)] paragraphs (5) and (7).

11 (7) After June 30, 2007, payments to county and nonpublic
12 nursing facilities enrolled in the medical assistance program as
13 providers of nursing facility services shall be determined in
14 accordance with the methodologies for establishing payment rates
15 for county and non-public nursing facilities specified in the
16 department's regulations and the Commonwealth's approved Title
17 XIX State Plan for nursing facility services in effect after
18 June 30, 2007. The following shall apply:

19 (i) For the fiscal year 2007-2008, the department shall
20 apply a revenue adjustment neutrality factor and make
21 adjustments to county and non-public nursing facility payment
22 rates for medical assistance nursing facility services. The
23 revenue adjustment factor shall limit the estimated aggregate
24 increase in the Statewide day-weighted average payment rate over
25 the three-year period commencing July 1, 2005, and ending June
26 30, 2008, from the Statewide day-weighted average payment rate
27 for medical assistance nursing facility services in fiscal year
28 2004-2005 to 6.912% plus any percentage rate of increase
29 permitted by the amount of funds appropriated for nursing
30 facility services in the General Appropriations Act of 2007.

1 Application of the revenue adjustment neutrality factor shall be
2 subject to Federal approval of any amendments as may be
3 necessary to the Commonwealth's approved Title XIX State Plan
4 for nursing facility services.

5 (ii) The department may make additional changes to its
6 methodologies for establishing payment rates for county and non-
7 public nursing facilities enrolled in the medical assistance
8 program consistent with Title XIX of the Social Security Act,
9 except that, if during a fiscal year an assessment is
10 implemented under Article VIII-A, the department shall not make
11 a change under this subparagraph unless it adopts regulations as
12 provided under section 814-A.

13 (8) As a condition of participation in the medical
14 assistance program, before any county or non-public nursing
15 facility increases the number of medical assistance certified
16 beds in its facility or in the medical assistance program,
17 whether as a result of an increase in beds in an existing
18 facility or the enrollment of a new provider, the facility must
19 seek and obtain advance written approval of the increase in
20 certified beds from the department. The following shall apply:

21 (i) Before July 1, 2009, the department shall propose
22 regulations that would establish the process and criteria to be
23 used to review and respond to requests for increases in medical
24 assistance certified beds including whether an increase in the
25 number of certified beds is necessary to assure that long-term
26 living care and services under the medical assistance program
27 will be provided in a manner consistent with applicable Federal
28 and State law, including Title XIX of the Social Security Act.

29 (ii) Pending adoption of regulations, a nursing facility's
30 request for advance written approval for an increase in medical

1 assistance certified beds shall be submitted and reviewed in
2 accordance with the process and guidelines contained in the
3 statement of policy published in 28 Pa.B.138.

4 (iii) The department may publish amendments to the statement
5 of policy if the department determines that changes to the
6 process and guidelines for reviewing and responding to requests
7 for approval of increases in medical assistance certified beds
8 will facilitate access to medically necessary nursing facility
9 services or are required to assure that long-term living care
10 and services under the medical assistance program will be
11 provided in a manner consistent with applicable Federal and
12 State law, including Title XIX of the Social Security Act. The
13 department shall publish the proposed amendments in the
14 Pennsylvania Bulletin and solicit public comments for thirty
15 days. After consideration of the comments it receives, the
16 department may proceed to adopt the amendments by publishing an
17 amended statement of policy in the Pennsylvania Bulletin which
18 shall include its responses to the public comments that it
19 received concerning the proposed amendments.

20 (iv) This subparagraph shall apply to any requests for
21 approval of an increase in medical assistance certified beds
22 pending or submitted on or after the effective date of this
23 subparagraph. This subparagraph shall expire upon the
24 department's adoption of final regulations or September 30,
25 2011, whichever occurs first.

26 SECTION 2. THE ACT IS AMENDED BY ADDING A SECTION TO READ: <—

27 SECTION 460. PHARMACEUTICAL AND THERAPEUTICS COMMITTEE.--ANY
28 COMMONWEALTH PHARMACY PROGRAM THAT ESTABLISHES OR MAINTAINS A
29 PREFERRED DRUG LIST AND RECEIVES SUPPLEMENTAL REBATES UNDER
30 SECTION 1927 OF THE SOCIAL SECURITY ACT (49 STAT. 620, 42 U.S.C.

1 § 1396R-8) SHALL ESTABLISH A PHARMACEUTICAL AND THERAPEUTICS
2 COMMITTEE. THE PHARMACEUTICAL AND THERAPEUTICS COMMITTEE SHALL
3 SERVE IN AN ADVISORY CAPACITY TO THE SECRETARY FOR THE PURPOSE
4 OF DEVELOPING AND MAINTAINING A PREFERRED DRUG LIST AND
5 DEVELOPING AND MAINTAINING DRUG UTILIZATION REVIEW CONTROLS FOR
6 PRESCRIPTION DRUGS AND MEDICAL DEVICES. THE COMMITTEE SHALL
7 PUBLICIZE THEIR MEETINGS PURSUANT TO 65 PA.C.S. CH. 7 (RELATING
8 TO OPEN MEETINGS), AND THE COMMITTEE'S DELIBERATIONS,
9 RECOMMENDATIONS AND DECISIONS SHALL BE CONSIDERED OFFICIAL
10 ACTION AND SHALL BE OPEN TO THE PUBLIC.

11 Section ~~2~~ 3. Sections 801-A, 802-A, 804-A, 813-A, 814-A and <—
12 815-A of the act, added September 30, 2003 (P.L.169, No.25), are
13 amended to read:

14 Section 801-A. Definitions.--As used in this article--

15 "Assessment" means the fee implemented pursuant to this
16 article on every nursing facility.

17 "County nursing facility" means a long-term care nursing
18 facility that is licensed by the Department of Health under the
19 act of July 19, 1979 (P.L.130, No.48), known as the "Health Care
20 Facilities Act" and controlled by the county institution
21 district or county government if no county institution district
22 exists. The term does not include intermediate care facilities
23 for the mentally retarded controlled by the county institution
24 district or county government.

25 "Medical assistance provider" means a person or entity
26 enrolled by the Department of Public Welfare as a provider of
27 services in the medical assistance program.

28 "Nursing facility" means a non-Federal, nonpublic long-term
29 care nursing facility licensed by the Department of Health
30 pursuant to the act of July 19, 1979 (P.L.130, No.48), known as

1 the "Health Care Facilities Act." The term does not include
2 intermediate care facilities for the mentally retarded.

3 "Program" means the medical assistance program.

4 Section 802-A. Authorization.--In order to generate
5 additional revenues for medical assistance recipients to have
6 access to medically necessary nursing facility services, the
7 department shall implement a monetary assessment on each nursing
8 facility and, beginning July 1, 2007, may implement a monetary
9 assessment on each county nursing facility subject to the
10 conditions and requirements specified in this article[.] and any
11 approved Federal waiver obtained under section 812-A. In each
12 year in which the department implements an assessment on county
13 nursing facilities, any requirement or obligation imposed on or
14 relating to nursing facilities in sections 803-A, 804-A, 805-A,
15 806-A, 807-A, 808-A, 809-A, 810-A, 811-A, 812-A, 813-A and 814-A
16 shall be deemed to apply equally to county nursing facilities.

17 Section 804-A. Amount.--The aggregate amount of the
18 assessment and the assessment rate shall be determined in
19 accordance with this article and implemented on an annual basis
20 by the secretary, in consultation with the Secretary of the
21 Budget, and shall be approved by the Governor. In each year in
22 which the assessment is implemented, the assessment rate shall
23 be fixed so as to generate at least fifty million dollars
24 (\$50,000,000) in additional revenue subject to the maximum
25 aggregate amount that may be assessed [pursuant to the six
26 percent (6%) indirect guarantee threshold set forth in] under 42
27 CFR 433.68(f)(3)(i) (relating to permissible health care-related
28 taxes after the transition period) or any other maximum
29 established under Federal law.

30 Section 813-A. Repayment.--No nursing facility shall be

1 directly guaranteed a repayment of its assessment in derogation
2 of 42 CFR 433.68(f) (relating to permissible health care-related
3 taxes after the transition period): Provided, however, That in
4 each fiscal year in which an assessment is implemented, the
5 department shall use the State revenue collected from the
6 assessment and any Federal funds received by the Commonwealth as
7 a direct result of the assessments to maintain and increase
8 program payments to medical assistance nursing facility
9 providers to the extent permissible under Federal and State law
10 or regulation and without creating an indirect guarantee to hold
11 harmless, as those terms are used in 42 CFR 433.68(f)[(i)
12 (relating to permissible health care-related taxes after the
13 transition period)]. If the department implements an assessment
14 on county nursing facilities, the department shall allocate
15 assessment revenues available to maintain and increase program
16 payments to both county and non-county nursing facilities in a
17 manner that is consistent with Federal law and without creating
18 a direct or an indirect guarantee to hold any nursing facility
19 harmless. The secretary shall submit any State Medicaid plan
20 amendments to the United States Department of Health and Human
21 Services that are necessary to make the payment increases.

22 Section 814-A. Regulations.--(a) The department may issue
23 such regulations and orders as may be necessary to implement
24 the nursing facility assessment program in accordance with the
25 requirements of this article.

26 (b) During each fiscal year in which an assessment is
27 implemented pursuant to this article, the department shall not
28 adopt new regulations or revise existing regulations that limit,
29 restrict or reduce eligibility for medical assistance nursing
30 facility services or program participation or reimbursement for

1 medical assistance nursing facility providers without publishing
2 a notice of proposed rulemaking and adopting a final-form
3 regulation after public notice and comment in accordance with 45
4 Pa.C.S. (relating to legal notices) and the act of July 31, 1968
5 (P.L.769, No.240), known as the "Commonwealth Documents Law,"
6 and subject to review pursuant to the act of June 25, 1982
7 (P.L.633, No.181), known as the "Regulatory Review Act." Notice
8 of proposed rule making shall not be omitted pursuant to section
9 204 of the "Commonwealth Documents Law," and no final-form
10 regulation subject to this section may take effect pursuant to
11 emergency certification by the Governor under section 6(d) of
12 the "Regulatory Review Act."

13 ~~(c) (1) Notwithstanding subsection (b), the department may~~ <—
14 ~~proceed to adopt regulations under section 6(d) of the~~
15 ~~"Regulatory Review Act" if all of the following apply:~~

16 ~~(i) New regulations are necessary to comply with changes in~~
17 ~~applicable Federal law or regulations relating to eligibility~~
18 ~~for medical assistance nursing facility services or to program~~
19 ~~participation or reimbursement for medical assistance nursing~~
20 ~~facility providers.~~

21 ~~(ii) A delay in adoption of regulations will result either~~
22 ~~in the loss of Federal funds or replacement of Federal funds~~
23 ~~with State funds in an amount in excess of one million dollars~~
24 ~~(\$1,000,000).~~

25 ~~(2) Before proceeding under section 6(d) of the "Regulatory~~
26 ~~Review Act," the department shall publish advance notice in the~~
27 ~~Pennsylvania Bulletin announcing its intent to adopt regulations~~
28 ~~under section 6(d) of the "Regulatory Review Act" and soliciting~~
29 ~~public comment for at least fourteen days. After consideration~~
30 ~~of the comments it receives, the department may proceed to adopt~~

1 ~~the regulations under section 6(d) of the "Regulatory Review~~
2 ~~Act". In adopting the regulations, the department shall publish~~
3 ~~its responses to the comments that it received during the public~~
4 ~~comment period.~~

5 (C) NOTWITHSTANDING SUBSECTION (B), AND SUBJECT TO ←
6 COMPLIANCE WITH THE REQUIREMENTS OF SECTION 6(D) OF THE
7 "REGULATORY REVIEW ACT," RELATING TO EMERGENCY CERTIFICATION BY
8 THE ATTORNEY GENERAL OR BY THE GOVERNOR, THE DEPARTMENT MAY
9 ADOPT EMERGENCY-CERTIFIED REGULATIONS IF ALL OF THE FOLLOWING
10 APPLY:

11 (1) THE REGULATIONS ARE NECESSARY FOR THE DEPARTMENT TO
12 COMPLY WITH CHANGES IN APPLICABLE FEDERAL STATUTES OR
13 REGULATIONS RELATING TO:

14 (I) ELIGIBILITY FOR MEDICAL ASSISTANCE NURSING FACILITY
15 SERVICES; OR

16 (II) PROGRAM PARTICIPATION OR REIMBURSEMENT FOR MEDICAL
17 ASSISTANCE NURSING FACILITY PROVIDERS.

18 (2) A DELAY IN ADOPTION OF REGULATIONS WILL RESULT IN EITHER
19 THE LOSS OF FEDERAL FUNDS OR REPLACEMENT OF FEDERAL FUNDS WITH
20 STATE FUNDS IN AN AMOUNT IN EXCESS OF ONE MILLION DOLLARS
21 (\$1,000,000).

22 (3) BEFORE PUBLISHING THE REGULATIONS UNDER SECTION 6(D) OF
23 THE "REGULATORY REVIEW ACT," THE DEPARTMENT PUBLISHES ADVANCE
24 NOTICE IN THE PENNSYLVANIA BULLETIN ANNOUNCING ITS INTENT TO
25 ADOPT REGULATIONS PURSUANT TO SECTION 6(D) AND SOLICITS PUBLIC
26 COMMENTS FOR AT LEAST FOURTEEN (14) DAYS.

27 (4) THE DEPARTMENT PUBLISHES RESPONSES TO THE COMMENTS IT
28 RECEIVED DURING THE FOURTEEN-DAY PUBLIC COMMENT PERIOD UPON
29 ADOPTION OF THE REGULATIONS UNDER SECTION 6(D) OF THE
30 "REGULATORY REVIEW ACT."

1 Section 815-A. Time periods.--The assessment authorized in
2 this article shall not be imposed prior to July 1, 2003, or
3 after June 30, [2007] 2012.

4 Section ~~3~~ 4. The act is amended by adding an article to ←
5 read:

6 ARTICLE VIII-D

7 SENIOR CARE AND SERVICES STUDY COMMISSION

8 Section 801-D. 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 "Commission." The Senior Care and Services Study Commission.

13 Section 802-D. Senior Care and Services Study Commission.

14 (a) Declaration of policy.--The General Assembly recognizes
15 that the health care needs of Pennsylvania's current and future
16 senior population should be assessed.

17 (b) Establishment.--There is established a Senior Care and
18 Services Study Commission.

19 (c) Purpose.--The purpose of the commission shall be all of
20 the following:

21 (1) Reviewing the current care and service offerings and
22 resources available for Commonwealth residents over the age
23 of 65 years.

24 (2) Projecting future need for the various levels of
25 senior care and services through 2025.

26 (3) Evaluating the ability of the current assessment and
27 delivery systems to meet the projected service needs.

28 (4) Projecting the resources necessary to meet the
29 projected need and making policy recommendations as to how
30 the projected need can best be met considering the resource

1 limitations that may exist at the time the commission
2 completes its work under this article.

3 (d) Composition.--

4 (1) The commission shall consist of all of the following
5 members:

6 (i) The Secretary of the Budget or a designee.

7 (ii) The Secretary of Health or a designee.

8 (iii) The Secretary or a designee.

9 (iv) The Secretary of Aging or a designee.

10 (v) One member appointed by the President pro
11 tempore of the Senate.

12 (vi) One member appointed by the Minority Leader of
13 the Senate.

14 (vii) One member appointed by the Speaker of the
15 House of Representatives.

16 (viii) One member appointed by the Minority Leader
17 of the House of Representatives.

18 (ix) The following members appointed by the
19 Governor:

20 (A) Two Commonwealth residents age 65 or older
21 who use long-term living services.

22 (B) One individual representing non-profit
23 nursing facilities.

24 (C) One individual representing for-profit
25 nursing facilities.

26 (D) One individual representing county nursing
27 facilities.

28 (E) One individual representing hospital-based
29 nursing facilities.

30 (F) One individual representing home and

1 community-based service providers.

2 (G) One individual representing area agencies on
3 aging.

4 (H) One representative of an organized labor
5 group representing employees providing long-term
6 living services.

7 (I) One physician whose practice is focused in
8 long-term care settings.

9 (J) One individual representing other long-term
10 living stakeholders as may be determined by the
11 Governor.

12 (2) Appointments under paragraphs (1)(v), (vi), (vii),
13 (viii) and (ix) shall be made within 60 days of the effective
14 date of this section.

15 (3) Upon appointment of the last member under paragraph
16 (2), the commission shall transmit notice to the Legislative
17 Reference Bureau for publication in the Pennsylvania Bulletin
18 of the date of the last appointment. The date of the last
19 appointment shall be considered the date of the establishment
20 of the commission.

21 (e) Election of chairperson.--The members of the commission
22 shall elect a chairperson of the commission from among
23 themselves.

24 (f) Terms of members.--

25 (1) The terms of those members who serve by virtue of
26 the public office they hold shall be concurrent with their
27 service in the office from which they derive their
28 membership.

29 (2) Except as provided in paragraph (1), members shall
30 serve until their successors are appointed, if they represent

1 the interest of the membership class for which they were
2 appointed.

3 (g) Meetings.--The first meeting of the commission shall be
4 held within 30 days of establishment of the commission.
5 Subsequent meetings shall be held at least quarterly but more
6 frequent meetings may be convened either at the call of the
7 chairperson or by request of a simple majority of the commission
8 members.

9 (h) Initial review.--The commission shall complete the
10 initial review required under subsection (c)(1) within three
11 months of its establishment.

12 (i) Public input sessions.--Within three months of issuing
13 the findings under subsection (h), the commission shall hold no
14 fewer than three public input sessions across the Commonwealth
15 for the purpose of receiving public comment on current or
16 proposed programs serving seniors.

17 (j) Projections.--The commission shall obtain the
18 projections under subsection (c)(2) and (4) no later than one
19 year from its establishment. Nothing in this subsection shall
20 prohibit the commission, if a majority of the members agree,
21 from using a Commonwealth procured study initiated prior to the
22 establishment of the commission to obtain this information.

23 (k) Final report.--The commission shall publish a final
24 report as required under subsection (c)(1), (2), (3) and (4) no
25 later than 18 months following its establishment and shall
26 submit the report to the Governor and the General Assembly. The
27 final report of the commission and any information and data
28 compiled by the commission in accordance with this article shall
29 be made available on the publicly accessible Internet website
30 operated by the Department of Aging when the commission submits

1 its final report to the Governor and the General Assembly.

2 (1) Expenses.--The commission is authorized to incur
3 expenses deemed necessary to implement this article.

4 Section 803-D. Expiration.

5 The commission shall expire following issuance of its report
6 under ~~subsection (k)~~ SECTION 802-D(K) or three years after the <—
7 establishment of the commission, whichever occurs sooner.

8 Section 4 5. This act shall take effect immediately. <—