

THE GOVERNOR

Title 4—ADMINISTRATION

PART I. GOVERNOR'S OFFICE

[4 PA. CODE CH. 5]

[EXECUTIVE ORDER NO. 2020-05]

Health Care Reform Council

October 2, 2020

Whereas, health care costs historically have outpaced the growth of the Commonwealth's economy; and

Whereas, the Commonwealth purchases health care for more than 3 million Pennsylvanians through the Medical Assistance program, the Children's Health Insurance Program, and other Commonwealth-administered programs; and

Whereas, the novel coronavirus (COVID-19) pandemic has underscored the importance of high-quality health care; and

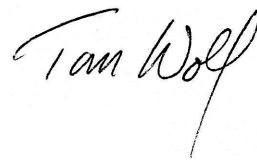
Whereas, the pandemic has had a disproportionate impact on racial and ethnic minorities and underserved communities due to structural inequities in health, social and economic factors that preceded COVID-19; and

Whereas, the economic collapse caused by the COVID-19 pandemic has led to a large shortfall in the Commonwealth's 2020-2021 budget; and

Whereas, coordination among Commonwealth agencies is needed to most effectively manage costs and improve health care delivery; and,

Whereas, Pennsylvania has the opportunity to align Commonwealth health care payment and delivery systems to provide efficient whole-person care that also contains health care costs, reduces disparities, and achieves better health outcomes.

Now, Therefore, I, Tom Wolf, Governor of the Commonwealth of Pennsylvania, by virtue of the authority vested in me by the Constitution of the Commonwealth of Pennsylvania and other laws of the Commonwealth, do hereby establish the Interagency Health Reform Council and order and direct as follows:



Governor

Fiscal Note: GOV-2020-05. No fiscal impact; (8) recommends adoption.

Annex A

TITLE 4. ADMINISTRATION

PART I. GOVERNOR'S OFFICE

CHAPTER 5. COUNCILS AND COMMITTEES

Subchapter UUU. INTERAGENCY HEALTH REFORM COUNCIL

Sec.	
5.1021.	Purpose.
5.1022.	Membership.
5.1023.	Procedures.
5.1024.	Interagency Health Reform Council responsibilities.
5.1025.	Interagency cooperation.
5.1026.	Reports.
5.1027.	Implementation.
5.1028.	General.
5.1029.	Effective date.

§ 5.1021. Purpose.

The purpose of the Interagency Health Reform Council is to evaluate the potential alignment of Commonwealth health care payment and delivery systems to provide efficient, whole-person health care that also contains costs, reduces disparities and achieves better health outcomes for residents of this Commonwealth.

§ 5.1022. Membership.

(a) The Interagency Health Reform Council (Council) shall consist of seven members as follows:

- (1) The Governor's Secretary of Policy and Planning or the Secretary's Designee;
- (2) The Secretary of Human Services or the Secretary's designee;
- (3) The Secretary of Health or the Secretary's designee;
- (4) The Insurance Commissioner or the Commissioner's designee;
- (5) The Secretary of Corrections or the Secretary's designee;
- (6) The Secretary of Aging or the Secretary's designee;
- (7) The Secretary of Drug and Alcohol Programs or the Secretary's designee.

(b) *Council Chair.* The Governor shall appoint the Chair of the Council.

(1) The Chair shall establish an agenda, workplan, timeline and meeting schedule.

(2) The Chair may establish workgroups to assist the Council as appropriate. Workgroups may include advisory non-members, if approved by the Council's chair. All workgroups shall be chaired by a member of the Council.

(c) To facilitate its work, the Council may confer with individuals and entities that have experience and expertise in health care oversight, health care purchasing or health care delivery in the Commonwealth.

§ 5.1023. Procedures.

(a) Four members in attendance at a meeting of the Interagency Health Reform Council (Council) shall constitute a quorum.

(b) Council members may attend meetings in person or remotely by electronic or telephonic means. In-person and remote participation shall be considered attendance for purposes of constituting a quorum.

§ 5.1024. Interagency Health Reform Council responsibilities.

The Interagency Health Reform Council shall have the following responsibilities:

(a) Evaluate and recommend policies to align and integrate Commonwealth programs and activities related to health and health care such as:

(1) Revision and coordination of agency programs and policies as needed to support health equity for all residents of this Commonwealth.

(2) Incorporation of services that address the social determinants of health into the delivery of and payment for health care.

(3) Support of a regional health care structure that fosters collaboration among health care payers, providers and community partners.

(4) Alignment of value-based payment initiatives and other health care related purchasing to improve the quality of care and drive health care cost savings.

(5) Development of cost-growth benchmarks to foster Statewide accountability and contain health care costs.

(6) Enhancement of the quality of care delivered to improve health outcomes.

(7) Development of spending targets to increase investment in primary care and behavioral health and support whole-person health care.

(8) Leveraging the Commonwealth's existing data resources as permitted by applicable law.

(9) Identification of potential savings associated with recommended agency alignment of resources and policies.

(10) Streamlining health care program oversight.

(b) Monitor implementation of the Commonwealth's priorities, policies and initiatives related to enhancing health care delivery and health care cost containment.

(c) In the absence of legislative action, develop initial health care cost growth benchmarks by March 31, 2021, and make accompanying recommendations for development of future year cost targets.

§ 5.1025. Interagency cooperation.

(a) The Interagency Health Reform Council (Council) may draw resources from each Council member agency, including policy, clinical, analytic, budget and other staff, to assist the Council's efforts.

(b) The Council may draw upon other Commonwealth agencies as needed to promote health in all policies.

(c) The Council member agencies may enter into agreements, as permitted by law, to integrate, review and analyze existing Commonwealth data across agencies, including claims and encounter data, to support evidence-based decision making.

(d) In the implementation of a policy developed and approved under this subchapter, affected member agencies will seek Federal approval of the policy, if necessary.

§ 5.1026. Reports.

The Interagency Health Reform Council (Council) shall submit a report to the Governor no later than December 31, 2020, that includes proposals for the development and implementation of health care reform and identifies all policy and legislative changes needed to effectuate the Council's proposals. The Council may submit other reports, as it deems necessary, on the identified areas of responsibility of the Council under this subchapter.

§ 5.1027. Implementation.

All Commonwealth agencies under the Governor's jurisdiction shall take all steps necessary to implement this subchapter.

§ 5.1028. General.

This subchapter shall be implemented consistent with applicable law. Nothing in this subchapter shall be construed to impair or otherwise affect the authority granted by law to an executive department, agency or the head thereof. This subchapter is not intended to, and does not create, any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the Commonwealth, its departments, agencies or entities, its officers, employees or agents, or any other person.

§ 5.1029. Effective date.

This subchapter will take effect immediately and shall remain in effect unless revised or rescinded by the Governor.

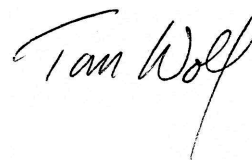
[Pa.B. Doc. No. 20-1481. Filed for public inspection October 30, 2020, 9:00 a.m.]

GOVERNOR'S OFFICE**Proclamation; House Bill No. 2513, Printer's No. 4340**

I, Tom Wolf, Governor of the Commonwealth of Pennsylvania, have caused this Proclamation to issue and, in compliance with the provisions of Section 15 of Article IV of the Constitution of Pennsylvania, do hereby give notice that I have filed in the Office of the Secretary of the Commonwealth, with my objections thereto, the following bill passed by both houses of the General Assembly at the Regular Session of 2019-2020:

House Bill No. 2513, Printer's No. 4340, entitled "An act [a]mending the act of April 9, 1929 (P.L. 177, No. 175), entitled 'An act providing for and reorganizing the conduct of the executive and administrative work of the Commonwealth by the Executive Department thereof and the administrative departments, boards, commissions, and officers thereof, including the boards of trustees of State Normal Schools, or Teachers Colleges; abolishing, creating, reorganizing or authorizing the reorganization of certain administrative departments, boards, and commissions; defining the powers and duties of the Governor and other executive and administrative officers, and of the several administrative departments, boards, commissions, and officers; fixing the salaries of the Governor, Lieutenant Governor, and certain other executive and administrative officers; providing for the appointment of certain administrative officers, and of all deputies and other assistants and employes in certain departments, boards, and commissions; providing for judicial administration; and prescribing the manner in which the number and compensation of the deputies and all other assistants and employes of certain departments, boards and commissions shall be determined,' providing for establishment operation."

Given under my hand and the Great Seal of the Commonwealth, at the County of Dauphin, this sixteenth day of October, in the year of our Lord two thousand and twenty, and of the Commonwealth the two hundred and forty-fifth.



Governor

Attest:

JONATHAN MARKS,

Deputy Secretary for Elections and Commissions

[Pa.B. Doc. No. 20-1482. Filed for public inspection October 30, 2020, 9:00 a.m.]

GOVERNOR'S OFFICE**Notice of Veto; House Bill No. 2513, Printer's No. 4340**

October 16, 2020

To the Honorable House of Representatives
of the Commonwealth of Pennsylvania

Pursuant to Article IV, Section 15 of the Pennsylvania Constitution, I am returning herewith, without my approval, House Bill 2513, Printer's Number 4340.

This bill jeopardizes public health and safety as it permits eating establishments, including restaurants, bars, clubs and banquet halls, to operate, up to 100% capacity, without having to follow any mitigation

guidelines of the Centers for Disease Control and Prevention (CDC) or the Commonwealth. These federal and state mitigation guidelines were established to reduce the risk of spreading COVID-19 because of the severity of this pandemic. These guidelines not only protect customers, they also protect employees and the community.

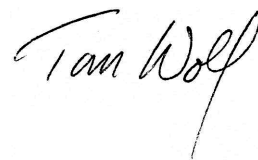
By eliminating these critical protections, in addition to removing certain limits related to bar service and purchasing of alcoholic beverages, this bill increases the likelihood of COVID-19 outbreaks. Currently, cases of COVID-19 have been rising, with 172,169 confirmed cases and 8,457 deaths to date. To the extent there is a resurgence of the virus this fall and winter, we need these critical mitigation guidelines to remain in place, and we need to retain the ability to implement further mitigation measures if necessary. As we learned this summer, the risk of spreading COVID-19 in restaurant settings is unique due to the length of interaction with others in proximity and the inability to utilize prevention practices such as wearing masks.

We have been able to re-open businesses and schools because of the success of our mitigation efforts. If we do not promote health and safety measures that reduce the spread of COVID-19, there will be a resurgence of COVID-19 cases, thereby ending our successes, and risking our health and our lives. Instead of removing mitigation guidelines and encouraging behaviors that increase the spread of COVID-19, we need to be focused on getting our children back to school, keeping our schools and businesses open, and taking precautions to keep our communities healthy. We also need legislation that: provides funding for small businesses and child care; adequately assists struggling renters and homeowners; and provides paid sick leave for employees.

Lastly, this bill contains constitutional infirmities, as it attempts to take away executive authority during the existing COVID-19 disaster emergency. The courts already have ruled that there is but one mechanism to alter the existing emergency proclamation—a concurrent resolution terminating it. This bill represents another meaningless attempt to change a necessary tool for fighting the pandemic. These bills that do nothing more than seek to distract from our focus on helping Pennsylvanians cope and recover from this emergency must stop.

For the reasons set forth above, I must withhold my signature from House Bill 2513, Printer's Number 4340.

Sincerely,



Governor

[Pa.B. Doc. No. 20-1483. Filed for public inspection October 30, 2020, 9:00 a.m.]