



HOUSE COMMITTEE ON APPROPRIATIONS

FISCAL NOTE

HOUSE BILL NO. 253

PRINTERS NO. 2653

PRIME SPONSOR: Owlett

COST / (SAVINGS)

FUND	FY 2021/22	FY 2022/23
General Fund	See Fiscal Impact	

SUMMARY: House Bill 253, Printer's Number 2653, amends the Fiscal Code to establish the Opioid Abuse Child Impact Task Force and the ARPA Health Care Workforce Supports. This legislation is effective immediately.

ANALYSIS & FISCAL IMPACT:

Article I-I. Opioid Abuse Child Impact Task Force

HB 253 establishes a task force to examine the opioid epidemic's impact on infants and children. The task force shall 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:

- Identifying strategies and making short-term and long-term recommendations to prioritize the prevention of substance-exposed infants.
- Improving outcomes for pregnant and parenting women who are trying to recover from addiction.
- 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 substance abuse.
- Ensuring that Pennsylvania is compliant with the federal Child Abuse Prevention and Treatment Act related to identifying substance-exposed infants and developing multidisciplinary plans of safe care for these infants.

The task force is comprised of the following members:

- The Secretary of Human Services or a designee who shall be an employee of the Department of Human Services (DHS).
- The Secretary of Health or a designee who shall be an employee of the Department of Health (DOH).
- The Secretary of Drug and Alcohol Programs or a designee who shall be an employee of the Department of Drug and Alcohol Programs.

- Two members appointed by the President pro tempore of the Senate, one of whom must be a layperson who is a biological, foster, or adoptive parent of an infant or young child with current or previous involvement with the child welfare system as a result of a parent's substance abuse.
- One member appointed by the Minority Leader of the Senate
- Two members appointed by the Speaker of the House of Representatives, one of whom must be a layperson who is a biological, foster, or adoptive parent of an infant or young child with current or previous involvement with the child welfare system as a result of a parent's substance abuse.
- One member appointed by the Minority Leader of the House of Representatives.
- Two members appointed by the Governor.

Except for laypersons appointed by the President pro tempore and the Speaker, task force members appointed by legislative leaders and the Governor must possess professional experience and expertise in:

- Obstetric medicine;
- Pediatric medicine;
- Behavioral health treatment;
- Early intervention programs;
- County children and youth agency services;
- Child advocacy; or
- Neonatal Intensive Care Unit nursing.

The task force shall meet as necessary, but no fewer than five times during the two months prior to issuing the final report. The first meeting shall be convened within 45 days of the bill's effective date. Members of the task force shall not receive compensation, but shall be reimbursed for reasonable and necessary expenses incurred in service of the task force.

The task force will have the following duties:

- To examine and analyze the existing practices, processes, procedures and laws relating to the diagnosis and treatment of substance-exposed infants.
- To review and analyze the existing practices, processes, procedures and laws relating to the safety, well-being, permanency and placement of children at risk due to their parents' substance abuse disorders.
- To hold public hearings to take testimony, request documents and obtain information required to conduct the task force's review.
- To make relevant recommendations for improving the safety, well-being and permanency of substance-exposed infants and other children adversely affected by their parents' substance abuse disorders.
- To prepare and submit a final report on its activities, findings and recommendations to the Governor, Senate, and the House of Representatives. The final report must be submitted by two months prior to the expiration of the legislation.

DHS, DOH, and the Joint State Government Commission shall cooperate to provide administrative or other assistance to the task force.

The article establishing the task force shall expire one year after its effective date.

Fiscal Impact: DHS and DOH would be required to reimburse members of the task force for reasonable and necessary expenses, which should be covered by the agencies' existing resources.

Article I-J. ARPA Health Care Workforce Supports

HB 253 appropriates \$225 million of federal funds from the Coronavirus State Fiscal Recovery Fund for ARPA Health Care Work Supports to be distributed as follows:

- \$100 million shall be used for one-time payments to hospitals for making retention and recruitment payments to qualified staff.
- \$110 million shall be used for one-time payments to behavioral health providers, critical access hospitals, and high Medical Assistance hospitals for making retention and recruitment payments to qualified staff.
- \$15 million shall be used by Pennsylvania Higher Education Assistance Agency (PHEAA) to fund the Pennsylvania Student Loan Relief for Nurses Program.

The bill defines the qualified staff eligible for a retention or recruitment payment as an employee engaged in direct patient care activities, environmental services, or clinical care services. Hospital or behavioral health executives, contracted staff, administrators, administrative support staff, and physicians are not qualified staff. A qualified staff may only receive one payment.

A hospital or behavioral health provider that receives a payment under this article must be in operation as of December 30, 2021 and maintain operations through at least December 31, 2022. Staff retention and recruitment payments must be made within 90 days and 180 days of receipt of payment, respectively. A hospital or behavioral health provider must report to DHS on the use of funds for staff retention and recruitment payments by September 30, 2022 and December 31, 2022, respectively.

Within the 90 days of the reporting requirements for hospitals and behavioral health providers, DHS, in consultation with the DOH, must issue a report on the use of the funds to the General Assembly and post the report on the department's website.

Fiscal Impact: \$210 million is appropriated to DHS and \$15 million is appropriated to PHEAA from the Coronavirus State Fiscal Recovery Fund.

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House Appropriations Committee (R)

DATE: January 26, 2022

Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.