

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 445 Session of 2023

INTRODUCED BY FARRY, SANTARSIERO AND LAUGHLIN, MARCH 14, 2023

REFERRED TO HEALTH AND HUMAN SERVICES, MARCH 14, 2023

AN ACT

1 Amending the act of April 9, 1929 (P.L.343, No.176), entitled
2 "An act relating to the finances of the State government;
3 providing for cancer control, prevention and research, for
4 ambulatory surgical center data collection, for the Joint
5 Underwriting Association, for entertainment business
6 financial management firms, for private dam financial
7 assurance and for reinstatement of item vetoes; providing for
8 the settlement, assessment, collection, and lien of taxes,
9 bonus, and all other accounts due the Commonwealth, the
10 collection and recovery of fees and other money or property
11 due or belonging to the Commonwealth, or any agency thereof,
12 including escheated property and the proceeds of its sale,
13 the custody and disbursement or other disposition of funds
14 and securities belonging to or in the possession of the
15 Commonwealth, and the settlement of claims against the
16 Commonwealth, the resettlement of accounts and appeals to the
17 courts, refunds of moneys erroneously paid to the
18 Commonwealth, auditing the accounts of the Commonwealth and
19 all agencies thereof, of all public officers collecting
20 moneys payable to the Commonwealth, or any agency thereof,
21 and all receipts of appropriations from the Commonwealth,
22 authorizing the Commonwealth to issue tax anticipation notes
23 to defray current expenses, implementing the provisions of
24 section 7(a) of Article VIII of the Constitution of
25 Pennsylvania authorizing and restricting the incurring of
26 certain debt and imposing penalties; affecting every
27 department, board, commission, and officer of the State
28 government, every political subdivision of the State, and
29 certain officers of such subdivisions, every person,
30 association, and corporation required to pay, assess, or
31 collect taxes, or to make returns or reports under the laws
32 imposing taxes for State purposes, or to pay license fees or
33 other moneys to the Commonwealth, or any agency thereof,
34 every State depository and every debtor or creditor of the
35 Commonwealth," providing for Collaborative Care Model and

1 Primary Care Behavioral Health Model Implementation Program;
2 and making an appropriation.

3 The General Assembly of the Commonwealth of Pennsylvania
4 hereby enacts as follows:

5 Section 1. The act of April 9, 1929 (P.L.343, No.176), known
6 as The Fiscal Code, is amended by adding an article to read:

7 ARTICLE I-K

8 COLLABORATIVE CARE MODEL

9 AND PRIMARY CARE BEHAVIORAL HEALTH MODEL

10 IMPLEMENTATION PROGRAM

11 Section 101-K. Definitions.

12 The following words and phrases when used in this article
13 shall have the meanings given to them in this section unless the
14 context clearly indicates otherwise:

15 "Collaborative care model." The evidence-based, integrated
16 behavioral health service delivery method described in 81 Fed.
17 Reg. 220, 80230 (November 15, 2016), which includes a formal
18 collaborative arrangement among a primary care team consisting
19 of a primary care physician, a care manager and a psychiatric
20 consultant, and includes the following elements:

21 (1) Care directed by the primary care team.

22 (2) Structured care management.

23 (3) Regular assessments of clinical status using
24 developmentally appropriate, validated tools.

25 (4) Modification of treatment as appropriate.

26 "Collaborative care technical assistance center." A health
27 care organization that can provide educational support and
28 technical assistance related to the collaborative care model or
29 primary care behavioral health model in a specific region of
30 this Commonwealth. The term includes an academic medical center
31 located in this Commonwealth.

1 "Department." The Department of Human Services of the
2 Commonwealth.

3 "Primary care behavioral health model." The evidence-based,
4 integrated behavioral health service delivery method which may
5 include a licensed behavioral health professional, psychologist,
6 psychiatrist, clinical social worker or counselor in the primary
7 care team and the following elements:

8 (1) Care directed by the primary care team.

9 (2) Structured care management.

10 (3) Regular assessments of clinical status using
11 developmentally appropriate, validated tools.

12 (4) Modification of treatment as appropriate.

13 Section 102-K. Primary care grants.

14 (a) Grants.--The department shall make grants to primary
15 care physicians and primary care practices to meet the initial
16 costs of establishing and delivering behavioral health
17 integration services through the collaborative care model or
18 primary care behavioral health model. Primary care physicians
19 and primary care practices may work with larger health systems
20 for the purposes of applying for and implementing grants under
21 this section.

22 (b) Use of grants.--A primary care physician or primary care
23 practice that receives a grant under this section shall use
24 funds received through the grant:

25 (1) To hire staff.

26 (2) To identify and formalize contractual relationships
27 with other health care practitioners, including practitioners
28 who will function as psychiatric consultants and behavioral
29 health care managers in providing behavioral health
30 integration services through the collaborative care model or

1 primary care behavioral health model.

2 (3) To purchase or upgrade software and other resources
3 needed to appropriately provide behavioral health integration
4 services through the collaborative care model or primary care
5 behavioral health model, including resources needed to
6 establish a patient registry and implement measurement-based
7 care.

8 (4) For other purposes that the department may determine
9 to be necessary.

10 (c) Priority.--In making grants under this section, the
11 department shall give priority to primary care physicians and
12 primary care practices:

13 (1) that are in rural areas; or

14 (2) that are in a county in which the suicide or
15 overdose death rate is higher than the national average
16 suicide or overdose death rate, according to the averages
17 recorded and maintained by the Centers for Disease Control
18 and Prevention.

19 Section 103-K. Technical assistance grants.

20 (a) Regions.--The department shall divide the Commonwealth
21 into the following six regions:

22 (1) Northeast.

23 (2) Southeast.

24 (3) North central.

25 (4) South central.

26 (5) Northwest.

27 (6) Southwest.

28 (b) Grants.--The department shall solicit proposals from and
29 enter into a grant agreement with at least one eligible
30 collaborative care technical assistance center applicant from

1 each region under subsection (a) to provide technical assistance
2 to primary care physicians and primary care practices on
3 providing behavioral health integration services through the
4 collaborative care model or primary care behavioral health
5 model.

6 (c) Technical assistance described.--An entity that receives
7 a grant under subsection (b), in a region described in
8 subsection (a), shall provide technical assistance to primary
9 care physicians and primary care practices within that region
10 that will assist primary care physicians and primary care
11 practices with the following:

12 (1) Developing financial models and budgets for program
13 launch and sustainability based on practice size.

14 (2) Developing staffing models for essential staff
15 roles, including care managers, licensed behavioral health
16 professionals, psychologists and consulting psychiatrists.

17 (3) Providing information technology expertise to assist
18 with building the model requirements into electronic health
19 records, including assistance with care manager tools,
20 patient registry, ongoing patient monitoring and patient
21 records.

22 (4) Training support for all key staff and operational
23 consultation to develop practice workflows.

24 (5) Establishing methods to ensure the sharing of best
25 practices and operational knowledge among primary care
26 physicians and primary care practices that provide behavioral
27 health integration services through the collaborative care
28 model or primary care behavioral health model.

29 (6) Accurately and appropriately coding and billing
30 insurers for collaborative care model and primary care

1 behavioral health model services.

2 (7) For other purposes that the department may determine
3 to be necessary.

4 (d) Promotion required.--A collaborative care technical
5 assistance center that receives a grant under subsection (b), in
6 a region described in subsection (a), shall promote to primary
7 care physicians and primary care practices within the
8 collaborative care technical assistance center's region the
9 opportunity for primary care physicians and primary care
10 practices to apply for and receive the grants available under
11 section 102-K.

12 Section 104-K. Eligibility.

13 (a) Eligible applicant.--In order to be deemed an eligible
14 applicant, a collaborative care technical assistance center must
15 provide information on how it would meet the guidelines under
16 section 103-K when submitting an application to the department.

17 (b) Exception.--If there are no applications submitted to
18 the department by a potential collaborative care technical
19 assistance center under section 103-K, in one or more regions
20 described under section 103-K(a), or the department determines
21 that none of the applications for a particular region indicate
22 that any applicant is fully capable of providing the technical
23 assistance described in section 103-K(c), the department may
24 award a grant to an applicant from outside that region, provided
25 that the applicant must describe how it will adequately provide
26 the technical assistance in the region.

27 Section 2. From the money received by the Commonwealth from
28 the Federal Government under the American Rescue Plan Act of
29 2021 (Public Law 117-2, 135 Stat. 4), the sum of \$20,000,000 is
30 appropriated to the Department of Human Services for the

1 following:

2 (1) The sum of \$14,000,000 for grants under section 102-
3 K.

4 (2) The sum of \$6,000,000 for grants under section 103-
5 K.

6 Section 3. This act shall take effect immediately.