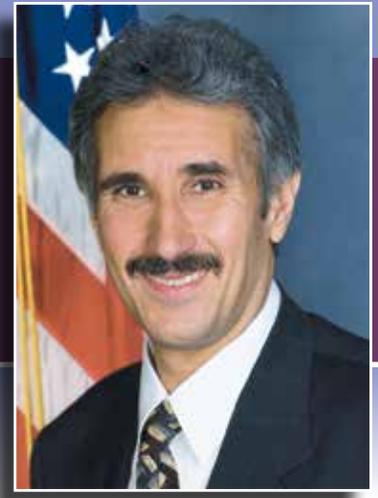


Rep. Chris

Sainato

Health Care Report



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Dear Health Care Professional,

I normally reserve part of this column to thank you for your professionalism and dedication to the patients you serve in our communities.

This year, words hardly seem adequate.

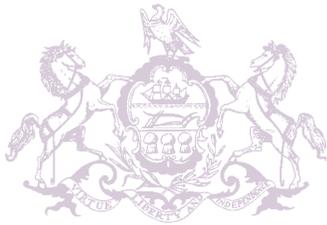
As COVID-19 remains a threat, you have not wavered in your efforts to protect and care for our communities, despite the personal risk. It is difficult to imagine how we would fare without your tireless efforts on the front lines.

Thank you – on behalf of myself, my colleagues and the people of Pennsylvania. We are incredibly grateful for your service.

In the pages to follow, you will find updates on legislation and other news affecting the health care community here in PA. I hope you find it useful and interesting.

A handwritten signature in black ink that reads "Chris Sainato".

Rep. Chris Sainato



Meeting to discuss disparities in health care access.

Support for the hardest hit: New program helps long-term care facilities combat COVID-19

One of the most difficult aspects of the pandemic has been witnessing its impact on the vulnerable Pennsylvanians we try the hardest to protect.

Much like the rest of the country, Pennsylvania has seen its long-term residential care facilities and nursing homes become ground zero for COVID-19-related infections and deaths. Those most affected include more than 80,000 Pennsylvanians living in skilled nursing facilities and at least another 45,000 in personal care homes and assisted living.

The pandemic has taken its toll: As of mid-July, nearly 70% of the approximately 7,000 Pennsylvanians who have died from COVID-19 – more than 4,800 people – were residents of nursing or personal care facilities.

We're taking steps to reverse this alarming trend. To help better protect residents and the staff who care for them, the state has launched the Regional Response Health Collaboration Program, which will provide organizational, administrative and clinical support to these facilities.

To implement the program, nine health systems and university medical centers chosen to serve six regions throughout the state will share \$175 million in grant funding.

Together, they will help long-term care facilities expand testing, including testing of asymptomatic staff and residents; implement contact tracing and best practices for infection control; support clinical care through on-site and telemedicine services; and provide remote monitoring and consultation with physicians.

The program promises to greatly improve pandemic planning, readiness and response at facilities throughout the Commonwealth.

A glance at some new laws

Here's a look at some health care-related legislation that recently became law.

- **Mastectomy patient choice.** Approved by the governor in July, Act 44 clarifies the law pertaining to mastectomy and breast reconstruction to include coverage of custom breast prosthetics for post mastectomy patients.
- **Heart and Lung Act Coverage for National Guard members.** Signed by the governor in April, Act 17 allows for National Guard members called to active duty to be covered under the Heart and Lung Act if they contract COVID-19 while performing their duties.
- **Medication synchronization.** Approved by the governor last year, Act 46 allows for patients to synchronize their medications in order to receive them on the same day each month, instead of having to make multiple visits to the pharmacy.
- **Stiffer penalties for assaults on licensed professionals.** Approved by the governor in July, Act 51 adds pharmacists, physicians' assistants, respiratory and physical therapists, and other licensed health care practitioners to the protected category of health care workers against whom assault carries a second-degree felony charge.
- **Dense breast tissue screening coverage.** Also approved by the governor in July, Act 52 mandates insurance coverage for magnetic resonance imaging or ultrasounds for women at increased risk of breast cancer because of dense breast tissue or family history.
- **Health care worker ID badges.** Approved by the governor in July, Act 54 better protects health care workers from the threat of violence, stalking or harassment by providing that workers' last names be omitted from facility ID badges.
- **PA Health Care Cost Containment Council.** Approved by the governor in April, Act 15 codifies and modernizes the PHC4 – the agency tasked with collecting and disseminating health care cost data.
- **Telepsychology.** Approved by the governor in May, Act 19 authorizes Pennsylvania to join the Psychology Interjurisdictional Compact, allowing licensed psychologists to practice telepsychology and/or conduct temporary in-person practice across state lines and helping expand mental health services to rural populations.
- **Long-term care residents.** Approved by the governor in May, Act 24 allocates funding from the CARES Act. To address COVID-19 relief efforts in long-term care facilities, the act requires the Department of Human Services to divide the state into six regions and contract with at least one health collaborative in each region to protect long-term care facility residents from COVID-19.
- **Prescription drug benefit fraud.** Approved by the governor in April, Act 14 will help reduce drug benefit fraud by requiring the Department of Aging to monthly cross-reference its list of beneficiaries with death records maintained by the Department of Health.
- **Stage IV cancer patient treatment.** Approved by the governor in February, Act 6 prohibits health plans covering treatments for Stage IV metastatic cancers

from excluding or limiting drugs for patients if the drugs are FDA-approved and consistent with best practices. Patients cannot be required to first fail on one drug before an insurance plan will cover use of a different one.

- **Mothers' milk bank.** Approved in February, Act 7 establishes the "Keystone Mothers' Milk Bank Act", which licenses and regulates donor human milk banks in Pennsylvania.

The following bills have passed the House and Senate and are with the governor as of this writing:

- **Support for first responders.** House Bill 1459 – the Emergency Responder Mental Wellness and Stress Management Program, is designed to improve support and treatment for Pennsylvania's first responders who suffer job-related stress, trauma and depression – passed the House and Senate unanimously.
- **Consent for youth mental health treatment.** House Bill 672 – which passed the House and Senate unanimously – would clarify that a parent or guardian has the right to consent to mental health treatment on behalf of a minor under 18 without the minor's consent.
- **Pharmacy benefit manager 'gag orders.'** House Bill 943, which I co-sponsored, would prohibit PBMs from imposing "gag orders" on pharmacists preventing them from telling customers when they can save money by paying with cash instead of using their insurance.
- **COVID-19 testing.** Would require the commonwealth to establish a comprehensive COVID-19 testing plan and prioritize testing for health care professionals, law enforcement and other emergency responders.
- **EKG testing for student athletes.** Senate Bill 836 would require student athletes and their parents be informed about EKG testing and its availability.



Talking with participants at the disability Mental Health forum in March.

Legislative update: A peek at some House bills in progress

The following measures recently passed the House and are now with the Senate for consideration.

Reduced residency for international grads.

House Bill 1947 would eliminate the additional year of residency required of international medical graduates. This would allow them to have the same two-year requirements as graduates of U.S. and Canadian medical schools. Passed the House unanimously in June.

Organ donation check-off contributions

House Bill 30 would increase the optional organ donation checkoff for biennial driver's license and vehicle registration applications from \$3 to \$6. Passed the House unanimously last year.

Long-term care facilities. House Bill 2437 would require the state or county health department to publish (1) the number of COVID-19 cases as a percentage of the total number of residents each long-term care facility has reported to the Department of Health and (2) the protocol for isolating positive cases. (Facility-specific data is already being collected, but the state Health Department currently only publishes data by county.) Passed the House unanimously this June.

Pharmacy benefit manager pricing practices.

House Bill 941 – which I am co-sponsoring – would introduce transparency in pricing practices by pharmacy benefit managers in Medicaid and address inadequate reimbursement rates for smaller neighborhood pharmacies. The House unanimously passed the bill last year.

Patients with psychiatric disabilities. House Bill 1895 would amend the Mental Health Procedures Act to establish that patients with mental disabilities undergoing treatment have the right to be free from

abuse, neglect and exploitation. The bill passed the House unanimously in April.

Mental Health Parity and Addiction Equity. House Bill 1696 would require insurers covering behavioral health services to submit certain information each year to the Department of Insurance to help it determine if the carrier is complying with the federal Mental Health Parity and Addiction Equity Act. The bill passed the House unanimously in May.

Carfentanil. House Bill 616, which passed the House unanimously late last year, would add Carfentanil – one of the most potent opioids in existence – to the list of Schedule II controlled substances, which would severely restrict its availability and make it illegal to possess or distribute without a license or a prescription.

Human trafficking. House Bill 2177 – part of a package of Human Trafficking bills that passed the House unanimously in January – would require that offenders who subject a minor to sexual servitude undergo treatment while in prison.



Meeting with experts earlier this year to discuss social determinants of health.

Stopgap funding, federal relief

Budget time was especially difficult this spring, as the pandemic resulted in unprecedented revenue losses and more questions than answers. To keep the state operating, the legislature passed an interim **\$25.8 billion spending plan** that funds most agencies for five months.

At the same time the General Assembly passed the interim budget, we passed a spending package allocating **\$2.6 billion in federal CARES Act funding**, putting the money to work addressing the most urgent issues facing the Commonwealth.

One highlight of the package is an allocation of more than **\$692 million** for long-term living programs, including \$175 million in grants just awarded to health collaboratives under the Regional Response Health Collaboration Program.

Other highlights include **\$625 million** to address the impacts of COVID-19, **\$225 million** for small

business assistance, **\$175 million** for rent and mortgage assistance to low- and middle-income families, and **\$150 million** for schools to create and maintain a safe and sanitary educational environment.

To address hunger, **\$60 million** is allocated to food security and relief efforts and a state food purchase program. Other allocations include **\$50 million** for health care system assistance for medical equipment and supplies, **\$10 million** for critical access hospitals, **\$10 million** for community-based health care centers (to cover COVID-19-related costs not reimbursed by federal, state or other funds), and **\$10 million** for vaccine, treatment and therapy development for qualified biotech.

Additional funding will support child-care services, fire and EMS companies, higher education, domestic violence programs, homeless assistance services and other resources.



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More than \$450,000 in grants to support opioid treatment, trauma-based health care services for youth

Two grants funded by the federal Substance Abuse and Mental Health Services Administration will help individuals in the criminal justice system get meaningful treatment support.

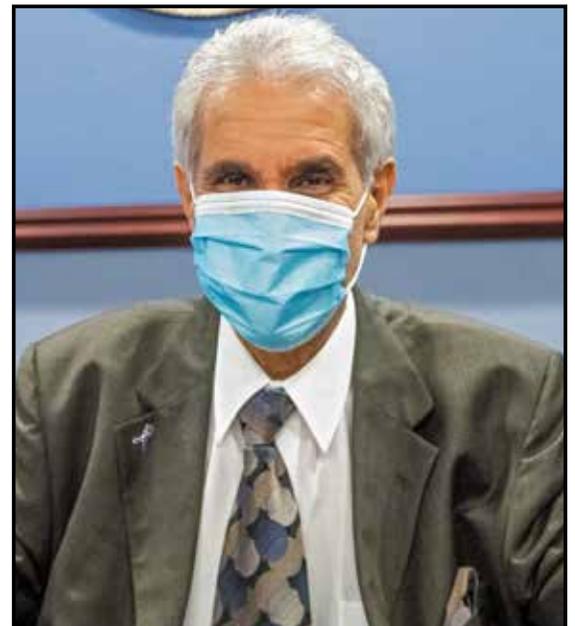
A grant of nearly \$150,000 will expand medication-assisted treatment – a successful, evidence-based program that treats substance use disorder as a chronic disease – for Lawrence County Jail inmates struggling with opioid use disorder.

And, those facing incarceration because of substance use disorder will have an alternative to jail time, thanks to \$117,000 in funding that will allow the Lawrence County Drug and Alcohol Commission to collaborate with local law enforcement and treatment providers to offer a treatment-based approach.

Finally, nearly \$184,000 in funding will allow the Human Services Center to provide trauma-focused cognitive behavioral therapy – an evidence-based treatment proven effective for post-traumatic stress, depression and similar illnesses – to help get youth plagued by trauma back on the road to recovery.



Discussing solutions to the opioid crisis at a February meeting in Exton.



Masking up for a House Policy Committee hearing to discuss infection control plans at long-term care facilities.