

**Chiropractic Fellowship of PA
Summary of Legislation
April 2017**

House Passes Budget That Assumes Agency Consolidation, Holds Hearings to Consider It

The state House of Representatives took the first step in the budget process on April 4, when it passed HB 218, the Fiscal Year 2017-18 spending bill. This bill move was seen as simply the first step in the process of completing an agreed-to budget, to be adopted by the June 30 end of the current fiscal year. A key part of the bill, which was passed on mostly partisan lines, with the Democrats voting no, was the moving of program monies from the Departments of Drug & Alcohol Programs, Health, and Aging to a yet-to-be created Department of Health and Human Services, as suggested by Gov. Wolf in his budget address this past February. Despite overwhelming votes for the bill from the House Republicans, the three Committee Chairs with oversight responsibilities for the three agencies to be “united” with DHS, all have expressed strong opposition to the move, as have their Senate counterparts, and several outside groups representing seniors and drug and alcohol providers, among others. On the other hand, some provider organizations have praised the concept of “consolidation,” noting that streamlining the number of agencies and programs providing services to various populations will make access to services and funding easier, and compliance more doable.

After the passage of the bill, House and Senate committees commenced hearings directly on the issue of consolidation, which current DHS Secretary Ted Dallas has taken to call “unification”. Legislators in both chambers alternately defended and panned the move, raising concerns about accountability, and the apparent small amount of cost savings to be realized by the effort. The Wolf Administration has maintained that any cost savings would be incidental to the real goal of making the programs more efficient, once the new Department is fully functioning.

How all of this impacts chiropractors, if at all, remains to be seen. The consolidation requires legislative action, since the Departments to be absorbed were each created by different statutes, and each has its own distinct constituencies, who have not all looked at the idea as a positive. Also to be considered is the impact on state employees, as well as their counterparts at the county level who administer various programs under each. Add to that the fact that these agencies use different computer software, and other administrative mechanisms, and it is easy to see how there is concern. This should make for an interesting spring.

Legislative Activity

The following bills of interest to CFoP were acted on by the General Assembly this past month.

Scope of Practice/Licensure Bills

[HB 548](#) RE: Hearing Examiners (by Rep. Harry Readshaw, et al)

Amends the act entitled "An act empowering the General Counsel or his designee to issue subpoenas for certain licensing board activities; providing for hearing examiners in the Bureau of Professional and Occupational Affairs; providing additional powers to the Commissioner of Professional and Occupational Affairs; and further providing for civil penalties and license suspension," by adding a subsection on hearing examiners requiring all licensees under the Bureau of Professional and Occupational Affairs to report convictions within 30 days.

Received in the Senate and referred to Senate Consumer Protection & Prof. Licensure Committee, 4/6/2017

Budget-Related Bills

NONE

Child Abuse Reporting

NONE

Health Care Bills

[**HB 235**](#) RE: Opioid Abuse Child Impact Task Force Act (By Rep. Kathy Watson, et al)
Establishes a task force responsible for identifying strategies and making recommendations on prioritizing the prevention and health of substance-exposed infants and improving outcomes for recovering pregnant and parenting women. The 13-person task force is comprised of 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, three members appointed by the President Pro Tempore of the Senate, three members appointed by the Speaker of the House of Representatives, and four members appointed by the governor. The task force is required to hold a minimum of five meetings prior to November 30, 2017, and issue a report with their findings by January 31, 2018. The act shall expire on March 1, 2018.

Removed from the table, 4/3/2017

Read second time, and rereferred to House Appropriations Committee, 4/4/2017

**Reported as committed from House Appropriations Committee, read third time, and passed House, 4/5/2017
(191-0)**

Received in the Senate and referred to Senate Aging and Youth Committee, 4/1/2017

[**HB 395**](#) RE: Prescribing of Epilepsy Drugs (by Rep. Gene DiGirolamo, et al)

Amends the Achieving Better Care by Monitoring All Prescriptions Program (ABC-MAP) Act stipulating that a query would not be required if a patient has been prescribed a non-narcotic Schedule V controlled substance that treats an epilepsy or seizure disorder.

Removed from the table, 4/19/2017

Amended on House floor, read second time, and rereferred to House Appropriations Committee, 4/25/2017

**Reported as committed from House Appropriations Committee, read third time, and passed House, 4/26/2017
(190-0)**

[**HB 1043**](#) RE: Pain Management Clinics (by Rep. Matt Baker, et al)

Amends the Health Care Facilities Act adding a chapter providing for registration of pain management clinics; providing for duties of the department; and imposing penalties. Each pain management clinic, with the exception of private physician offices, shall register and maintain a valid registration with the department. Among the requirements the bill outlines prescriber and recordkeeping rules for pain management clinics.

Reported as amended from House Health Committee, read first time, and laid on the table, 4/19/2017

Removed from the table, 4/25/2017

Read second time, and rereferred to House Appropriations Committee, 4/26/2017

Health Insurance Bills

[**HB 125**](#) RE: Health Care Practitioner Credentialing Act (by Rep. Matt Baker, et al)

Requires all health insurers licensed to do business in the Commonwealth to accept the Council for Affordable Quality Healthcare (CAQH) credentialing application when submitted by a health care practitioner for participation in the health insurer's provider panel, and provides for provisional credentialing and enrollee protections. Directs the Insurance Department to assess an administrative penalty on a health insurer for a failure to utilize CAQH or for intentionally and routinely failing to complete the credentialing process.

Reported as committed from House Health Committee, read first time, and laid on the table, 4/4/2017

Removed from the table, 4/18/2017

[**HB 1293**](#) RE: Utilization Review Entity Preauthorization Act (by Rep. Marguerite Quinn, et al)

Provides that no later than 180 days after the effective date of this act, prior authorization requests shall be accessible to health care practitioners and accepted by insurers, pharmacy benefits managers and utilization review organizations electronically through a secure electronic transmission using the NCDP SCRIPT Standard electronic prior authorization transactions. Provides facsimile, proprietary portals and electronic forms shall not be considered electronic transmissions. Further provides for definitions; basis, development and use; mandatory disclosure and review of preauthorization requirements and restrictions; personnel qualified to make pre-authorizations and adverse determinations; utilization review entity duties in pre-authorizations and non-urgent circumstances; utilization

review entity duties relating to urgent health care services and concerning emergency health care services; notifications of adverse determinations; reviews of appeals; continuation of coverage pending conclusion of appeal procedure; limitation on requests for medical records; and preauthorization by secondary payers.

Introduced and referred to House Insurance Committee, 5/1/2017

Medical Assistance/DHS

HB 1248 RE: Power to Consolidate Agencies (by Rep. Gene DiGirolamo, et al)

Provides for study requirements prior to transferring a power, duty or function of a Commonwealth agency. The bill establishes there shall be no transfer of a power, duty or function of a Commonwealth agency until studies are completed on financial impact and policy and programmatic implications, within one year of the intended effective date of transfer.

Introduced and referred to House Human Services Committee, 4/19/2017

**Reported as amended from House Human Services Committee, read first time, and laid on the table,
4/26/2017**

SB 600 RE: Coordinated Care Management (by Sen. Scott Martin, et al)

Amends the Human Services Code, in public assistance, providing for total population coordinated care management by establishing that the department shall issue a request for proposals for a total population coordinated care management initiative that incorporates evidence-based medicine into each physical and behavioral health decision concerning a medical assistance recipient.

Introduced and referred to Senate Health and Human Services Committee, 4/13/2017

Cosponsor memos filed

HCO1863 (Bloom) - [Agency Unification](#) Enables legislation for Governor Wolf's proposed unification of the Departments of Aging, Drug and Alcohol Programs (DDAP), Health, and Human Services (DHS) into a new Department of Health and Human Services.

Filed, 4/13/2017

SCO 800 (Schwank) - [Agency unification](#) Enables legislation for Governor Wolf's proposed unification of the Departments of Aging, Drug and Alcohol Programs (DDAP), Health and Human Services (DHS) into a new Department of Health and Human Services.

Filed, 4/13/2017

Partnerships/Liability

NONE

Sales Tax Expansion

NONE

WORKER'S COMP

NONE

Upcoming meetings of Interest

Some House Committee meetings and session can be viewed online at: <http://www.pahousegop.com/>
Senate Committee meetings and session can be streamed at: <http://www.pasenategop.com/>

THURSDAY - 5/18/17

Independent Regulatory Review Commission

10:00 a.m., 14th Floor Conference Room, 333 Market Street, Harrisburg

To consider the following regulations: **Reg. No. 3106 State Board of Chiropractic #16A-4324: Radiological Procedures Examination (Deemed Approved)**

2017 SENATE SESSION SCHEDULE

May	8, 9, 10, 22, 23, 24
June	5, 6, 7, 12, 13, 14, 19, 20, 21, 22, 26, 27, 28, 29, 30

2017 HOUSE SESSION SCHEDULE

April	3, 4, 5, 18, 19, 24, 25, 26
May	8, 9, 10, 22, 23, 24
June	5, 6, 7, 12, 13, 14, 19, 20, 21, 22, 26, 27, 28, 29, 30

State Board of Chiropractic Board Meeting Schedule

2017 Meeting Dates (Subject to Change)

May 18, July 20, September 21, November 9

All Board meetings are held at Penn Center, 2601 N. 3rd Street, Harrisburg, PA, at 9 AM

DHS Medical Assistance Advisory Committee (MAAC)

ALL MEETINGS ARE SCHEDULED FROM 10:00 A.M. TO 12 NOON

Lecture Hall 246/248

Temple University Harrisburg

234 Strawberry Square

Harrisburg, PA

Remaining 2017 Meeting Dates

May 25, June 29, July 27, September 28, October 26, December 14

Copies of bills described above can be obtained through the CFOP office, or on-line at:

<http://www.legis.state.pa.us/cfdocs/legis/home/session.cfm>