
THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 1089 Session of
2018

INTRODUCED BY STEFANO, MENSCH, WARD, ARGALL, BARTOLOTTA,
BREWSTER, EICHELBERGER, FOLMER, KILLION, MARTIN, McGARRIGLE,
RAFFERTY, RESCHENTHALER, SCAVELLO, WILLIAMS AND YUDICHAK,
MARCH 23, 2018

REFERRED TO HEALTH AND HUMAN SERVICES, MARCH 23, 2018

AN ACT

1 Amending the act of April 9, 1929 (P.L.177, No.175), entitled,
2 as amended, "An act providing for and reorganizing the
3 conduct of the executive and administrative work of the
4 Commonwealth by the Executive Department thereof and the
5 administrative departments, boards, commissions, and officers
6 thereof, including the boards of trustees of State Normal
7 Schools, or Teachers Colleges; abolishing, creating,
8 reorganizing or authorizing the reorganization of certain
9 administrative departments, boards, and commissions; defining
10 the powers and duties of the Governor and other executive and
11 administrative officers, and of the several administrative
12 departments, boards, commissions, and officers; fixing the
13 salaries of the Governor, Lieutenant Governor, and certain
14 other executive and administrative officers; providing for
15 the appointment of certain administrative officers, and of
16 all deputies and other assistants and employes in certain
17 departments, boards, and commissions; providing for judicial
18 administration; and prescribing the manner in which the
19 number and compensation of the deputies and all other
20 assistants and employes of certain departments, boards and
21 commissions shall be determined," in powers and duties of the
22 Department of Human Services and its departmental
23 administrative and advisory boards and commissions, further
24 providing for medical assistance payments and for admissions
25 to drug and alcohol facilities.

26 The General Assembly of the Commonwealth of Pennsylvania

27 hereby enacts as follows:

28 Section 1. Article XXIII heading and sections 2334 and 2335

1 of the act of April 9, 1929 (P.L.177, No.175), known as The
2 Administrative Code of 1929, are amended to read:

3 ARTICLE XXIII

4 POWERS AND DUTIES OF THE DEPARTMENT OF

5 [PUBLIC WELFARE] HUMAN SERVICES AND ITS DEPARTMENTAL

6 ADMINISTRATIVE AND ADVISORY BOARDS

7 AND COMMISSIONS

8 Section 2334. Medical Assistance Payments.--(a) It is the
9 general purpose of this section to provide for a continuum of
10 alcohol and drug detoxification and rehabilitation services to
11 persons eligible for medical assistance. Facilities serving as
12 appropriate treatment settings include hospital and nonhospital
13 drug detoxification and rehabilitation facilities, hospital and
14 nonhospital alcohol detoxification and rehabilitation
15 facilities, and hospital and nonhospital drug and alcohol
16 detoxification and rehabilitation facilities and outpatient
17 services licensed by the [Office] Department of Drug and Alcohol
18 Programs [of the Department of Health]. The General Assembly
19 recognizes that the fluctuating nature of alcohol and drug
20 dependency, in combination with the associated physical
21 complications often arising from long-term use of alcohol and
22 drugs, necessitates that a variety of treatment modalities and
23 settings be made available to persons eligible for medical
24 assistance. The availability of a new service in this area is in
25 no way intended to limit access to or funding of services
26 available currently.

27 (b) Consistent with section 2301, the Department of [Public
28 Welfare] Human Services shall:

29 (1) Provide, on behalf of persons eligible for medical
30 assistance, medical assistance coverage for detoxification,

1 treatment and care in a nonhospital alcohol detoxification
2 facility, nonhospital drug detoxification facility, nonhospital
3 alcohol and drug detoxification facility, or a nonhospital
4 treatment facility which can provide services for either drug or
5 alcohol detoxification or treatment or for both, provided that
6 the facility is licensed by the [Office] Department of Drug and
7 Alcohol Programs [in the Department of Health].

8 (2) Use criteria developed by the [Office] Department of
9 Drug and Alcohol Programs for governing the type, level and
10 length of care or treatment, including hospital detoxification,
11 as a basis for the development of standards for services
12 provided under clause (1).

13 [(3) Notwithstanding clause (1), provide by regulation for
14 gradual implementation of medical assistance coverage under this
15 subsection to client populations which shall be identified in
16 cooperation with the Department of Health. The regulations shall
17 provide for full implementation of clause (1) to all medical
18 assistance eligibles in phases over a period of time not to
19 exceed five years from the effective date of the regulations.
20 The program phases shall be structured so as to allow for
21 independent evaluation of each phase on an ongoing basis.
22 Initial regulations adopted pursuant to this subsection shall
23 not be subject to review pursuant to the act of June 25, 1982
24 (P.L.633, No.181), known as the "Regulatory Review Act," except
25 that the regulations may be reviewed under section 5(h) of that
26 act.

27 (c) The Department of Public Welfare, the Department of
28 Health and the Office of Drug and Alcohol Programs shall jointly
29 provide for an independent evaluation of the program authorized
30 by this section in accordance with specific evaluation criteria,

1 which shall include, but not be limited to: (i) comparison of
2 medical costs before and after program implementation; (ii)
3 employment history; and (iii) involvement with other programs of
4 the Department of Health, the Department of Public Welfare, the
5 Department of Corrections and any other appropriate agencies.
6 The evaluation shall be conducted in compliance with all
7 applicable Federal and State confidentiality requirements.]

8 (4) Require each medical assistance behavioral health
9 managed care organization administering a provider network on
10 behalf of a county for treatment of substance abuse to maintain
11 a provider network that is geographically accessible to members.

12 The access standard for ambulatory substance abuse treatment to
13 which a member travels shall be at least two providers within:

14 (i) thirty minutes travel time in urban areas; and

15 (ii) thirty minutes travel time in rural areas if licensed
16 substance abuse treatment centers are accessible, otherwise
17 within sixty minutes of travel time.

18 (d) For the purposes of this section, "ambulatory substance
19 abuse treatment" means treatment provided by a facility approved
20 by the Department of Human Services to participate in the
21 Medical Assistance Program and which is fully or provisionally
22 licensed by the Department of Drug and Alcohol Programs to
23 provide regular psychotherapy, client management, medical and
24 psychological outpatient services for the diagnosis and
25 treatment of drug and alcohol abuse and dependence to eligible
26 Medical Assistance outpatient recipients who are not residents
27 of a treatment institution.

28 Section 2335. Admissions to Drug and Alcohol Facilities.--

29 (a) Drug or alcohol abusers and drug or alcohol dependent
30 persons shall be admitted to and treated in all facilities

1 licensed by the Department [of Health and Office] of Drug and
2 Alcohol Programs, at reasonable rates on the basis of medical or
3 psychotherapeutic need, and shall not be discriminated against
4 on the basis of medical assistance eligibility.

5 (b) As part of its licensure process, the [Office]
6 Department of Drug and Alcohol Programs shall review each
7 facility's admission policies for compliance and shall
8 investigate complaints.

9 (c) The [Office] Department of Drug and Alcohol Programs may
10 suspend or revoke the license of any facility which fails to
11 maintain an admission policy consistent with the requirements of
12 this section and may impose a fine not to exceed one thousand
13 dollars (\$1,000) for each violation.

14 (d) Nothing in this section shall require any facility to
15 accept medical assistance eligible patients for whom payment is
16 not available pursuant to regulations adopted under former
17 section 2334(b) (3).

18 Section 2. This act shall take effect in 60 days.