AN ACT

1. Amending the act of April 9, 1929 (P.L.177, No.175), entitled, as amended, "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 the regulation of pari-mutuel thoroughbred horse racing and harness horse racing activities, imposing certain taxes and providing for the disposition of funds from pari-mutuel tickets; 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," establishing the Department of Health and Human Services; making related repeals; and making editorial changes.

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

Section 1. Sections 201(a), 202, 203, 206, 207.1(d)(1) and 448(f), (k) and (l) of the act of April 9, 1929 (P.L.177,
No.175), known as The Administrative Code of 1929, are amended to read:

Section 201. Executive Officers, Administrative Departments and Independent Administrative Boards and Commissions.--(a) The executive and administrative work of this Commonwealth shall be performed by the Executive Department, consisting of the Governor, Lieutenant Governor, Secretary of the Commonwealth, Attorney General, Auditor General, State Treasurer, and Secretary of Education; by the Executive Board, and the Pennsylvania State Police; by the following administrative departments: Department of State, Office of Attorney General, Department of Corrections, Department of the Auditor General, Treasury Department, Department of Education, Department of Military Affairs, Insurance Department, Department of Banking, Department of Agriculture, Department of Transportation, [Department of Health, Department of Drug and Alcohol Programs,] Department of Labor and Industry, [Department of Aging, Department of Public Welfare,] Department of Health and Human Services, Department of General Services, Department of Revenue, Department of Community and Economic Development, Department of Environmental Protection and Department of Conservation and Natural Resources; and by the following independent administrative boards and commissions: Pennsylvania Game Commission, Pennsylvania Fish and Boat Commission, State Civil Service Commission, Pennsylvania Public Utility Commission and the Pennsylvania Securities Commission.

* * *

Section 202. Departmental Administrative Boards, Commissions, and Offices.--The following boards, commissions, and offices are hereby placed and made departmental
administrative boards, commissions, or offices, as the case may be, in the respective administrative departments mentioned in the preceding section, as follows:

In the Department of State,

- Commissioner of Professional and Occupational Affairs,
- State Real Estate Commission,
- State Board of Medical Education and Licensure,
- State Board of Physical Therapy Examiners,
- State Board of Pharmacy,
- State Dental Council and Examining Board,
- State Board of Optometrical Examiners,
- State Board of Osteopathic Medical Examiners,
- State Board of Nurse Examiners,
- State Board of Barber Examiners,
- State Board of Cosmetology,
- State Board of Veterinary Medical Examiners,
- State Board of Chiropractic Examiners,
- State Board of Podiatry Examiners,
- State Board of Examiners of Public Accountants,
- State Board of Examiners of Architects,
- State Registration Board for Professional Engineers,
- State Board of Funeral Directors,
- State Board of Examiners of Nursing Home Administrators,
- State Board of Auctioneer Examiners,
- State Board of Psychologist Examiners,
- State Board of Landscape Architects.

In the Treasury Department,

- Board of Finance and Revenue;

In the Department of Community Affairs,

- Board of Property;
In the Department of Education,

Board of Trustees of Thaddeus Stevens College of Technology,
Board of Trustees of Scranton State School for the Deaf,
Public Service Institute Board,
State Board of Private Academic Schools,
State Board of Private Licensed Schools,
State Board of Education.

In the Department of Military and Veterans Affairs,

Armory Board of the State of Pennsylvania,
Board of Trustees of Scotland School for Veterans' Children.

In the Department of Banking,

Board to License Private Bankers;

In the Department of Agriculture,

State Farm Products Show Commission;

[In the Department of Health,]

In the Department of Labor and Industry,

Workmen's Compensation Appeal Board,
State Workmen's Insurance Board,
The Industrial Board,
Unemployment Compensation Board of Review,
Pennsylvania Labor Relations Board,
Advisory Council on Affairs of the Handicapped;

[In the Department of Public Welfare,

Board of Trustees of The Western Youth Development Centers,
Board of Trustees of The Central Youth Development Centers,
Board of Trustees of The Eastern Youth Development Centers,
Centers,

Board of Trustees of Allentown State Hospital,
Board of Trustees of Clarks Summit State Hospital,
Board of Trustees of Danville State Hospital,
Board of Trustees of Embreeville Center,
Board of Trustees of Farview State Hospital,
Board of Trustees of Harrisburg State Hospital,
Board of Trustees of Mayview State Hospital,
Board of Trustees of Norristown State Hospital,
Board of Trustees of Philadelphia State Hospital,
Board of Trustees of Somerset State Hospital,
Board of Trustees of Warren State Hospital,
Board of Trustees of Wernersville State Hospital,
Board of Trustees of Woodville State Hospital,
Board of Trustees of Torrance State Hospital,
Board of Trustees of Haverford State Hospital,
Board of Trustees of Ashland State General Hospital,
Board of Trustees of Coaldale State General Hospital,
Board of Trustees of Nanticoke State General Hospital,
Board of Trustees of Philipsburg State General Hospital,
Board of Trustees of Scranton State General Hospital,
Board of Trustees of Shamokin State General Hospital,
Board of Trustees of Ebensburg Center,
Board of Trustees of Eastern State School and Hospital,
Board of Trustees of Laurelton Center,
Board of Trustees of Pennhurst Center,
Board of Trustees of Polk Center,
Board of Trustees of Selinsgrove Center,
Board of Trustees of Hamburg Center,
Board of Trustees of Western Center,
Board of Trustees of White Haven Center,
Board of Trustees of Woodhaven Center,
Board of Trustees of South Mountain Restoration Center.

In the Department of General Services,
Board of Commissioners of Public Grounds and Buildings,
State Art Commission;

In the Department of Revenue,
State Athletic Commission;

In the Department of Commerce,
Navigation Commission for the Delaware River and its
 navigable tributaries;

In the Department of Highways,
State Highway Commission.

In the Department of Transportation,
Hazardous Substances Transportation Board,

In the Department of Environmental Resources,
Environmental Quality Board,
Environmental Hearing Board,
State Board for Certification of Sewage Treatment and
Waterworks Operators,
State Soil and Water Conservation Commission,
Anthracite Mine Inspectors,
Bituminous Mine Inspectors.

[In the Department of Drug and Alcohol Programs,
Bureau of Prevention and Intervention,
Bureau of Treatment,
Bureau of Administration.]

In the Department of Health and Human Services,
A board of trustees for each psychiatric hospital
 operated by the department.
A board of trustees for each center for persons with intellectual disabilities operated by the department.

A board of trustees for each restoration center operated by the department.

All of the foregoing departmental administrative boards and commissions shall be organized or reorganized as provided in this act.

Section 203. Advisory Boards and Commissions.—The following advisory boards and commissions are placed in and made parts of the respective administrative departments, as follows:

In the Department of Military Affairs,

State Military Reservation Commission,

In the Department of Environmental Protection,

Citizens Advisory Council;

In the Department of Health and Human Services,

Advisory Health Board[;]

Pennsylvania Advisory Council on Drug and Alcohol Abuse,

A community advisory board for each youth development center operated by the department,

A community advisory board for each youth forestry camp operated by the department;

In the Department of Labor and Industry,

Advisory Council on Affairs of the Handicapped,

Advisory Board on Problems of Older Workers,

Policy, Planning and Evaluation Advisory Committee[;]

In the Department of Public Welfare,

State Board of Public Welfare,

Advisory Committee for the Blind,

Advisory Committee for General and Special Hospitals,

Advisory Committee for Children and Youth,
Advisory Committee for Public Assistance,
Advisory Committee for Mental Health and Mental
Retardation].

Section 206. Department Heads.—Each administrative
department shall have as its head an officer who shall, either
personally, by deputy, or by the duly authorized agent or
employe of the department, and subject at all times to the
provisions of this act, exercise the powers and perform the
duties by law vested in and imposed upon the department.

The following officers shall be the heads of the
administrative departments following their respective titles:
Secretary of the Commonwealth, of the Department of State;
Auditor General, of the Department of the Auditor General;
State Treasurer, of the Treasury Department;
Attorney General, of the Office of Attorney General;
Secretary of Education, of the Department of Education;
Adjutant General, of the Department of Military Affairs;
Insurance Commissioner, of the Insurance Department;
Secretary of Banking, of the Department of Banking;
Secretary of Agriculture, of the Department of Agriculture;
Secretary of Transportation, of the Department of
Transportation;
Secretary of Health and Human Services, of the Department of
Health and Human Services;
[Secretary of Drug and Alcohol Programs, of the
Department of Drug and Alcohol Programs;]
Secretary of Labor and Industry, of the Department of Labor
and Industry;
[Secretary of Aging, of the Department of Aging;
Secretary of Public Welfare, of the Department of Public
Welfare;}]
Secretary of Revenue, of the Department of Revenue;
Secretary of Community and Economic Development, of the
Department of Community and Economic Development;
Secretary of Environmental Protection, of the Department of
Environmental Protection;
Secretary of Conservation and Natural Resources, of the
Department of Conservation and Natural Resources;
Secretary of General Services, of the Department of General
Services;
Secretary of Corrections, of the Department of Corrections.

Section 207.1. Gubernatorial Appointments.--* * *
(d) The Governor shall nominate in accordance with the
provisions of the Constitution of the Commonwealth of
Pennsylvania and, by and with the advice and consent of a
majority of the members elected to the Senate appoint persons to
fill the following positions:
(1) The Secretary of Education, the Secretary of the
Commonwealth, the Adjutant General, the Insurance Commissioner,
the Secretary of Banking, the Secretary of Agriculture, the
Secretary of Transportation, the Secretary of Health and Human
Services, [the Secretary of Drug and Alcohol Programs,] the
Commissioner of the State Police, the Secretary of Corrections,
the Secretary of Labor and Industry, [the Secretary of Aging,
the Secretary of Public Welfare,] the Secretary of General
Services, the Secretary of Revenue, the Secretary of Community
and Economic Development, the Secretary of Environmental
Protection and the Secretary of Conservation and Natural
Resources.

* * *
Section 448. Advisory Boards and Commissions.--The advisory boards and commissions, within the several administrative departments, shall be constituted as follows:

(f) The Advisory Health Board shall consist of the Secretary of Health and Human Services, or in his place the secretary's duly authorized deputy, and twelve members, five of whom shall be physicians licensed to practice medicine or osteopathy in Pennsylvania, one a dentist licensed to practice dentistry in Pennsylvania, one a pharmacist registered with the State Board of Pharmacy, one a registered nurse licensed by the State Board of Nurse Examiners, and [one an engineer registered with the State Registration Board for Professional Engineers who is experienced in sanitary engineering] the Physician General. The Secretary of Health and Human Services, or in his place the secretary's duly authorized deputy, shall be chairman of the board.

The term of office of each appointed member of the board shall be four years, measured from the third Tuesday of January of the year in which he takes office, or until [his] the member's successor has been appointed and has qualified; except that in the initial appointment of the members of the board, one member shall be appointed for a term of one year, three members for a term of two years, three members for a term of three years, and three members for a term of four years.

Six members of the board, together with the Secretary of Health and Human Services, or in his place the secretary's duly authorized deputy, shall constitute a quorum.

Each appointed member of the board shall receive actual
traveling expenses and per diem compensation at the rate of $25.00 a day for time actually devoted to the business of the board.

[(k)] The State Board of Public Welfare is hereby created. The board shall consist of the Secretary of Public Welfare, ex officio, and sixteen (16) members appointed by the Governor.

Four (4) members shall be appointed from among the members of the General Assembly, two (2) from the Senate and two (2) from the House of Representatives. These members of the board shall, with respect to each branch of the General Assembly, be from different political parties, and they shall, in no event, retain membership on the board after they cease to be members of the branch of the Legislature from which they were appointed. One (1) member shall be appointed by the Governor from each of the six (6) advisory committees created by clause (l) of this section, and the first member of each advisory committee appointed by the Governor shall automatically become a member of the board. The term of office of each member of the board, except as herein otherwise provided, shall be six (6) years.

In the original appointment of the members of the board, six (6) members shall be appointed for the term of six (6) years, five (5) members for the term of four (4) years, and five (5) members for the term of two (2) years. Any vacancy occurring in the membership of the board shall be filled by the Governor only for the unexpired term. The Governor may remove any member of the board at any time. No member of the board shall serve more than two (2) consecutive terms not including a vacancy appointment, nor shall any member hold office in any political party.

Nine (9) members of the board shall constitute a quorum.
chairman who shall not be a member of an advisory committee shall be elected by the board, annually, from among its members. Members of the board shall serve without compensation other than reimbursement of travel and other actual expenses incurred in the performance of their duties. The board shall meet at least six (6) times a year. Special meetings of the board shall be held on call of the chairman or the Secretary of Public Welfare, and it shall be the duty of the chairman to call a special meeting upon the written request of one-third (1/3) or more members, not including vacancies, of the board.

(1) The following advisory committees are hereby created:

Advisory Committee for the Blind,
Advisory Committee for General and Special Hospitals,
Advisory Committee for Children and Youth,
Advisory Committee for Public Assistance,
Advisory Committee for Mental Health and Mental Retardation.

Each advisory committee shall consist of the Commissioner in the Department of Public Welfare, directing the program to which the advisory committee is attached, as an ex officio member, and not less than three (3) nor more than nine (9) members appointed by the Governor. In the case of the Advisory Committee for Mental Health and Mental Retardation, the committee shall include the Chairman of the Public Health and Welfare Committee of the Senate, the Chairman of the Health and Welfare Committee of the House of Representatives and the President of the Pennsylvania State Association of County Commissioners or his alternate. The exact number of members of each advisory committee shall be determined by the Governor upon recommendation of the State Board of Public Welfare. The qualifications of the members of each advisory committee shall
also be determined by the Governor upon recommendation of the State Board of Public Welfare: Provided, That with respect to each advisory committee, the Governor shall appoint members with due regard for representation of the professional and lay groups concerned with the fields of interest served by the program to which each advisory committee is attached. The term of office of each member of each advisory committee, except as herein otherwise provided, shall be six (6) years.

The original appointment of the members of the advisory committee shall be for overlapping terms of six (6), four (4) and two (2) years. In making these original appointments, the Governor shall, in so far as possible, appoint approximately one-third (1/3) of the recommended complement of each advisory board to each of the overlapping terms.

A majority of the members of each advisory committee shall constitute a quorum. Each advisory committee shall elect a chairman from among its members. Each advisory committee shall meet at least four (4) times a year. Special meetings of each advisory committee shall be held on call of the chairman, and it shall be the duty of the chairman to call a special meeting upon the written request of one-third (1/3) or more of the members not including vacancies of the advisory committee.

The provisions of clause (k) of this section with respect to filling of vacancies, removal of members, length of service, political party office and compensation shall be applicable to advisory committee members, and are incorporated herein by reference.

* * *

Section 2. Article XXI of the act is repealed:

[ARTICLE XXI
POWERS AND DUTIES OF THE DEPARTMENT
OF HEALTH AND ITS DEPARTMENTAL
ADMINISTRATIVE AND ADVISORY BOARDS

Section 2101. Powers and Duties in General.--(a) The Department of Health shall, subject to any inconsistent provisions in this act contained, continue to exercise the powers and perform the duties by law vested in and imposed upon the said department, the former bureaus thereof, the Commissioner of Health, and the Secretary of Health.

(b) The Department of Health shall permit any laboratory certified pursuant to the Clinical Laboratory Improvement Act of 1967 (Public Law 90-174, 81 Stat. 533) that is licensed to perform screening testing of newborn infants in any state and uses normal pediatric reference ranges to conduct the analysis required by section 4(a) of the act of September 9, 1965 (P.L.497, No.251), known as the "Newborn Child Testing Act," as an alternative to the testing laboratory designated by the Department of Health in accordance with section 5 of the "Newborn Child Testing Act." The testing performed by such laboratory must include testing for the newborn diseases as established by law or regulation and shall provide test results and reports consistent with policies, procedures, law and regulations. A testing laboratory designated by the Department of Health or permitted as an alternative under this subsection shall not use or provide blood samples for scientific research without the informed written consent of the parent or guardian of the child.

Section 2102. General Health Administration.--The Department of Health shall have the power, and its duty shall be:

(a) To protect the health of the people of this
Commonwealth, and to determine and employ the most efficient and practical means for the prevention and suppression of disease;

(b) To cause examination to be made of nuisances, or questions affecting the security of life and health, in any locality, and, for that purpose, without fee or hindrance, to enter, examine and survey all grounds, vehicles, apartments, buildings, and places, within the Commonwealth, and all persons, authorized by the department to enter, examine and survey such grounds, vehicles, apartments, buildings and places, shall have the powers and authority conferred by law upon constables;

(c) To order nuisances, detrimental to the public health, or the causes of disease and mortality, to be abated and removed, and to enforce quarantine regulations;

(d) If the owner or occupant of any premises, whereon any nuisance detrimental to the public health exists, fails to comply with any order of the department for the abatement or removal thereof, to enter upon the premises, to which such order relates, and abate or remove such nuisance, as may now or hereafter be provided by law;

(e) For the purpose of collecting or recovering the expense of the abatement or removal of a nuisance, to file a claim, or maintain an action, in such manner as may now or hereafter be provided by law, against the owner or occupant of the premises upon or from which such nuisance shall have been abated or removed by the department;

(f) To revoke or modify any order, regulation, by-law, or ordinance, of a local board of health, concerning a matter which, in the judgment of the department, affects the public health beyond the territory over which such local board has jurisdiction;
(g) To promulgate its rules and regulations.

(h) Whenever, in the opinion of the department, conditions exist in any borough, or any township of the first class, within the Commonwealth, which constitute a menace to the lives and health of the people living outside the corporate limits of such borough or township, or, after it be known to the department that any borough or any township of the first class is without an existing or efficient board of health, to enter and take full charge of and administer the health laws, regulations, and ordinances, of such borough or township, and to continue in charge thereof, until the department shall decide that a competent and efficient board of health has been appointed and qualified for such borough or township and is ready, able, and willing to assume and carry into effect the duties imposed upon it by law, and to collect all expenses incurred by the department in performing its duties hereunder, as may now or hereafter be provided by law;

(i) To take over the administration of the health laws in any such borough or township, at the expense of the department, whenever the borough or township shall request the department to do so, and the department shall deem it advisable to comply with such request;

(j) To prescribe standard requirements for the conduct of the medical inspection of the pupils of the public schools throughout the Commonwealth, and to appoint medical inspectors to make such school inspections, as may now or hereafter be provided by law;

(k) To investigate, hold hearings upon and determine any question of fact regarding the purity of water supplied to the public by any public utility over which the Pennsylvania Public Utility Commission has jurisdiction.
Utility Commission has jurisdiction, whenever said commission shall certify such question to the department.

The findings of the department upon any such questions shall be incorporated in and made a part of the determination or decision of said commission of the controversy or other proceeding in connection with which the question arose and shall be binding upon the parties to such controversy or other proceeding unless either party shall take an appeal from the commission's determination or decision as may now or hereafter be provided by law.

(l) To train and make available appropriate facilities to train certain otherwise qualified State, county and municipal employes in the field of public health work, to become more familiar with, and therefor better understand, the various administrative and technical problems peculiar to public health services.

(m) To make a bacteriological examination and report of any sample of water sent by any person to the department's laboratory at Philadelphia or Pittsburgh. A fee of one dollar ($1.00) shall be charged for the service rendered in making the examination and report.

(n) To designate the Health Care Policy Board to adjudicate appeals, in accordance with 2 Pa.C.S. (relating to administrative law and procedure), of decisions made under Chapters 7 and 8 of the act of July 19, 1979 (P.L.130, No.48), known as the "Health Care Facilities Act." The department shall promulgate regulations establishing appeal procedures to be followed. Until such time as final regulations have been promulgated, procedures set forth in 37 Pa. Code Ch. 197 (relating to practice and procedure) and 1 Pa. Code Part II
(relating to general rules of administrative practice and procedure) shall be followed for these appeals.

Section 2102.1. Recovery of Blood Plasma Proteins.--The Department of Health of the Commonwealth shall have the power, and its duty shall be:

(a) To maintain facilities for, or to contract for, the recovery from out-dated human whole blood and blood from which the cells have been withdrawn of certain proteins useful for immunization, treatment, research and disaster stock-piling purposes.

(b) To make available to research institutions, physicians and hospitals, upon request, blood plasma proteins for research, immunization and treatment.

(c) To maintain facilities for the proper storage of blood proteins for disaster purposes.

(d) To adopt standards for the efficient execution of a blood plasma protein recovery program.

(e) To develop and employ the necessary procedures and to do any and all things necessary to carry out the purposes of this act.

(f) To receive money from any source whatsoever, by gift or otherwise, and to expend such funds for the purpose of carrying out the provisions of this act.

Section 2104. Vital Statistics.--The Department of Health shall have the power, and its duty shall be:

(a) To obtain, collect, compile, and preserve all statistics of marriages, deaths, diseases, of practitioners of medicine and surgery, of midwives, nurses, and undertakers, and of all professions whose occupation is deemed to be of importance in obtaining a complete registration of births, deaths, marriages,
and diseases, or other vital statistics;

(b) To prepare the necessary methods, forms, and blanks, for obtaining and preserving records of registration of births, deaths, marriages, and diseases, and to insure the faithful registration of the same in the townships, boroughs, cities, and counties, of the State, and in the department;

(c) To see that the laws requiring the registration of births, deaths, marriages, and diseases, are uniformly and thoroughly enforced throughout the State, and prompt returns of such registrations made to the department;

(d) With the advice and concurrence of the Advisory Health Board, to make appropriate regulations for the thorough organization and efficiency of the registration of the vital statistics throughout the Commonwealth, and to enforce such regulations;

(e) To issue marriage, birth, and death certificates, and such burial or removal permits, as may now or hereafter be provided by law;

(f) To establish such districts for the registration of vital statistics, and appoint such registrars, deputies, and sub-registrars, as may be necessary, properly to obtain, collect, compile, and preserve the statistics which the department is required to obtain, collect, compile, and preserve. All local registrars, deputies, and sub-registrars, appointed under this section, shall perform such duties as shall be required of them by the department, and shall receive such compensation as may now or hereafter be fixed by law.

Section 2105. Health Districts and Officers.--The Department of Health shall have the power to apportion the Commonwealth into such number of health districts as the department, with the
approval of the Governor, shall decide, and, in each district, to appoint a health officer, who shall, under the direction of the department, handle such matters as may be delegated to him by law or by the Secretary of Health and who shall in connection with the management of the sanitary affairs of the Commonwealth cooperate with the Department of Environmental Resources.

Section 2106. Quarantines.--The Department of Health shall have the power, and its duty shall be:

(a) With the approval and concurrence of the Advisory Health Board, to declare certain diseases to be communicable, in addition to those by law declared so to be, and to establish such regulations for the prevention of the spread of such diseases as the department and the Advisory Health Board shall deem necessary and appropriate;

(b) To establish and enforce quarantines, in such manner, for such period, and with such powers, as may now or hereafter be provided by law, to prevent the spread of diseases declared by law or by the department to be communicable diseases;

(c) To administer and enforce the laws of this Commonwealth with regard to vaccination and other means of preventing the spread of communicable diseases.

Section 2107. Tuberculosis Sanatoria.--The Department of Health shall have the power, and its duty shall be:

(a) To maintain sanatoria, or colonies for the reception and treatment of persons affected or suspected of being affected with tuberculosis;

(b) To approve or disapprove plans and specifications for county hospitals or sanatoria erected for the treatment therein of persons suffering from tuberculosis, as may now or hereafter be provided by law.
(c) To utilize any unused portion of tuberculosis sanatoria in cities of the first class as health care clinics.

Section 2108. Narcotic Drugs.--The Department of Health shall have the power, and its duty shall be, to supervise the enforcement of, and administer, laws regulating the possession, control, dealing in, giving away, delivery, dispensing, administering, prescribing, and use of narcotic drugs.

Section 2111. Advisory Health Board.--The Advisory Health Board shall have the power, and its duty shall be:

(a) To advise the Secretary of Health on such matters as he may bring before it;

(b) To make such reasonable rules and regulations, not contrary to law, as may be deemed by the board necessary for the prevention of disease, and for the protection of the lives and health of the people of the Commonwealth, and for the proper performance of the work of the Department of Health, and such rules and regulations, when made by the board, shall become the rules and regulations of the department;

(c.1) The Advisory Health Board shall make and from time to time revise a list of such communicable diseases against which children shall be required to be immunized as a condition of attendance at any public, private, or parochial school, including any kindergarten, in the Commonwealth. Such list shall be promulgated by the Secretary of Health along with such rules and regulations as may be necessary to insure that such immunization be timely, effective and properly verified;

(d) To prescribe minimum health activities and minimum standards of performance of health services for counties or other political subdivisions.

Section 2114. Alcoholism.--The Department of Health shall
have the power, and its duty shall be:

(a) To investigate the subject of alcoholism in respect to rehabilitation and compile and maintain reliable statistics indicating the effectiveness of any rehabilitation programs carried forward by State-aided clinics for alcoholics, State hospitals and State-aided hospitals receiving alcoholics;

(b) To take such other steps as may be necessary to procure such information and data as may be deemed helpful in the treatment and rehabilitation of alcoholics.

Section 2115. Speech and Hearing Rehabilitation Centers.--The Department of Health shall have power, and its duty shall be:

(a) To provide, maintain, administer and operate speech and hearing rehabilitation centers--

(1) For the diagnosis and treatment of children with or suspected of having hearing loss.

(2) To provide auditory training for preschool children.

(3) To provide consultative services for hard of hearing children of school age and their parents.

(b) The Health Department may purchase such services whenever it is not feasible to provide and maintain such centers.

Section 2116. Cystic Fibrosis Program.--The Department of Health shall have the power, and its duty shall be, to conduct a program of care and treatment of those suffering from cystic fibrosis who are twenty-one or more years of age.

Section 2117. Center for Treatment of Physical and Neuro-developmental Disabilities.--(a) Effective July 1, 1982, a center is hereby established to be managed and controlled by the Pennsylvania State University to provide comprehensive
diagnostic and treatment services for persons with physical and neuro-developmental disabilities amenable to medical, surgical and rehabilitative treatment.

(b) The entire management and control of the affairs of the center, including, without limitation, services, administration, finances and personnel, is hereby vested in the Pennsylvania State University, which may exercise with respect to the center all of the powers and franchises vested by law in the university. The Pennsylvania State University shall, to the extent financially feasible, provide a reasonable volume of services to persons unable to pay therefor.

(c) Effective July 1, 1982, the functions and operations of the Commonwealth of Pennsylvania at the Elizabethtown Hospital for Children and Youth are hereby transferred to the Pennsylvania State University to be performed as a part of the functions and operations of the center established in subsection (a).

(d) All allocations, appropriations, agreements to the extent assignable, leases and personal property of every nature of the Commonwealth which are used, employed or expended in connection with its duties, powers or functions relating to the Elizabethtown Hospital for Children and Youth are hereby transferred to the Pennsylvania State University. All employes, currently covered by a collective bargaining agreement, shall remain Commonwealth employes until termination of its lease. All moneys received by the university for services rendered by the Commonwealth at the Elizabethtown Hospital for Children and Youth prior to July 1, 1982, shall be remitted to the Commonwealth and all accounts payable arising from operations prior to July 1, 1982, shall be paid by the Commonwealth.
Nothing contained herein shall impose upon the university any obligation, claim, demand or cause of action against the Commonwealth arising out of or in connection with the operation of the Elizabethtown Hospital for Children and Youth by the Commonwealth.

Section 2118. Lease Authority.--(a) The Department of General Services, with approval as provided by law, is hereby authorized on behalf of the Commonwealth of Pennsylvania to lease for $1 to the Pennsylvania State University the remaining tracts of land as a unit, together with the improvements situate thereon, known as the Elizabethtown Hospital for Children and Youth, situate in the Township of Mount Joy, Lancaster County, in the Commonwealth of Pennsylvania:

All those four certain tracts of land situate in the Township of Mount Joy, Lancaster County, Pennsylvania, acquired by the Commonwealth of Pennsylvania under and by virtue of the act of May 14, 1925 (P.L.749, No.408), entitled, as amended, "An act providing for the establishing and maintenance of a State hospital and center to provide ambulatory and inpatient services for the diagnosis, evaluation, treatment and rehabilitation of children and youth under age twenty-one who have physical or neuro-developmental disabilities; and making an appropriation," containing on the north side of Pennsylvania Route 230, 253.55 acres, more or less, including parts thereof conveyed to the General State Authority and subject to the limitations on same totaling 3.828 acres for Projects No. GSA 304-1, 2, 3, 4, 5, 6, in the Main Hospital Complex.

Excepting thereout and therefrom three tracts of surplus land with buildings thereon submitted under Article XXIV-A of this act for sale or disposition, No. 1 containing 9 acres and
buildings on both sides of Cassell Road; No. 2 containing a lot,
a residence and garage; No. 3 containing the Superintendent's
Residence and the surrounding land.
(b) The lease shall contain a provision to the effect that
the term thereof shall end not later than the date that the
university informs the Department of General Services that the
leased premises will no longer be in use to perform the
functions and operations of the Elizabethtown Hospital for
Children and Youth.
Section 2119. Finances.--The Commonwealth of Pennsylvania
hereby pledges its financial support to the Pennsylvania State
University for the operation of the center at the Elizabethtown
Hospital for Children and Youth until the termination of the
lease, as provided in section 2118. In the event that the
Commonwealth of Pennsylvania does not make annual appropriations
during the term of the lease to the university in amounts not
less than the amount appropriated for fiscal year 1981-1982 to
the Department of Health for the operation of the Elizabethtown
Hospital for Children and Youth, such amounts to escalate to
reflect any annual increase in the General Fund Budget of the
Commonwealth, the university may reduce or eliminate services of
the center.
Section 2120. Additional Powers and Duties of the
Department.--The Department of Health shall have the power and
its duty shall be to carry out those powers and duties conferred
upon the Secretary of Health and the Department of Health under
the act of April 14, 1972 (P.L.233, No.64), known as "The
Controlled Substance, Drug, Device and Cosmetic Act."
Notwithstanding any provision of "The Controlled Substance,
Drug, Device and Cosmetic Act," loperamide hydrochloride is
expressly deemed not to be a controlled substance within the
meaning of section 4 of that act.

Section 2121. Exception to Certificate of Need.--
Notwithstanding the provisions of the act of July 19, 1979
(P.L.130, No.48), known as the "Health Care Facilities Act," in
1982, the General Assembly found need for the construction of a
hospital addition at the Milton S. Hershey Medical Center. The
Department of Health shall not require a certificate of need for
the hospital addition authorized in section 1.B.II. of the act
of December 6, 1982 (P.L.771, No.222), entitled "A supplement to
the act of July 1, 1981 (P.L.142, No.47), entitled 'An act
providing for the capital budget for the fiscal year 1981-1982,
' itemizing public improvement and furniture and equipment
projects to be constructed or acquired by the Department of
General Services together with their estimated financial cost,
authorizing the incurring of debt without the approval of the
electors for the purpose of financing the projects to be
constructed or acquired by the Department of General Services,
stating the estimated useful life of the projects, repealing
projects and making appropriations," and section 2(3)(xv)(K) and
(L) of the act of May 18, 1984 (P.L.263, No.62), entitled "A
supplement to the act of December 20, 1983 (P.L.288, No.76),
entitled 'An act providing for the capital budget for the fiscal
year 1983-1984,' itemizing public improvement projects,
furniture and equipment projects, redevelopment assistance
projects and transportation assistance projects to be
constructed or acquired or assisted by the Department of General
Services, the Department of Transportation, the Department of
Community Affairs or the Pennsylvania Fish Commission, together
with their estimated financial cost; authorizing the incurring
of debt without the approval of the electors for the purpose of financing the projects to be constructed or acquired or assisted by the Department of General Services, the Department of Transportation or the Department of Community Affairs; stating the estimated useful life of the projects; authorizing issuing officials to undertake limited temporary borrowing through negotiated settlements; and making an appropriation," nor shall a certificate of need for the development and construction of the hospital addition be required and such hospital addition shall be exempt from the certificate of need provisions of the "Health Care Facilities Act."

Section 2122. Expiration of Certificate of Need Process Generally.--The certificate of need process established under the act of July 19, 1979 (P.L.130, No.48), known as the "Health Care Facilities Act," shall expire December 31, 1992, unless sooner extended by the General Assembly pursuant to the review procedure set forth in the act of December 22, 1981 (P.L.508, No.142), known as the "Sunset Act." The certificate of need process may not be used after December 31, 1992, unless this expiration date is extended by statutory amendment.

Section 2123. Residential Drug and Alcohol Treatment Programs for Pregnant Women and Mothers and Their Dependent Children.--(a) The Department of Health shall have the power, and its duty shall be, to make grants or contracts to provide residential drug and alcohol treatment and related services for pregnant women, mothers and their dependent children and mothers who do not have custody of their children where there is a reasonable likelihood that the children will be returned to them if the mother participates satisfactorily in the treatment program. Grant or contract moneys shall only be used for
treatment and related services provided to residents of this
Commonwealth by drug and alcohol treatment programs licensed by
the Department of Health which provide the following services:
(1) Residential treatment services for women and their
children, subject to reasonable limitations on the number and
ages of the children, provided in a therapeutic community
setting and including, but not limited to:
(i) onsite addiction and substance abuse education,
counseling and treatment;
(ii) onsite individual, group and family counseling;
(iii) onsite drug and alcohol prevention and education
activities for children approved by the Office of Drug and
Alcohol Programs of the Department of Health;
(iv) onsite special counseling for children of alcoholics
and addicts;
(v) involvement with Alcoholics Anonymous, Narcotics
Anonymous, support groups for children of alcoholics and addicts
and other support groups; and
(vi) activities which enhance self-esteem and self-
sufficiency.
(2) Onsite parenting skills counseling and training.
(3) Access to school for children and mothers where
appropriate, including, but not limited to, securing documents
necessary for registration.
(4) Job counseling and referral to existing job training
programs.
(5) Onsite day care for children when the mother is
attending counseling, school or a job training program and when
the mother is at a job or looking for a job and at other times
as the department deems appropriate.
Referral and linkage to other needed services, including, but not limited to, health care.

Onsite structured reentry counseling and activities.

Referral to outpatient counseling upon discharge from the residential program.

(b) The Department of Health shall inform the single county authorities of those programs in their jurisdiction being considered for funding to provide the services listed in this section and shall give the single county authorities an opportunity to comment on these funding proposals prior to the department making a decision to award funding.

(c) The Department of Health shall require programs receiving funds under this section to collect and provide to the department information concerning the number of women and children denied treatment or placed on waiting lists and may require such data and other information as the department deems useful in determining the effectiveness of the treatment programs. Confidentiality of records regarding identifiable individuals enrolled in treatment programs funded under this section shall be maintained.

(d) Contributions by counties or single county authorities shall not be required as a condition for receiving grants for programs funded under this section, but the Department of Health may require counties or single county authorities to make commitments to provide outpatient intervention, referral and aftercare services to women whose residential treatment is funded under this section upon completion of their residential treatment.

(e) The Department of Health shall annually convene a meeting of all recipients of funds for programs funded under
this section and other interested parties so that the department
may receive input regarding ways to improve and expand treatment
services and prevention activities for pregnant women, mothers
and young children.

(f) The Department of Health shall report annually to the
Governor and the General Assembly as to its activities and
expenditures under this section, the activities of recipients of
funds under this section, the number of women and children
served, the number of women and children denied treatment or
placed on waiting lists, the recommendations in summary form
made at the annual meeting provided for in subsection (e) and
the recommendations of the department.

(g) As used in this section and section 2124, the term
"single county authority" means the agency designated to plan
and coordinate drug and alcohol prevention, intervention and
treatment services for a geographic area which may consist of
one or more counties and to administer the provisions of such
services funded through the agency.

(h) As used in this section, the term "therapeutic community
setting" means a drug-free, residential, nonhospital treatment
program using therapeutic community principles as the underlying
philosophy.

Section 2124. Staff Training and Referral Mechanisms.--The
Department of Health shall have the power, and its duty shall
be:

(a) To establish, on a demonstration basis, programs to
train the staff of child protective services agencies,
counseling programs and shelters for victims of domestic
violence, recipients of funds under the High Risk Maternity
Program or the Federal Maternal and Child Health Block Grant and
community or State health care centers in order to identify
those pregnant women and mothers, for whom these agencies are
already providing services, who are in need of drug or alcohol
treatment; and
(b) To establish referral networks and mechanisms between
these agencies and the single county authorities and appropriate
drug and alcohol treatment programs.

Section 2125. Anatomical Gifts.--In addition to the powers
and duties of the Department of Health relating to anatomical
gifts, the Department of Health shall continue the rotation of
referrals to tissue procurement providers started under 20
Pa.C.S. Ch. 86 (relating to anatomical gifts). Adjustments to
such rotation may be made to accommodate new, quality tissue
procurement providers accredited by the American Association of
Tissue Banks as adjudged under the guidelines published in 26
Pa.B. 2044 (April 27, 1996), and that any hospital may
discontinue such rotation for cause.]

Section 3. The definition of "department" in section 2102-A
of the act is amended to read:

Section 2102-A. Definitions.--The following words and
phrases when used in this article shall have the meanings given
to them in this section unless the context clearly indicates
otherwise:

"Department" shall mean the Department of Health and Human
Services of the Commonwealth.

* * *

Section 4. Articles XXII-A, XXIII and XXIII-A of the act are
repealed:

[ARTICLE XXII-A

DEPARTMENT OF AGING

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Section 2201-A. Objectives.--The objectives of this article are:

(1) to establish a cabinet-level State agency whose jurisdiction, powers and duties specifically concern and are directed to advancing the well-being of Pennsylvania's older citizens;

(2) to effect the maximum feasible coordination of, and eliminate duplication in, the Commonwealth's administration of certain Federal and State programs for older Pennsylvanians;

(3) to further promote the efficient delivery of certain social and other services to older Pennsylvanians; and

(4) to promote the creation and growth of independent clubs and associations of older Pennsylvanians and related activities which give promise of assisting older persons to maintain lives of independence and dignity; involvement in the social, economic and political affairs of their communities; and dignified and efficient assistance when disabled or impaired.

Section 2202-A. Definitions.--As used in this article:

"Area agency" means the single local agency designated by the department within each planning and service area to administer the delivery of a comprehensive and coordinated plan of social and other services and activities.

"Area plan" means the plan submitted to the department by an area agency describing the methods by which it will ensure a coordinated and comprehensive plan of social and other services and activities in the planning and service area.

"Council" means the Pennsylvania Council on Aging.

"Department" means the Department of Aging.

"Domiciliary care" is a protected living arrangement in the community which provides a safe, supportive, homelike
residential setting for three or less adults who are unrelated
to the domiciliary care provider, who cannot live independently
in the community, and who are placed by an area agency.

"Federal Older Americans Act of 1965" means Public Law 89-73,

"Long-term care" means those services designed to provide
diagnostic, therapeutic, rehabilitative, supportive or
maintenance services for individuals who have chronic functional
impairments in a variety of institutional and noninstitutional
care settings, including the home.

"Older adults, older persons, aged, aging, elderly" mean
those persons residing within Pennsylvania who are age sixty or
over, or other individuals authorized by law.

"Planning and service area" means the geographic unit within
the State, as authorized by the Federal Older Americans Act of
1965, as amended, for allocation of funds for the delivery of
social services.

"Secretary" means the Secretary of Aging.

"Sole State agency" means the Department of Aging.

"Unit of general purpose local government" means, as used
with reference to the designation of area agencies on aging, a
county or other unit which carries general government authority
for an area designated as a planning and service area under this
act or a combination of such units.

Section 2203-A. Powers and Duties in General.—(a) The
Department of Aging hereinafter referred to in this article as the
department shall, subject to any inconsistent provisions in this
act contained, have the power and its duty shall be to:

(1) Evaluate the need for services for the aged within the
State and determine the extent to which public and private
programs meet such a need with special emphasis on the needs and participation of the minority elderly.

(2) Assist with planning and provide consultation to State agencies with respect to services, programs and activities which they may furnish to older citizens.

(2.1) Develop and periodically update in consultation with the council and the area agencies, a comprehensive plan for coordinating all major Commonwealth services, programs and activities which are directed towards persons with chronic physical or mental impairments which necessitate long-term care.

(3) Provide for services to the aging through area agencies for the aging and other appropriate agencies, organizations and institutions authorized in accordance with Federal Older Americans Act of 1965, related Federal acts, and applicable State law and to stimulate services and opportunities for the aging which are not otherwise available.

(4) Function as the sole State agency to receive and disburse Federal funds under the Older Americans Act of 1965 and State funds made available for providing services to older persons.

(5) Develop and administer the State plan for the aging required by Federal law.

(5.1) Administer the act of November 4, 1983 (P.L.217, No.63), known as the "Pharmaceutical Assistance Contract for the Elderly Act."

(6) Serve as an advocate for the aging at all levels of government and to provide consultation and assistance to the area agencies, communities and civic groups developing local services for older persons.

(7) Maintain a clearinghouse of information related to the
interests of older persons and provide technical assistance and
counselation to all agencies, both public and private with
respect to programs and services for older persons.

(8) Prepare for the Governor an annual budget as may be
reasonably required to address the needs of the Pennsylvania
Council on Aging and its regional councils.

(9) Promote, utilizing, wherever possible, the area
agencies, community education regarding the problems of older
persons through institutes, publications, and use of
communications media.

(10) Cooperate with area agencies and agencies of the
Federal Government in studies and conferences designed to
examine the needs of the aging population and to assist in
preparing programs and developing facilities to meet those
needs.

(11) Promote and support programs, studies and policies, in
cooperation with the Departments of Labor and Industry,
Education, Community and Economic Development, Public Welfare
and other agencies, which will enhance the opportunity for
continued work, education and training for older persons and for
preretirement assistance where appropriate.

(12) Promote, through the use of area agencies and direct
grants, contracts and technical assistance, the development of
independent senior centers, service organizations, clubs,
associations and organizations dedicated to the rights and needs
of older persons when these are not in conflict with State or
area plans for the aging.

(13) Make recommendations for legislative action to the
Governor and the General Assembly.

(14) In coordination with the area agencies and the council,
develop and conduct research, demonstration programs and
training programs to advance the interests of older persons.

(15) Publish a description of the organization and function
of the department so that all interested agencies and
individuals may be better able to solicit assistance from the
department.

(16) Administer and supervise a domiciliary care program for
adults.

(17) Conduct, in cooperation with appropriate State and
local public and private agencies studies and evaluations
pertaining to the quality of life, health and social needs,
civil rights and status of older persons residing in personal
care homes and similar residencies and report such findings and
recommendations to the General Assembly.

(17.1) In cooperation with the area agencies and Federal,
State and local organizations and agencies, work toward the
development of a continuum of community-based service and
housing options for impaired and chronically ill older persons
designed to maintain them in the community and avoid or delay
institutional care. System development activities shall include,
but not be limited to, coordinating the Commonwealth's plans for
the provision, expansion and effective administration of:

(i) Personal care and health-related provided to adults in
their homes.

(ii) Housing options such as service-assisted housing
options and personal care homes.

(iii) Special supports to caregivers who care for impaired
older persons.

(iv) Adult day-care services, respite services and other
community-based services to support care by caregivers.
(v) The promotion of informal community supports.

(vi) Geriatric assessment and nursing home screening programs.

(vii) Special services to protect the health, safety and welfare of older persons who lack the capacity to protect themselves.

(viii) Special advocacy efforts to promote greater awareness of, and more effective response to, the problems of persons with Alzheimer's disease and other related brain disorders.

To the extent that the needs of other adults involve and overlap the needs of older persons addressed by this paragraph, the department shall serve as an advocate for adults of any age.

(17.2) In cooperation with the Department of Health and the Department of Public Welfare:

(i) Develop and administer a system of preadmission assessment for persons who are at risk of needing institutional care, if the Governor finds such a system cost effective.

(ii) Develop and administer a system of managed community-based long-term care for persons who are assessed as being clinically eligible for nursing home care and who can be cared for within cost-of-care guidelines established by the department, if the Governor finds such a system cost effective.

(18) Review all proposed Commonwealth program plans and policies, and administrative regulations that are published in the Pennsylvania Bulletin for their impact on older persons. Where the secretary believes that they have an impact on older persons, he shall comment in accordance with the provisions of the Commonwealth Documents Law.
(19) Make and enforce rules and regulations necessary and proper to the performance of its duties.

(20) After July 1, 1979 and at the option of the secretary, to administer those provisions of the act of January 22, 1968 (P.L.42, No.8), known as the "Pennsylvania Urban Mass Transportation Assistance Law of 1967," which relate to special transit programs for the elderly. The secretary shall confer with the Department of Transportation in order to insure that the regulations promulgated by the Department of Aging do not conflict with those promulgated by the Department of Transportation.

(21) Serve as an advocate for the needs of the adult handicapped as such needs involve and overlap the needs and services of older persons.

(22) Cooperate with the Pennsylvania Office of Planning in the development of local, regional and Statewide solutions to the needs of older persons.

(23) Review the activities of regulatory agencies of the Commonwealth which affect the full and fair utilization of State and community resources for programs and benefits for older persons and initiate programs which will help assure such utilization.

(24) Conduct, in cooperation with the Department of Health and the Department of Public Welfare, periodic studies and evaluations pertaining to the quality of care and related services for consumers of long-term care services and report such findings to the General Assembly.

(24.1) Conduct, in cooperation with the Department of Health, an ongoing Statewide prescription drug education program designed to inform older adults of the dangers of prescription
drug abuse and misuse.

(24.2) Establish and administer a State Long-Term Care Ombudsman Program, including providing resources to area agencies on aging or other contractors to investigate and resolve complaints related to the health, safety or rights of older individuals who are consumers of long-term care services and to prepare and submit to the General Assembly an annual report containing data and findings regarding the types of problems experienced and complaints investigated.

(25) Collaborate with Department of Community Affairs and the Pennsylvania Housing Finance Agency in the location, design, management and services of housing built for older persons and upon request provide technical assistance to local housing authorities, nonprofit housing and community groups, redevelopment authorities, and other groups with a special emphasis on programs on utility costs, rehabilitation and maintenance of the homes of older persons.

(26) Review and comment on all rules, regulations, eligibility or payment standards issued by the Departments of Public Welfare, Environmental Protection or Labor and Industry relating to the licensure and regulation of nursing homes, hospitals, and other health facilities; medical assistance, supplemental security income; homemaking and home-health care or residential care facilities for older adults. Said rules, regulations and standards shall not take effect until they have been submitted to the department for comment.

(27) Review and comment on rules, regulations, eligibility standards, or contract provisions issued by the Departments of Revenue and Transportation relating to activities financed in whole or in part by the Pennsylvania Lottery. Said rules,
regulations, eligibility standards and contract provisions shall not take effect until they have been submitted to the department for comment.

(28) Review and comment on rules, regulations, eligibility standards or contract provisions issued by the Department of Transportation relating to specialized transportation needs of the elderly and the handicapped in rural and urban areas. Said rules, regulations, eligibility standards or contract provisions shall not take effect until they have been submitted to the department for comment.

(29) Provide for services to adults under age sixty whose needs for services are similar to those for which the department is responsible with respect to older persons and as may be specifically authorized by law.

(b) In filling vacancies authorized to the department, the secretary shall assure that preference is given to persons sixty years of age or older.

Section 2204-A. Pennsylvania Council on Aging.--(a) There is hereby created in the Office of the Governor the Pennsylvania Council on Aging which shall consist of twenty-one persons at least eleven of whom shall be sixty years of age or older, and which shall include the chairpersons of the regional councils on aging. Eleven members of the Pennsylvania Council shall constitute a quorum for the conduct of matters which come before it. Absence of a member at three consecutive meetings shall result in the member forfeiting his seat, unless he requests in writing and receives approval from the chairman for an absence necessitated by illness of the member or the death of a loved one.

(b) The members of the council shall be nominated by the
Governor, subject to the consent of a majority of the members elected to the Senate, and shall represent, as far as possible, different geographical sections of the Commonwealth. In addition, the council shall include representatives of long-term care providers such as, for example, adult day-care providers. The members shall serve staggered three-year terms and shall serve until their successors are appointed and qualified. Members shall be eligible for reappointment.

(c) The council shall provide for its organization and procedure including the selection of a chairman and such other officers as deemed necessary.

(d) The members of the council shall receive no compensation for their services on the council but shall be reimbursed by the department, in accordance with regulations, for any ordinary and necessary expenses incurred in the performance of their duties.

(e) The council shall meet at least six times per year to review and comment upon all reports of the Department of Aging to the Governor and the General Assembly.

(f) The council shall have the following powers and duties:

(1) Assist the department in the preparation of the State plan on aging.

(2) To review and comment on rules and regulations promulgated by the department.

(3) To prepare and submit to the Governor, the General Assembly, the Secretary of the Department of Aging and the public reports evaluating the level and quality of services and programs provided to the aging by Commonwealth agencies together with recommendations for improved, expanded or additional programs and services for the aging.

(4) To carry out public hearings on matters affecting the
rights and interests of the aging including matters involving
cases of neglect, abuse and age discrimination against older
persons in the administration of the laws of the Commonwealth
and its political subdivisions.
(5) To carry out studies in the areas of age discrimination,
health care, Medical Assistance program policies affecting the
elderly, duration-of-stay contracts for nursing homes, health-
related insurance increases and, as appropriate, other major
issues affecting the aging and to report to the Governor, the
General Assembly, the secretary and the public its findings and
recommendations in regard to appropriate action and a long-term
strategy for an appropriate manner in which to address these
issues.
(6) Consult with the secretary regarding the operations of
the department.
(7) To establish no more than five regional councils on
aging which shall consist of fifteen citizen members and
concerning which the composition, members' terms of offices,
organization and duties and responsibilities shall be determined
by the council.
(8) Employ, with such funds as are annually appropriated by
the General Assembly, sufficient staff and services to carry out
these duties and powers as well as the duties and powers of the
regional councils.

Section 2205-A. Planning and Service Area.--The Commonwealth
is currently divided into planning and service areas. These
geographical subdivisions are established by the authority of
the secretary under the Federal Older Americans Act of 1965, and
may only be changed by order of the secretary under provisions
set forth by the department for combining or dividing
geographical areas to bring about more effective and efficient planning and service delivery.

Section 2206-A. Designated Area Agencies.--For each planning and service area there shall be an area agency designated by the department in accordance with the Federal Older Americans Act of 1965, as amended, to serve as a focal point in the community for the coordination of services for older people and for the issues and concerns of aging. An area agency so designated must be (i) an established office of aging; (ii) any office or agency of the unit of general purpose local government, which is designated for this purpose by the chief elected officials of the unit of general purpose local government; (iii) any office or agency designated by the chief elected officials of a combination of units of general purpose local government to act on behalf of such combination for this purpose; or (iv) any public or nonprofit private agency in a planning and service area which is under the supervision or direction for this purpose of the designated State agency and which can engage in the planning or provision of a broad range of social services within such planning and service area; and must provide assurance, found adequate by the department, that it will have the ability to develop and administer an area plan. The secretary may redesignate or designate new area agencies based on established regulations. Such regulations shall include criteria of efficiencies, appropriateness and equity and shall provide for public hearings on redesignation conducted in the affected planning and service areas. Any such determinations of redesignation shall be executed not less than one hundred days prior to the beginning of the fiscal year of the local authority. A designation or redesignation may occur when changes
are made in established planning and service area boundaries, when a currently designated area agency is unable or unwilling to continue as the area agency, when removal of an area agency designation is requested by the local authority with cause shown or when the department determines that a currently designated area agency is incapable of carrying out its approved area plan. The removal of an area agency designation and the designation of a new area agency shall be carried out under regulations promulgated by the department and consistent with the Federal Older Americans Act of 1965. For the purpose of this section, the term "local authority" shall mean county commissioners or county council.

Section 2207-A. Area Agencies; Powers and Duties.--(a) The area agency shall have the authority to act as an advocate at all levels of government and within the community at large for the interests of older persons within the planning and service area. It shall develop a comprehensive area plan to coordinate services for older persons within its planning and service area as the department may prescribe by regulation. The area plan shall make provision for:

(1) Information and referral, advocacy programs.
(2) Social service case management and casework services including protective services and placement services.
(3) Transportation services.
(4) Legal counseling and representation.
(5) In-home services including personal care and health-related services.
(6) Assistance to secure adequate housing and health services.
(7) Other services required by Federal law and other such
services and activities designated by the department or identified as critical needs by the area agency and the area agency advisory board. The State plan on aging and grants and contracts provided by the department shall reasonably accommodate such locally designated priorities and critical needs.

(8) The establishment of an affiliated network of multiservice centers and neighborhood centers for older persons. Each center shall provide those services required by the department in accordance with regulations adopted by the department, which regulations shall provide for the maximum involvement of members of such centers and sponsoring organizations in the identification and prioritization of services and activities to be conducted in such centers.

(a.1) The area agency shall be responsible for working toward the development, in cooperation with State and local organizations and agencies, of a continuum of community-based service and housing options for impaired and chronically ill older persons designed to maintain them in the community and avoid or delay institutional care. System development activities shall include, but not be limited to, coordinating area plans for the provision, expansion and effective administration of:

(1) Personal care and health-related services provided to adults in their homes.

(2) Housing options such as service-assisted housing and personal care homes.

(3) Special supports to caregivers who care for impaired older persons.

(4) Adult day-care services, respite services and other community-based services to support care by caregivers.
(5) The promotion of informal community supports.
(6) Geriatric assessment and nursing home screening programs.

(7) Special services to protect the health, safety and welfare of older persons who lack the capacity to protect themselves.

(8) Special advocacy efforts to promote greater awareness of, and more effective response to, the problems of persons with Alzheimer's disease and other related brain disorders.

To the extent that the needs of other adults involve and overlap the needs of older persons addressed by this provision, the area agency shall serve as an advocate for adults of any age.

(b) The area agency shall give priority of services to older persons with the greatest needs and least resources. Factors identifying older persons who are entitled to priority are:

(1) Functional disability, i.e., severe restriction of ability to carry out daily activities.
(2) Aloneness, i.e., living alone in a private apartment or home unaccompanied by a related adult.
(3) Advanced age, i.e., seventy-five years of age or above.
(4) Low income.
(5) Services to minorities in proportion to their numbers consistent with the provisions of the Human Relations Act.
(6) Inadequate housing.
(7) Lack of access to recreational and social activities.

(c) In carrying out this section, the area agency shall provide preference in filling all jobs for persons of age sixty and above in accordance with the regulations promulgated by the department.
(d) Consistent with the Federal Older Americans Act of 1965 and provisions set forth by the department, the area agency may grant to or contract with any public or private agency for the provision of social services. The area agency is authorized to use, with their consent, the services, equipment, personnel and facilities of Federal and State agencies, with or without reimbursement, and on a similar basis to cooperate with other public and private agencies, and instrumentalities, in the use of services, equipment and facilities.

Section 2208-A. Area Agency Advisory Councils.--In each planning and service area, an advisory council of at least fifteen members shall be appointed to advise the area agency with regard to the needs of older persons residing in the planning and service area and the area agency's responses to those needs. The composition and responsibility of the area agency advisory council shall be consistent with the provisions of the Federal Older Americans Act of 1965 and the regulations of the department. As a minimum, these regulations shall require that each council be composed of a majority of persons above the age of sixty. Such councils shall be given the maximum possible opportunity to influence local programs and policies and advocacy roles within area agency programs and local communities. Area agencies shall provide advisory councils with the funds necessary to carry out their functions.

Section 2209-A. Area Agencies; Reports and Plans.--(a) Under provisions set forth by the department, the area agency shall submit to the department a comprehensive area plan on aging which clearly explains the area agency's objectives for providing services to the aging of the planning and service area. This plan may be submitted as part of a coordinated county
human service plan, provided that the format is approved by the
department.

(b) Each area agency, under provisions set forth by the
department, shall submit an annual report which describes and
evaluates its programs and services after the close of each year
of funding by the department.

Section 2210-A. Allocation of Resources.--(a) The area
agency shall receive a basic allocation of resources, consisting
of State and Federal funds weighted by the proportion of older
poor persons who reside in the planning and service area in
relation to the total number of older poor persons who reside in
the Commonwealth of Pennsylvania utilizing poverty threshold
income standards as determined by the United States Office of
Management and Budget except that each area agency shall be held
harmless to the amount of State funds received in the preceding
program year.

(b) The department may allocate additional resources to area
agencies based upon the total number of older persons who reside
within the planning and service area, the availability of
transportation services, the rural-urban distribution of older
persons, and attendant rural program cost differentials, the
need for social and medical services, the amount of funds
devoted by county commissioners for older persons and other
special circumstances as determined by the secretary.

(c) Funds appropriated to carry out the purposes of this act
shall be distributed to the local authorities or nonprofit
agencies as grants or cost reimbursement for services to the
aging, if there is an acceptable plan in accordance with section
2209-A.

Section 2211-A. Evaluation.--The Department of Aging shall
continually review and evaluate the activities of area agencies and the impact and effectiveness of all programs under this act. The department shall ensure that evaluations, including an onsite evaluation, be made annually of all area agency activities and programs. A written report of the findings of the evaluation shall be submitted to the area agency subject to the evaluation and within thirty days shall be available to the public. In all evaluations, the department shall obtain the views of program beneficiaries concerning strengths and weaknesses of the program. Other departments and agencies of the Commonwealth shall make available to the department information necessary for such evaluations. Annually the department shall submit to the Governor and the General Assembly a report on its activities including statistical data reflecting services and activities provided older persons during the preceding fiscal year.

Section 2212-A. Demonstration Programs.--In recognition of the need for expanded knowledge and experience concerning the status of older persons in Pennsylvania, the Secretary of Aging may provide for research and demonstration programs for the purpose of:

(1) Studying current living conditions and needs of older persons, with special emphasis on persons with low income, medical and functional disabilities, advanced age and isolated living situations.

(2) Studying existing methods and alternatives for providing services, programs and opportunities to older persons.

(3) Identifying those factors of particular detriment or benefit to the welfare of older persons.

(4) Developing new approaches and alternatives for living
arrangements, social services, institutional care, health services, legal representation and the coordination of community services for older persons.

Section 2213-A. Pharmacy Reimbursement.--An immediate in-depth pharmacy service study shall be performed by the Department of Aging and the Department of Public Welfare. This pharmacy study shall determine the full cost of filling a prescription and providing pharmacy services, including reasonable profits derived, in the Pennsylvania Medicaid and PACE programs. This study shall be considered in determining pharmacy reimbursement.

ARTICLE XXIII
POWERS AND DUTIES OF THE DEPARTMENT OF PUBLIC WELFARE AND ITS DEPARTMENTAL ADMINISTRATIVE AND ADVISORY BOARDS AND COMMISSIONS

Section 2301. Powers and Duties in General.--The Department of Public Welfare shall, subject to any inconsistent provisions in this act contained, continue to exercise the powers and perform the duties by law vested in and imposed upon the said department, the Secretary of Public Welfare, and the former Department of Public Welfare, and Commissioner of Public Welfare, and the former Department of Welfare.

Section 2313. Mental Health.--The Department of Public Welfare shall have the power and its duty shall be:

(a) To administer and enforce the laws of this Commonwealth relative to mental health, the care, prevention, early recognition and treatment of mental illness, mental defects, epilepsy, and inebriety, the licensing and regulation of institutions for the mentally ill, mentally defective and
epileptic, the admission and commitment of patients to such
institutions and the transfer, discharge, escape, interstate
rendition, and deportation of such patients.
(b) Subject to any inconsistent provisions in this act
contained, approve or disapprove the advice and recommendations
of the several boards of trustees of State mental institutions.
Section 2313.4. Operation of Eastern Pennsylvania
Psychiatric Institute.—The Department of Public Welfare is
hereby authorized to relinquish the entire government,
management, operation and control of the Eastern Pennsylvania
Psychiatric Institute to The Medical College of Pennsylvania
upon the effective date of a lease entered pursuant to section
2418.
(1) Upon the execution of the lease permitted pursuant to
section 2418, the Eastern Pennsylvania Psychiatric Institute
shall be operated under the management of the Board of
Corporators of The Medical College of Pennsylvania, which shall
be responsible for the management and operation of the
institute.
(2) The Medical College of Pennsylvania shall conduct
research into the causes, prevention, treatment and cure of
mental, neurological and related disorders and shall provide
consultation, education, training and treatment at the Eastern
Pennsylvania Psychiatric Institute responsive to the mental
health needs of the public. Provision of these services and the
conduct of research shall be limited only by funds available for
these purposes. In addition to requesting appropriations from
the General Assembly to fund these functions, the Board of
Corporators of The Medical College of Pennsylvania shall make
good faith efforts to obtain funding from third party sources.
(3) The Medical College of Pennsylvania shall utilize all space in the buildings known as the Eastern Pennsylvania Psychiatric Institute consistent with the functions described in this section. If The Medical College of Pennsylvania uses space in the Eastern Pennsylvania Psychiatric Institute for functions other than those described, it shall provide the Department of Public Welfare with written documentation that an equivalent amount of space is used in other facilities of The Medical College of Pennsylvania for those functions.

(4) The Medical College of Pennsylvania may construct buildings on vacant land of the leased premises if the buildings are consistent with the academic health mission of The Medical College of Pennsylvania.

Section 2327. Powers and Duties of the State Board of Public Welfare.—The State Board of Public Welfare shall be an advisory body to, and a consultative body of the Department of Public Welfare with no power to approve or disapprove rules or regulations, and shall have the power and its duty shall be:

(a) To participate in the development of broad outlines, of policy and in the formulation of long-range programs and objectives of the Department of Public Welfare,

(b) To interpret such programs and objectives to the public, and

(c) To advise the Secretary of Public Welfare, the Governor and the General Assembly, with respect to the policies, programs, objectives and functioning of the Department of Public Welfare.

Section 2328. Powers and Duties of Advisory Committees.—The Advisory Committee for the Blind, the Advisory Committee for General and Special Hospitals, the Advisory Committee for
Children and Youth, the Advisory Committee for Public Assistance and the Advisory Committee for Mental Health and Mental Retardation, shall, concerning matters within their respective special fields of interest, have the power and their duty shall be:

(a) To advise the appropriate major program unit of the Department of Public Welfare. This advice shall include, but shall not be limited to, such matters as standards of eligibility, nature and extent of service, amounts of payments to individuals, standards of approval, certification and licensure of institutions and agencies, ways and means of coordinating public and private welfare activities, and such other matters as may, by law, require citizen review or may be referred to the committees by the departmental units advised by them; and the Advisory Committee for Mental Health and Mental Retardation shall also have the power and duty to advise the Governor and the Secretary of Public Welfare with regard to the appointment of the Commissioner of Mental Health.

(b) To arrange for and conduct such public hearings as may be required by law or which they deem necessary and advisable,

(c) To promote better public understanding of the programs and objectives of the departmental units advised by them, and

(d) To make recommendations to the State Board of Public Welfare on matters referred to the committees for consideration and advice, or as may be required to promote the effectiveness of the programs, of the departmental units advised by them.

Section 2333. Domestic Violence and Rape Victims Services.--

(a) The General Assembly finds that the public health and safety is threatened by increasing incidences of domestic violence and rape. Domestic violence programs and rape crisis
programs provide needed support services for victims and assist
in prevention through community education. Therefore, the
General Assembly finds that it is in the public interest for the
Commonwealth to establish a mechanism to provide financial
assistance to domestic violence centers and rape crisis centers
for the operation of domestic violence and rape crisis programs.

(b) Where any person after the effective date of this
section pleads guilty or nolo contendere to or is convicted of
any crime as herein defined, there shall be imposed, in addition
to all other costs, an additional cost in the sum of ten dollars
($10) for the purpose of funding the services as described in
this section. Such sum shall be paid over to the State Treasurer
to be deposited in the General Fund. Under no condition shall a
political subdivision be liable for the payment of the ten
dollars ($10) in additional costs.

(c) The Department of Public Welfare shall make grants to
domestic violence centers and rape crisis centers for the
operation of domestic violence programs and rape crisis programs
consistent with this section. In awarding grants, the Department
of Public Welfare shall consider the population to be served,
the geographical area to be serviced, the scope of the services,
the need for services and the amount of funds provided from
other sources.

(d) The Department of Public Welfare shall make available at
cost to the public copies of applications that have been
submitted or approved for funding and reports on any fiscal or
programmatic reviews of funded programs.

(e) As used in this section, the following words and phrases
shall have the meanings given to them in this subsection:
"Crime" means an act committed in Pennsylvania which, if
committed by a mentally competent, criminally responsible adult, who had no legal exemption or defense, would constitute a crime as defined in and proscribed by Title 18 of the Pennsylvania Consolidated Statutes (relating to crimes and offenses) or enumerated in the act of April 14, 1972 (P.L.233, No.64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."

However, no act involving the operation of a motor vehicle which results in injury shall constitute a crime for the purpose of this section unless such injury was intentionally inflicted through the use of a motor vehicle.

"Domestic violence" means the occurrence of one or more of the following acts between family or household members:

(1) Intentionally, knowingly or recklessly causing or attempting to cause bodily injury.

(2) Placing, by physical menace, another in fear of imminent serious bodily injury.

"Domestic violence center" means an organization, or the coordinating body of an organization, which has as its primary purpose the operation of domestic violence programs.

"Domestic violence program" means a program which has as its primary purpose the provision of direct services to victims of domestic violence and their children, including, but not limited to, victim advocacy, counseling, shelter, information and referral, victim-witness, accompaniment, community education and prevention.

"Rape crisis center" means an organization, or the coordinating body of an organization, which has as its primary purpose the operation of rape crisis programs.

"Rape crisis program" means a program which has as its primary purpose the provision of direct services to victims of
sexual assault, including, but not limited to, crisis intervention, counseling, victim advocacy, information and referral, victim-witness and assistance, accompaniment through the medical, police and judicial systems as well as providing education and prevention programs on rape and sexual assaults.

"Sexual assault" means any conduct which is a crime under 18 Pa.C.S. Ch. 31 (relating to sexual offenses).

Section 2334. Medical Assistance Payments.--(a) It is the general purpose of this section to provide for a continuum of alcohol and drug detoxification and rehabilitation services to persons eligible for medical assistance. Facilities serving as appropriate treatment settings include hospital and nonhospital drug detoxification and rehabilitation facilities, hospital and nonhospital alcohol detoxification and rehabilitation facilities, and hospital and nonhospital drug and alcohol detoxification and rehabilitation facilities and outpatient services licensed by the Office of Drug and Alcohol Programs of the Department of Health. The General Assembly recognizes that the fluctuating nature of alcohol and drug dependency, in combination with the associated physical complications often arising from long-term use of alcohol and drugs, necessitates that a variety of treatment modalities and settings be made available to persons eligible for medical assistance. The availability of a new service in this area is in no way intended to limit access to or funding of services available currently. 

(b) Consistent with section 2301, the Department of Public Welfare shall:

(1) Provide, on behalf of persons eligible for medical assistance, medical assistance coverage for detoxification, treatment and care in a nonhospital alcohol detoxification
facility, nonhospital drug detoxification facility, nonhospital alcohol and drug detoxification facility, or a nonhospital treatment facility which can provide services for either drug or alcohol detoxification or treatment or for both, provided that the facility is licensed by the Office of Drug and Alcohol Programs in the Department of Health.

(2) Use criteria developed by the Office of Drug and Alcohol Programs for governing the type, level and length of care or treatment, including hospital detoxification, as a basis for the development of standards for services provided under clause (1).

(3) Notwithstanding clause (1), provide by regulation for gradual implementation of medical assistance coverage under this subsection to client populations which shall be identified in cooperation with the Department of Health. The regulations shall provide for full implementation of clause (1) to all medical assistance eligibles in phases over a period of time not to exceed five years from the effective date of the regulations. The program phases shall be structured so as to allow for independent evaluation of each phase on an ongoing basis. Initial regulations adopted pursuant to this subsection shall not be subject to review pursuant to the act of June 25, 1982 (P.L.633, No.181), known as the "Regulatory Review Act," except that the regulations may be reviewed under section 5(h) of that act.

(c) The Department of Public Welfare, the Department of Health and the Office of Drug and Alcohol Programs shall jointly provide for an independent evaluation of the program authorized by this section in accordance with specific evaluation criteria, which shall include, but not be limited to: (i) comparison of medical costs before and after program implementation; (ii)
employment history; and (iii) involvement with other programs of
the Department of Health, the Department of Public Welfare, the
Department of Corrections and any other appropriate agencies.
The evaluation shall be conducted in compliance with all
applicable Federal and State confidentiality requirements.
Section 2335. Admissions to Drug and Alcohol Facilities.--
(a) Drug or alcohol abusers and drug or alcohol dependent
persons shall be admitted to and treated in all facilities
licensed by the Department of Health and Office of Drug and
Alcohol Programs, at reasonable rates on the basis of medical or
psychotherapeutic need, and shall not be discriminated against
on the basis of medical assistance eligibility.
(b) As part of its licensure process, the Office of Drug and
Alcohol Programs shall review each facility's admission policies
for compliance and shall investigate complaints.
(c) The Office of Drug and Alcohol Programs may suspend or
revoke the license of any facility which fails to maintain an
admission policy consistent with the requirements of this
section and may impose a fine not to exceed one thousand dollars
($1,000) for each violation.
(d) Nothing in this section shall require any facility to
accept medical assistance eligible patients for whom payment is
not available pursuant to regulations adopted under section
2334(b)(3).

ARTICLE XXIII-A
POWERS AND DUTIES OF THE DEPARTMENT OF DRUG
AND ALCOHOL PROGRAMS

Section 2301-A. Powers and duties.
The Department of Drug and Alcohol Programs shall have the
power and its duty shall be:
(1) To develop and adopt a State plan for the control, prevention, intervention, treatment, rehabilitation, research, education and training aspects of drug and alcohol abuse and dependence problems. The State plan shall include, but not be limited to, provisions for:

(i) Coordination of the efforts of all State agencies in the control, prevention, intervention, treatment, rehabilitation, research, education and training aspects of drug and alcohol abuse and dependence problems so as to avoid duplications and inconsistencies in the efforts of the agencies.

(ii) Coordination of all health and rehabilitation efforts to deal with the problem of drug and alcohol abuse and dependence, including, but not limited to, those relating to vocational rehabilitation, manpower development and training, senior citizens, law enforcement assistance, parole and probation systems, jails and prisons, health research facilities, mental retardation facilities and community mental health centers, juvenile delinquency, health professions, educational assistance, hospital and medical facilities, social security, community health services, education professions development, higher education, Commonwealth employees health benefits, economic opportunity, comprehensive health planning, elementary and secondary education, highway safety and the civil service laws.

(iii) Encouragement of the formation of local agencies and local coordinating councils, promotion of cooperation and coordination among such groups and encouragement of communication of ideas and
recommendations from such groups to the Pennsylvania
Advisory Council on Drug and Alcohol Abuse.

(iv) Development of model drug and alcohol abuse and
dependence control plans for local government, utilizing
the concepts incorporated in the State plan. The model
plans shall be reviewed on a periodic basis, but not less
than once a year, and revised to keep them current. The
model plans shall specify how all types of community
resources and existing Federal and Commonwealth
legislation may be utilized.

(v) Assistance and consultation to local
governments, public and private agencies, institutions
and organizations and individuals with respect to the
prevention and treatment of drug and alcohol abuse and
dependence, including coordination of programs among
them.

(vi) Cooperation with organized medicine to
disseminate medical guidelines for the use of drugs and
controlled substances in medical practice.

(vii) Coordination of research, scientific
investigations, experiments and studies relating to the
cause, epidemiology, sociological aspects, toxicology,
pharmacology, chemistry, effects on health, dangers to
public health, prevention, diagnosis and treatment of
drug and alcohol abuse and dependence.

(viii) Investigation of methods for the more precise
detection and determination of alcohol and controlled
substances in urine and blood samples and by other means,
and publication on a current basis of uniform methodology
for such detections and determinations.
(ix) Any information obtained through scientific investigation or research conducted pursuant to this act shall be used in ways so that no name or identifying characteristics of any person shall be divulged without the approval of the department and the consent of the person concerned. Persons engaged in research pursuant to this section shall protect the privacy of individuals who are the subject of such research by withholding from all persons not connected with the conduct of such research the names or other identifying characteristics of such individuals. Persons engaged in the research shall protect the privacy of such individuals and may not be compelled in any State, civil, criminal, administrative, legislative or other proceeding to identify such individuals.

(x) Establishment of training programs for professional and nonprofessional personnel with respect to drug and alcohol abuse and dependence, including the encouragement of such programs by local governments.

(xi) Development of a model curriculum, including the provision of relevant data and other information, for utilization by elementary and secondary schools for instructing children and for parent-teachers' associations, adult education centers, private citizen groups or other State and local sources for instruction of parents and other adults about drug and alcohol abuse and dependence.

(xii) Preparation of a broad variety of educational, prevention and intervention material for use in all media, to reach all segments of the population, that can
be utilized by public and private agencies, institutions and organizations in educational programs with respect to drug and alcohol abuse and dependence.

(xiii) Establishment of educational courses, including the provision of relevant data and other information on the causes and effects of and treatment for drug and alcohol abuse and dependence, for law enforcement officials, including prosecuting attorneys, court personnel, the judiciary, probation and parole officers, correctional officers and other law enforcement personnel, welfare, vocational rehabilitation and other State and local officials, who come in contact with drug abuse and dependence problems.

(xiv) Recruitment, training, organization and employment of professional and other persons, including former drug and alcohol abusers and dependent persons, to organize and participate in programs of public education.

(xv) Treatment and rehabilitation services for male and female juveniles and adults who are charged with, convicted of or serving a criminal sentence for any criminal offense under the laws of this Commonwealth. Provision of similar services shall be made for juveniles adjudged to be delinquent, dependent or neglected. These services shall include, but are not limited to, emergency medical services, inpatient services and intermediate care, rehabilitative and outpatient services.

(xvi) Giving priority to developing community-based drug or alcohol abuse treatment services in a cooperative manner among State and local governmental agencies and departments and public and private agencies, institutions
and organizations. Consideration shall be given to supportive medical care, services or residential facilities for drug or alcohol dependent persons for whom treatment has repeatedly failed and for whom recovery is unlikely.

(xvii) Establishment of a system of emergency medical services for persons voluntarily seeking treatment, for persons admitted and committed to treatment facilities according to the procedural admission and commitment provisions of the act of July 9, 1976 (P.L.817, No.143), known as the Mental Health Procedures Act, and for persons charged with a crime under Pennsylvania law. Upon the establishment of such emergency medical services, the Department of Drug and Alcohol Programs, by regulation, shall require that appropriate emergency medical services be made available to all drug and alcohol abusers who are arrested for a crime under Pennsylvania law.

(xviii) Providing standards for the approval by the relevant State agency for all private and public treatment and rehabilitative facilities, which may include, but are not limited to, State hospitals and institutions, public and private general hospitals, community mental health centers or their contracting agencies and public and private drug or alcohol dependence and drug and alcohol abuse and dependence treatment and rehabilitation centers.

(xix) Grants and contracts for the prevention, intervention and treatment of drug and alcohol dependence. The grants and contracts may include
assistance to local governments and public and private
agencies, institutions and organizations for prevention,
intervention, treatment, rehabilitation, research,
education and training aspects of the drug and alcohol
abuse and dependence problems with the Commonwealth. Any
grant made or contract entered into by a department or
agency shall be pursuant to the functions allocated to
that department or agency by the State plan.

(xx) Preparation of general regulations for and
operation of programs supported with assistance.

(xxi) Establishment of priorities for deciding
allocation of the funds.

(xxii) Review the administration and operation of
programs, including the effectiveness of such programs in
meeting the purposes for which they are established and
operated, and make annual reports of the findings.

(xxiii) Evaluate the programs and projects carried
out and disseminate the results of such evaluations.

(xxiv) Establish such advisory committees as deemed
necessary to assist the department in fulfilling its
responsibilities.

(2) In developing the State plan initially, and prior to
its amendment annually, to hold a public hearing at least 30
days prior to the adoption of the initial State plan and
subsequent amendments and to afford all interested persons an
opportunity to present their views either orally or in
writing. The Department of Drug and Alcohol Programs, through
its staff, shall consult and collaborate with appropriate
Federal, State and local departments, boards, agencies and
governmental units, and with appropriate public and private
agencies, institutions, groups and organizations. Otherwise, the promulgation of the State plan shall conform to the procedure contained in the act of July 31, 1968 (P.L.769, No.240), referred to as the Commonwealth Documents Law.

(3) In accordance with the State plan, to allocate the responsibility for all services, programs and other efforts provided for among the appropriate departments, agencies and other State personnel. The department, through its employees, shall have the power and its duty shall be to implement compliance with the provisions of the State plan and to coordinate all such efforts.

(4) To gather and publish statistics pertaining to drug and alcohol abuse and dependence and promulgate regulations, specifying uniform statistics to be obtained, records to be maintained and reports to be submitted by public and private departments, agencies, organizations, practitioners and other persons with respect to drug and alcohol abuse and dependence and related problems. Such statistics and reports shall not reveal the identity of any patient or drug or alcohol-dependent person or other confidential information.

(5) To establish an information center, which will attempt to gather and contain all available published and unpublished data and information on the problems of drug and alcohol abuse and dependence. All Commonwealth departments and agencies shall send to the Department of Drug and Alcohol Programs any data and information pertinent to the cause, prevention, diagnosis and treatment of drug and alcohol abuse and dependence and the toxicology and pharmacology effects on the health of drug and alcohol abusers and danger to the public health of alcohol, drugs and controlled substances.
The Department of Drug and Alcohol Programs shall make such data and information widely available.

(6) To require all appropriate State and local departments, agencies, institutions and others engaged in implementing the State plan to submit as often as necessary, but no less often than annually, reports detailing the activities and effects of the implementation and recommending appropriate amendments to the State plan. The department may direct a performance audit of any activity engaged in pursuant to the State plan.

(7) To submit an annual report to the General Assembly which shall specify the actions taken and services provided and funds expended and an evaluation of their effectiveness. The annual report shall also contain the current State plan. The Department of Drug and Alcohol Programs shall submit such additional reports as may be requested by the General Assembly and recommendations to further the prevention, treatment and control of drug and alcohol abuse and dependence.

(8) To make provisions for facilities in each city or region or catchment area which shall provide information about the total Commonwealth drug and alcohol abuse and drug and alcohol dependency programs and services.

(9) The department shall have the power to promulgate the rules and regulations necessary to carry out the provisions of this article.

Section 5. The act is amended by adding an article to read:

ARTICLE XXIII-C

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Section 2301-C. Purpose and legislative intent.
(a) Purpose.--It is the purpose of this article to more effectively address the collaboration and service delivery of health and human services which are of vital importance to this Commonwealth by coordinating the services provided by the former Department of Aging, the former Department of Drug and Alcohol Programs, the former Department of Health and the former Department of Human Services and establishing one agency to administer the services.

(b) Intent.--In adopting this article to coordinate the provision of health and human services, it is the intent of the General Assembly to continue to:

(1) Promote and improve the efficient and effective delivery of health and human services, including substance use disorder and gambling addiction services and services to advance the well-being of older Pennsylvanians.

(2) Appropriate State Lottery funds in accordance with the act of August 26, 1971 (P.L.351, No.91), known as the State Lottery Law.

Section 2302-C. Definitions.

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

"Area agency." The single local agency designated by the department within each planning and service area to administer the delivery of a comprehensive and coordinated plan of social and other services and activities.

"Area plan." The plan submitted to the department by an area agency describing the methods by which the department will ensure a coordinated and comprehensive plan of social and other services and activities in the planning and service area.
"Council." The Pennsylvania Council on Aging established under section 2304-C.

"Department." The Department of Health and Human Services of the Commonwealth.

"Domestic violence." The occurrence of one or more of the following acts between family or household members, sexual or intimate partners or persons who share biological parenthood:

(1) Intentionally, knowingly or recklessly causing or attempting to cause bodily injury.

(2) Placing, by physical menace, another in fear of imminent serious bodily injury.

"Domestic violence center." An organization, or the coordinating body of an organization, which has as its primary purpose the operation of domestic violence programs.

"Domestic violence program." A program which has as its primary purpose the provision of direct services to victims of domestic violence and their children, including, but not limited to, victim advocacy, counseling, shelter, information and referral, victim-witness, accompaniment, community education and prevention.

"Domiciliary care." A protected living arrangement in the community which provides a safe, supportive, homelike residential setting for not more than three adults who are unrelated to the provider of the living arrangement, who cannot live independently in the community and who are placed in the living arrangement by an area agency.

"Local authority." County commissioners or a county council.

"Long-term care." Services designed to provide diagnostic, therapeutic, rehabilitative, supportive or maintenance services for individuals who have chronic functional impairments in a
variety of institutional and noninstitutional care settings, including the home.

"Older adult." An individual residing within this Commonwealth who is at least 60 years of age.

"Older Americans Act of 1965." The Older Americans Act of 1965 (Public Law 89-73, 42 U.S.C. § 3001 et seq.).

"Planning and service area." The geographic unit within this Commonwealth authorized by the Older Americans Act of 1965 for allocation of funds for the delivery of social services.

"Rape crisis center." An organization, or the coordinating body of an organization, which has as its primary purpose the operation of rape crisis programs.

"Rape crisis program." A program which has as its primary purpose the provision of direct services to victims of sexual assault, including, but not limited to, crisis intervention, counseling, victim advocacy, information and referral, victim-witness and assistance, accompaniment through the medical, police and judicial systems as well as providing education and prevention programs on rape and sexual assaults.

"Regional council." A regional council on aging established under section 2304-C.

"Secretary." The Secretary of Health and Human Services of the Commonwealth.

"Sexual assault." Conduct which is a crime under 18 Pa.C.S. Ch. 31 (relating to sexual offenses).

"Single county authority." The agency designated by the department to plan and coordinate substance use disorder prevention, intervention and treatment services for a geographic area that may consist of one or more counties and to administer the provision of the services funded through the agency.
"Unit of general purpose local government." A county or
other unit which carries general government authority for an
area designated as a planning and service area under this act or
a combination of such units.

Section 2303-C. Administration.

(a) Continuation.--The department shall, except as provided
in this article, exercise the powers and perform the duties by
law vested in and imposed on the former Department of Drug and
Alcohol Programs, the former Department of Health, the former
Department of Aging, the former Department of Human Services and
the former Department of Public Welfare.

(b) Powers and duties.--In addition to such other powers and
duties that may be provided by this article or other law, the
department shall:

(1) Administer and enforce the laws of this Commonwealth
relating to the following:

(i) Mental health, intellectual disability, autism,
substance use disorder and gambling addiction.

(ii) The care, prevention, early recognition and
treatment of mental illness, emotional disturbance,
intellectual disability, autism, substance use disorder
and gambling addiction.

(iii) The licensing and regulation of facilities and
agencies with the primary functions of diagnosis,
treatment, care and rehabilitation of individuals with
mental illness, emotional disturbance, intellectual
disability, autism or substance use disorder.

(iv) The admission of individuals with mental
illness, intellectual disability, autism or substance use
disorder to facilities under subparagraph (iii) and the
transfer, discharge, escape, interstate rendition and
deportation of the individuals.

(v) The licensing, certification and regulation of
the following:
(A) health care facilities; and
(B) medical marijuana organizations.

(vi) The certification and regulation of the
following:
(A) laboratories;
(B) emergency medical services providers; and
(C) managed care organizations.

(vii) The issuance and enforcement of disease
control measures, including isolation orders and
quarantine orders.

(viii) The issuance of grants and contracts to aid
in the prevention and control of the spread of disease
and to ensure the health and welfare of the citizens of
this Commonwealth.

(ix) The collection, compilation and preservation of
vital statistics of the citizens of this Commonwealth.

(2) Protect the health of the people of this
Commonwealth and determine and employ the most efficient and
practical means for the prevention and suppression of
disease.

(3) Prevent, respond to and reduce the public health and
medical consequences of an emergency or a disaster.

(4) Promulgate the rules and regulations necessary to
carry out this article.

(c) Executive Director of Substance Abuse and Addiction
Policy.--There shall be within the department an Executive
Director of Substance Abuse and Addiction Policy. The executive
director shall be appointed by the Governor by and with the
advice and consent of a majority of the members elected to the
Senate. The department shall provide adequate staff and other
support to the executive director as needed. The executive
director shall serve at the pleasure of the Governor. The salary
and other conditions of employment for the Executive Director of
Substance Abuse and Addiction Policy shall be set by the
Executive Board. The executive director shall:

(1) Advise the Governor and the secretary on substance
use disorder, gambling addiction and related policies.

(2) Participate in the decision-making process of the
department on policies relating to substance use disorder and
gambling addiction issues and in the decision-making process
of other executive branch agencies as directed by the
Governor.

(3) Coordinate the efforts of Commonwealth agencies in
the control, prevention, intervention, treatment,
rehabilitation, research, education and training aspects of
substance use disorders and gambling addiction to avoid
duplications and inconsistencies in the efforts of the
agencies.

(4) Consult with recognized experts on substance use
disorder and gambling addiction matters which are within the
jurisdiction of the department and other executive branch
agencies.

(5) Provide advice on substance use disorder and
gambling addiction issues to the secretary and to other
executive branch agencies.

(6) Coordinate educational, informational substance use
disorder and gambling addiction programs for the promotion of wellness, public health and related medical issues in this Commonwealth and serve as the primary advocate for these programs.

(7) Serve as an ex officio member of the Pennsylvania Advisory Council on Drug and Alcohol Abuse.

(8) Perform other duties as directed by the Governor.

(d) Physician General.--There shall be within the department a Physician General. The Physician General shall be appointed by the Governor by and with the advice and consent of a majority of the members elected to the Senate. The department shall provide adequate staff and other support to the Physician General as needed. The Physician General shall be a graduate of an accredited medical or osteopathic medical school and shall be a practicing physician licensed by the Commonwealth. The Physician General shall serve at the pleasure of the Governor. The salary and other conditions of employment for the Physician General shall be set by the Executive Board. The Physician General shall:

(1) Advise the Governor and the secretary on health policy.

(2) Participate in the decision-making process of the department on policies relating to medical and public-health-related issues and in the decision-making process of other executive branch agencies as directed by the Governor.

(3) Review professional standards and practices in medicine and public health which are related to matters within the jurisdiction of the department and other executive branch agencies.

(4) Consult with recognized experts on medical and
public health matters which are within the jurisdiction of
the department and other executive branch agencies.

(5) Provide advice on medical and public health issues
to the secretary and to other agencies.

(6) Coordinate educational, informational and other
programs for the promotion of wellness, public health and
related medical issues in this Commonwealth and serve as the
primary advocate for the programs.

(7) Consult with experts in this Commonwealth and other
jurisdictions regarding medical research, innovation and
development which relate to programs and issues of importance
to the department and the Commonwealth.

(8) Perform other duties as directed by the Governor.

(9) Serve as an ex officio member of the State Board of
Medicine, the State Board of Osteopathic Medicine and other
Commonwealth boards and commissions as may be provided by
law. The Physician General may provide a designee to serve in
the Physician General's stead.

Section 2304-C. Pennsylvania Council on Aging.

(a) Establishment.--The Pennsylvania Council on Aging is
established in the Office of the Governor. The council shall
consist of an executive director and 21 members. Eleven members
of the council shall constitute a quorum for the conduct of the
business of the council. Absence of a member at three
consecutive meetings shall result in the member forfeiting the
member's seat, unless the member requests in writing and
receives approval from the chairperson for good cause.

(b) Executive director.--The executive director of the
council shall be appointed by the Governor and advise the
Governor and the secretary on policies, programs and services.
for older adults.

(c) Composition and terms.--The following apply:

(1) The members of the council shall be nominated by the Governor, subject to the advice and consent of a majority of the members elected to the Senate, and shall represent, as far as practicable, different geographical locations of this Commonwealth. The following additional criteria shall apply to members of the council:

(i) The chairperson of the regional councils on aging established under subsection (g) shall be ex officio members.

(ii) At least 11 members shall be older adults who are residents of this Commonwealth.

(iii) At least one member shall be a representative of a long-term care provider operating in this Commonwealth.

(iv) At least one member shall be a representative of an adult day-care provider operating in this Commonwealth.

(2) The members shall serve staggered three-year terms, on a schedule determined by the Governor upon appointment, and shall serve until their successors are appointed and qualified. Members shall be eligible for reappointment.

(d) Procedures.--The council shall provide for its organization and procedures, including the selection of a chairperson and other officers as deemed necessary.

(e) Compensation.--The members of the council shall receive no compensation for their services on the council but shall be reimbursed by the department for ordinary and necessary expenses incurred in the performance of their duties.
(f) Meetings.--The council shall meet at least six times each calendar year.

(g) Powers and duties.--The council shall have the following powers and duties:

(1) Assisting the department in the development of the State plan on aging required by section 2322-C(a)6).

(2) Reviewing and commenting on rules and regulations relating to programs and services for older adults promulgated by the department.

(3) Preparing and submitting to the Governor, secretary and General Assembly, public reports evaluating the level and quality of services and programs provided to older adults by Commonwealth agencies, including recommendations for improved, expanded or additional programs and services for older adults.

(4) Conducting public hearings on matters affecting the rights and interests of older adults, including matters involving cases of neglect, abuse and age discrimination against older adults in the administration of the laws of this Commonwealth.

(5) Conducting studies in the areas of age discrimination, health care, Medical Assistance program policies affecting older adults, duration-of-stay contracts for nursing homes, health-related insurance increases and, as appropriate, other major issues affecting older adults. The council shall report its findings and recommendations to the Governor, secretary, General Assembly and public regarding the appropriate actions and long-term strategy to address the areas specified under this paragraph.

(6) Consulting with the secretary regarding the
operations of the department's programs and services for older adults.

(7) Establishing up to five regional councils on aging, each of which shall consist of 15 members who are residents of the region to be served by a council and who shall not be elected officials. The council shall determine the composition, members' terms of offices, organization and duties and responsibilities of the regional councils.

(8) Employing, with funds as are annually appropriated by the General Assembly, sufficient staff and services to carry out the powers and duties of the council and the regional councils, as specified under this subsection.

Section 2305-C. Substance use disorder.

(a) State plan.--The department shall develop and adopt a State plan for the control, prevention, intervention, treatment, rehabilitation, research, education and training aspects of substance use disorders. The State plan shall include, but not be limited to, provisions for all of the following:

(1) Coordination of the efforts of all Commonwealth agencies in the control, prevention, intervention, treatment, rehabilitation, research, education and training aspects of substance use disorders for the purpose of preventing duplications and inconsistencies in the efforts of the agencies.

(2) Coordination of all health and rehabilitation efforts to deal with substance use disorders, including, but not limited to, those relating to vocational rehabilitation, workforce development and training, older adults, law enforcement assistance, parole and probation systems, jails and prisons, health research facilities, facilities for
individuals with an intellectual disability and community
mental health centers, juvenile delinquency, health
professions, educational assistance, hospital and medical
facilities, social security, community health services,
education professions development, higher education,
Commonwealth employees health benefits, economic opportunity,
comprehensive health planning, elementary and secondary
education, highway safety and Federal and State civil service
laws.

(3) Encouragement of the formation of local agencies and
coordinating councils, promotion of cooperation and
coordination among the agencies and councils and
encouragement of communication of ideas and recommendations
from the agencies and councils to the Pennsylvania Advisory
Council on Drug and Alcohol Abuse.

(4) Development of model substance use disorder control
plans for local government, utilizing the concepts
incorporated in the State plan. The model plans shall be
reviewed on a periodic basis, but not less than once a year,
and revised to keep the model plans current. The model plans
shall specify how all types of community resources and
existing Federal and State law may be utilized.

(5) Assistance to and consultation with local
governments, public and private agencies, institutions and
organizations and individuals with respect to the prevention
and treatment of substance use disorders, including
coordination of programs.

(6) Cooperation with organized medicine to disseminate
medical guidelines for the use of drugs and controlled
substances in medical practice.
(7) Coordination of research, scientific investigations, experiments and studies relating to the cause, epidemiology, sociological aspects, toxicology, pharmacology, chemistry, effects on health, dangers to public health, prevention, diagnosis and treatment of substance use disorders.

(8) Investigation of methods for the more precise detection and determination of alcohol and controlled substances in urine and blood samples and by other means, and publication on a current basis of a uniform methodology for detections and determinations.

(9) The use of information obtained through scientific investigation or research conducted under this section in a manner so that the name or identifying characteristics of an individual are not divulged without the approval of the department and the consent of the individual. A person engaged in research under this section shall protect the privacy of an individual who is the subject of the research by withholding from all persons not connected with the conduct of the research the name or other identifying characteristics of the individual. A person engaged in research under this section may not be compelled in a State, civil, criminal, administrative, legislative or other proceeding to identify the individual who is the subject of the research.

(10) Establishment of training programs for professional and nonprofessional personnel with respect to substance use disorders, including the encouragement of the programs by local governments.

(11) Development of a model curriculum, including the provision of relevant data and other information, for
utilization by elementary and secondary schools for
instructing children and for parent-teachers' associations,
adult education centers, private citizen groups or other
State and local sources for instruction of parents and other
adults about substance use disorders.

(12) Preparation of a broad variety of educational,
prevention and intervention material for use in the media
for the purpose of reaching all segments of the population
and which can be utilized by public and private agencies,
institutions and organizations in educational programs with
respect to substance use disorders.

(13) Establishment of educational courses, including the
provision of relevant data and other information on the
causes and effects of and treatment for substance use
disorders for law enforcement officials, including
prosecuting attorneys, court personnel, the judiciary,
probation and parole officers, correctional officers and
other law enforcement personnel, human services personnel,
vocational rehabilitation personnel and other State and local
officials, who come in contact with substance use disorder
problems.

(14) Recruitment, training, organization and employment
of professional and other persons, including individuals in
recovery from substance use disorders, to organize and
participate in programs of public education.

(15) Treatment and rehabilitation services for juveniles
and adults with substance use disorders who are charged with,
convicted of or serving a criminal sentence for a criminal
offense under the laws of this Commonwealth. Provision of
similar services shall be made for juveniles adjudged to be
delinquent, dependent or neglected. These services shall include, but not be limited to, emergency medical services, inpatient services and intermediate care, rehabilitative and outpatient services.

(16) Giving priority to developing community-based substance use disorder treatment services in a cooperative manner among State and local governmental agencies and departments and public and private agencies, institutions and organizations. Consideration shall be given to supportive medical care, services or residential facilities for individuals with a substance use disorder for whom treatment has repeatedly failed and for whom recovery is unlikely.

(17) Establishment of a system of emergency medical services for individuals with substance use disorders and who:

(i) voluntarily seek treatment;

(ii) are admitted and committed to treatment facilities according to the procedural admission and commitment provisions of the act of July 9, 1976 (P.L.817, No.143), known as the Mental Health Procedures Act; or

(iii) are charged with a crime under the laws of this Commonwealth.

(18) Providing standards for the licensure of or approval for all private and public treatment and rehabilitative facilities, which may include, but not be limited to, State hospitals and institutions, public and private general hospitals, community mental health centers or their contracting agencies and public and private substance use disorder treatment and rehabilitation centers.
(19) Grants and contracts for the prevention, intervention and treatment of substance use disorders within this Commonwealth. The grants and contracts may include assistance to local governments and public and private agencies, institutions and organizations for prevention, intervention, treatment, rehabilitation, research, education and training aspects of substance use disorders.

(20) Establishment of priorities for deciding allocation of funds.

(21) The conduct of annual reviews and evaluations of the administration and operation of programs of the department relating to substance use disorders, including the effectiveness of the programs in meeting the purposes for which they are established and operated.

(22) Creation and dissemination of annual reports of the reviews and evaluations conducted under paragraph (21).

(23) Establishment of advisory committees as deemed necessary to assist the department in fulfilling its responsibilities under this section.

(b) Public hearings.--Prior to the adoption of the State plan or any amendment of the plan, the department shall hold a public hearing to afford all interested persons an opportunity to present their views either orally or in writing. The department shall consult and collaborate in the conduct of the hearings with appropriate Federal, Commonwealth and local agencies, departments, boards, governmental units, public and private agencies, institutions, groups and organizations. A hearing to be conducted pursuant to this subsection shall be held at least 30 days prior to the adoption or amendment of the State plan.
(c) Implementation.--The department shall implement the State plan adopted under this section, shall coordinate responsibilities under the plan of other Commonwealth agencies and shall monitor compliance with the State plan by relevant Commonwealth and local agencies, departments, institutions and others engaged in implementing the State plan. In connection with such implementation, coordination and monitoring, the department shall do the following:

(1) Allocate the responsibility for all services, programs and other efforts provided for in the plan among the appropriate Commonwealth agencies and departments.

(2) Gather and publish statistics pertaining to substance use disorders and promulgate regulations that specify uniform statistics to be obtained, records to be maintained and reports to be submitted by public and private departments, agencies, organizations, practitioners and other persons with respect to substance use disorders and related problems. The statistics and reports may not reveal the identity of a patient or person with a substance use disorder or other confidential information.

(3) Establish an information center that attempts to gather and contain all available published and unpublished data and information on substance use disorders and related problems. All Commonwealth departments and agencies shall send to the department data and information pertinent to the cause, prevention, diagnosis and treatment of substance use disorders and the toxicology and pharmacology effects on persons with a substance use disorder, and the danger of alcohol, drugs and controlled substances to the public health. The department shall make the data and information...
available on its publicly accessible Internet website.

(4) Conduct performance audits as the department deems necessary of the activities engaged in by other Commonwealth and local agencies, departments, institutions and others engaged in implementing the State plan.

(d) Reporting requirements.--The following apply:

(1) All appropriate Commonwealth and local departments, agencies, institutions and others engaged in implementing the State plan shall submit to the department as often as necessary, but no less often than annually, reports detailing the activities and effects of the implementation and recommending appropriate amendments to the State plan.

(2) The department shall submit an annual report to the General Assembly that specifies the actions taken, services provided and funds expended under the State plan together with an evaluation of their effectiveness. The department shall submit additional reports as may be requested by the General Assembly and shall make recommendations to further the prevention, treatment and control of substance use disorders in this Commonwealth.

(3) To facilitate the distribution throughout this Commonwealth of information about all Commonwealth substance use disorder programs and services.

Section 2306-C. Residential substance use disorder treatment programs for women and children.

(a) Grants and contracts.--The department shall award grants or enter into contracts to provide residential substance use disorder treatment and related services for pregnant women, women and their dependent children and women who do not have custody of their children where there is a reasonable likelihood
that the children will be returned to the women if the women participate satisfactorily in the treatment program. Grant or contract money shall only be used for treatment and related services provided to residents of this Commonwealth by providers of substance use disorder treatment programs licensed by the department that provide the following services:

(1) Residential treatment services for women and their dependent children, subject to reasonable limitations on the number and ages of the children, including, but not limited to:

(i) Onsite substance use disorder education, counseling and treatment.
(ii) Onsite individual, group and family counseling.
(iii) Onsite substance use disorder prevention and education activities for children.
(iv) Onsite special counseling for children of women with substance use disorders.
(v) Involvement with support groups for women and children of women with substance use disorders.
(vi) Activities that enhance self-esteem and self-sufficiency.

(2) Onsite parenting skills counseling and training.

(3) Access to school for children and women where appropriate, including, but not limited to, securing documents necessary for registration.

(4) Job counseling and referral to existing job training programs.

(5) Onsite child care for children of women:
(i) who attend counseling, school or job training programs:
(ii) who work or are looking for work; and
(iii) who need such services at other times as the
department deems appropriate.
(6) Referral for other needed services, including, but
not limited to, health care.
(7) Onsite structured reentry counseling and activities.
(8) Referral to outpatient counseling upon discharge
from the residential program.
(b) Information to single county authorities.--The
department shall advise a single county authority of those
programs in its jurisdiction that are being considered for
funding under this section and shall give the single county
authority an opportunity to comment on the funding proposals
prior to the department making a decision to award funding.
(c) Information to be provided to department.--
(1) Providers of treatment programs that receive funding
under this section shall collect and provide to the
department information concerning the number of women and
children denied treatment or placed on waiting lists and may
require such other data and information as the department
deems useful in determining the effectiveness of the
treatment programs.
(2) Records regarding identifiable individuals enrolled
in treatment programs funded under this section that are in
the possession of the department or a provider shall be
confidential.
(d) Limitation.--Contributions by counties or single county
authorities shall not be required as a condition for receiving
grants for programs funded under this section, but the
department may require counties or single county authorities to
make commitments to provide outpatient intervention, referral
and aftercare services to women whose residential treatment is
funded under this section upon completion of residential
treatment.

(e) Annual report required.--The department shall report
annually to the Governor and the General Assembly as to:

(1) The department's activities and expenditures under
this section.

(2) The activities of recipients of funds under this
section.

(3) The number of women and children served by programs
funded under this section.

(4) The number of women and children denied treatment or
placed on waiting lists by providers that receive funding for
programs under this section.

(5) The recommendations of the department.

Section 2307-C. Staff training and referral mechanisms.
The department shall:

(1) Establish, on a demonstration basis, programs to
train the staff of child protective services agencies,
counseling programs and shelters for victims of domestic
violence, recipients of funds under high risk maternity
programs or Federal maternal and child health care grants and
community health care centers in order to identify those
women for whom these agencies are already providing services
and who are in need of substance use disorder treatment.

(2) Establish referral networks and mechanisms between
the agencies referred to in paragraph (1) and single county
authorities and appropriate substance use disorder treatment
programs.
Section 2308-C. Medical assistance payments.

(a) Purpose.--The following shall apply:

(1) The purpose of this section is to provide for alcohol and drug detoxification and rehabilitation services to persons eligible for medical assistance.

(2) Facilities serving as appropriate treatment settings shall include the following if they are licensed by the department:

   (i) hospital and nonhospital drug detoxification and rehabilitation facilities;
   (ii) hospital and nonhospital alcohol detoxification and rehabilitation facilities;
   (iii) hospital and nonhospital drug and alcohol detoxification and rehabilitation facilities; and
   (iv) outpatient services.

(3) The General Assembly recognizes that the fluctuating nature of substance use disorder, in combination with the associated physical complications often arising from long-term substance use, requires the availability of a variety of treatment modalities and settings for individuals eligible for medical assistance. The availability of a new service in this area is in no way intended to limit access to or funding of services currently available.

(b) Responsibilities of the department.--The department shall:

(1) Provide to individuals eligible for medical assistance, if the facility is licensed by the department, medical assistance coverage for detoxification, treatment and care in the following facilities:

   (i) a nonhospital alcohol detoxification facility:
(ii) nonhospital drug detoxification facility;
(iii) nonhospital alcohol and drug detoxification facility; or
(iv) nonhospital treatment facility that can provide services for either drug or alcohol detoxification or treatment, or both.

(2) Use criteria adopted by the department for governing the type, level and length of care or treatment, including hospital detoxification, as a basis for the development of standards for services provided under paragraph (1).

Section 2309-C. Public health.

(a) General rule.--The department shall have the following powers and duties:

(1) Protect the health of the citizens of this Commonwealth and determine and employ the most efficient and practical means for the prevention and suppression of disease.

(2) (i) Investigate conditions affecting the security of life and health, in any locality, and, for that purpose, enter, inspect and survey all grounds, vehicles, apartments, buildings and other places within this Commonwealth.

(ii) All persons authorized by the department to conduct the activities under subparagraph (i) shall have the powers and authority conferred by law upon constables.

(3) Administer the health laws, regulations and ordinances of a borough or a township of the first class if:

(i) the department determines that a condition exists in the borough or township that is a menace to the
lives and health of residents of the borough or township or of surrounding municipalities;

(ii) the department has knowledge that the borough or township is without an existing or efficient board of health, until a competent and efficient board of health, as determined by the department, has been appointed and is ready, able and willing to assume and carry out the duties imposed upon it by law; or

(iii) the borough or township requests the department to do so.

(4) Recover from a borough or township of the first class all expenses incurred by the township in performing the duties of a board of health of the borough or township under paragraph (3)(ii).

(5) Prescribe standard requirements for the medical examination of public school students and public schools throughout this Commonwealth and to appoint appropriate inspectors for this purpose.

(6) Train, in appropriate facilities, qualified Commonwealth, county and municipal employees in the field of public health work.

(b) Public health laboratory.--

(1) The department shall maintain and operate a public health laboratory that shall assure the availability of reliable clinical laboratory services and laboratory-based information that are needed by health providers for proper diagnosis and treatment, prevention of disease and promotion of the health of the citizens of this Commonwealth.

(2) The public health laboratory maintained and operated under paragraph (1) shall arrange for or perform the
following clinical tests:

(i) to identify diseases and provide epidemiological
and surveillance support; and

(ii) for, but not limited to, rabies, measles,
rubella, Lyme disease, influenza and tuberculosis
identification.

(c) Dental health districts.--

(1) The department shall apportion this Commonwealth
into dental health districts administered by a public health
dentist within the department.

(2) The public health dentist administering a dental
health district under paragraph (1) shall implement dental
health policies and programs.

(d) Abatement of detrimental conditions.--The department
shall have power and authority to order conditions detrimental
to the public health or the causes of disease and mortality to
be abated and removed and to enforce quarantine orders. The
following shall apply:

(1) If the owner or occupant of a premises subject to an
order of the department under this subsection fails to comply
with the order, agents or employees of the department may
enter the premises and abate or remove the condition.

(2) The expense of the abatement or removal under
paragraph (1) shall be paid by the owner or occupant of the
premises subject to the order. The following shall apply:

(i) The expense shall be a lien upon the land on
which the condition existed, for which a claim may be
filed by the department, in the name of the Commonwealth,
in the court of common pleas for the county in which the
land is located.
(ii) A claim under subparagraph (i) must be filed within six months from the date of completion of the work of abatement or removal, subject to the same proceedings for entry or revival of judgment and execution as are provided by law for municipal liens.

(3) The department may maintain an action against an owner or occupant, in the name of the Commonwealth, to recover expenses related to abatement under paragraph (1) in the same way as debts of like amounts are recoverable by law.

(4) Expenses recovered under this section by enforcement of a lien or by other action shall be paid to the State Treasurer, to be held and used as funds of the department.

(5) This subsection shall not apply to waters pumped or flowing from coal mines or tanneries.

(e) Revocation or modification of action by a local board of health.--The department may revoke or modify an order, regulation, bylaw or ordinance of a local board of health, concerning a matter which the department has determined affects the public health beyond the territory over which the local board has jurisdiction.

(f) Civil penalty.--

(1) The department may impose a civil penalty on a person that fails to comply with an order issued by the department under this section, or that resists or interferes with an agent or employee of the department in the performance of the agent's or employee's duties in accordance with the public health regulations and orders of the department.

(2) A penalty under paragraph (1) shall be no more than $1,000 for the first offense, no more than $2,000 for the
second offense and no more than $5,000 for each subsequent offense.

(g) Controlled substances.--The department shall have the power and duty to carry out those powers and duties conferred upon the former Secretary of Health and the former Department of Health under the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act. Notwithstanding any provision of The Controlled Substance, Drug, Device and Cosmetic Act, loperamide hydrochloride is expressly deemed not to be a controlled substance within the meaning of section 4 of that act.

Section 2310-C. Newborn testing.

(a) General rule--The department shall permit a laboratory certified under the Clinical Laboratories Improvement Act of 1967 (Public Law 90-174, 81 Stat. 533) that is licensed to perform screening testing of newborn infants in any state and uses normal pediatric reference ranges to conduct the analysis required by section 4(a) of the act of September 9, 1965 (P.L.497, No.251), known as the Newborn Child Testing Act, as an alternative to the testing laboratory designated by the department in accordance with section 5 of the Newborn Child Testing Act.

(b) Testing requirements.--The testing performed by the laboratory under subsection (a) must include testing for newborn diseases as required by law or regulation and shall provide test results and reports consistent with appropriate policies, procedures, laws and regulations of the department.

(c) Blood samples.--A testing laboratory designated by the department or permitted as an alternative under this section shall not use or provide blood samples for scientific research.
without the informed written consent of the parent or guardian of the child.

Section 2311-C. Recovery of blood plasma proteins.

The department shall have the power and duty to:

1. Maintain facilities, or contract with facilities, for the recovery of outdated human whole blood and blood from which the cells of certain proteins useful for immunization, treatment, research and disaster stock-piling purposes have been withdrawn.

2. Make available to research institutions, physicians and hospitals, upon request, blood plasma proteins for research, immunization and treatment.

3. Maintain facilities for the proper storage of blood proteins for disaster purposes.

4. Adopt standards for the efficient execution of a blood plasma protein recovery program.

5. Develop and employ the necessary procedures and perform any and all things necessary to carry out the purposes of this section.

6. Collect and dispense money received from any source, by gift or otherwise, for the purpose of carrying out the provisions of this section.

Section 2312-C. Vital statistics.

The department shall have the power and duty to:

1. Obtain, collect, compile and preserve all statistics from all professionals whose information is deemed to be necessary to ensure a complete registration of births, deaths, marriages and diseases occurring within this Commonwealth or other vital statistics.

2. Prepare the necessary methods, forms and blanks for
obtaining and preserving records of births, deaths, marriages and diseases in this Commonwealth.

(3) Ensure that the laws requiring the registration of births, deaths, marriages and diseases are uniformly and thoroughly enforced throughout this Commonwealth, along with the prompt provision of registrations to the department.

(4) With the advice and concurrence of the Advisory Health Board, promulgate regulations for the thorough organization and efficiency of the registration of vital statistics throughout the Commonwealth, and enforce regulations.

(5) Issue birth and death certificates and burial or removal permits as provided by law.

(6) Establish districts for the registration of vital statistics and appoint registrars, deputies and sub-registrars, as may be necessary, to obtain, collect, compile and preserve the statistics which the department is required to obtain, collect, compile and preserve. All local registrars, deputies and sub-registrars, appointed under this paragraph, shall perform the duties required of them by the department and shall receive compensation as may be fixed by law.

Section 2313-C. Health districts and officers.

The department may:

(1) Apportion this Commonwealth into health districts as the department, with the approval of the Governor, decides.

(2) Appoint a health officer in each health district, who shall:

(i) Under the direction of the department, handle matters as delegated by law or by the secretary.
(ii) In connection with the management of the sanitary affairs of the Commonwealth, cooperate with the Department of Environmental Protection and with the Department of Conservation and Natural Resources.

Section 2314-C. Quarantine.

The department shall have the power and duty to:

(1) In addition to diseases that may be declared by law to be communicable, declare a disease to be communicable with the approval of the Advisory Health Board and establish regulations for the prevention of the spread of communicable diseases as the department and the Advisory Health Board deem necessary and appropriate.

(2) Issue and enforce an isolation and quarantine order, to prevent the spread of a disease declared by law or by the department to be a communicable disease.

(3) Administer and enforce the laws of this Commonwealth with regard to vaccination and other means of preventing the spread of a communicable disease.

Section 2315-C. Narcotic drugs.

The department shall have the power and duty to supervise the enforcement and administration of laws regulating the possession, control, dealing in, giving away, delivery, dispensing, administering, prescribing and use of narcotic drugs.

Section 2316-C. Advisory Health Board.

The Advisory Health Board shall have the power and duty:

(1) To advise the secretary on such matters as the secretary may request.

(2) To advise the department regarding the department's promulgation of rules and regulations as necessary for the
prevention of disease and for the protection of the lives and
health of the residents of this Commonwealth.

(3) To make and revise a list of communicable diseases
against which children shall be required to be immunized as a
condition of attendance at a public, private or parochial school in this Commonwealth. The list shall be published by
the department together with rules and regulations
promulgated by the department that are necessary to ensure
that the immunization is timely, effective and properly verified.

(4) To prescribe minimum health activities and minimum
standards of performance of health services for a political subdivision.

Section 2317-C. Speech and hearing rehabilitation centers.
The department shall have the power and duty:

(1) To provide, maintain, administer and operate a
speech and hearing rehabilitation center:

   (i) For the diagnosis and treatment of children with
or suspected of having hearing loss.

   (ii) To provide auditory training for preschool
children.

   (iii) To provide consultative services for hard of
hearing children of school age and the parents of the
children.

(2) The department may purchase services if it is not
feasible to provide and maintain a speech and hearing
rehabilitation center.

Section 2318-C. Cystic fibrosis program.
The department shall have the power and duty to conduct a
program of care and treatment of individuals suffering from
cystic fibrosis who are 21 years of age or older.

Section 2319-C. Investigators, subpoenas and warrants.

(a) Investigator.--The department may:

(1) Employ a competent person to:

(i) Render sanitary service and undertake or

supervise practical and scientific investigations and

examinations requiring expert skill.

(ii) Prepare plans and reports relative to an

investigation and examination under subparagraph (i).

(2) Purchase supplies and materials necessary to

carrying out the work of the department.

(b) Subpoena.--The department may issue a subpoena for the

examination, investigation and adjudication of the violation of

a statute or regulation administered by the department to secure

the attendance of an individual necessary to the matter or

proceeding and compel the individual to testify in a matter or

proceeding before the department.

(c) Order.--In the event of a public health emergency, as

determined by the Governor or the secretary, the department may

issue and deliver a disease control order to the appropriate law

enforcement organization for execution of the order. If required

by the order, the law enforcement organization shall

immediately, with or without a warrant, take the subject of the

disease control order to a facility or other location specified

in the order or ensure there is not ingress or egress from the

place of isolation or quarantine specified in the order, as

appropriate. The law enforcement organization may take

appropriate measures to enforce a disease control order against

each subject of the order. The law enforcement organization

shall provide a copy of the order to each subject of the order.
If it is impractical to provide a copy of the order to each
subject of the order, the law enforcement organization shall
communicate the order in any other manner reasonably likely to
reach the subjects of the order.

Section 2320-C. Cooperation in enforcing health laws.
A city, borough or township may cooperate with the following
in the administration and enforcement of this article and of the
rules and regulations of the department:

(1) The county in which the city, borough or township is
situated.

(2) Another political subdivision within the county.

(3) The department.

Section 2321-C. Anatomical gifts.
In addition to the powers and duties of the department
relating to anatomical gifts, the department shall continue the
rotation of referrals to tissue procurement providers started
under 20 Pa.C.S. Ch. 86 (relating to anatomical gifts).
Adjustments to the rotation may be made to accommodate new,
quality tissue procurement providers accredited by the American
Association of Tissue Banks or a successor organization, as
adjudged under the guidelines published in 26 Pa.B. 2044 (April
27, 1996). A hospital may discontinue the rotation for cause.

Section 2322-C. Programs and services for older adults.
(a) Powers and duties.--The department shall have the power
and duty to:

(1) Evaluate the need for services for older adults
within this Commonwealth and determine the extent to which
public and private programs meet the need with special
emphasis on the needs and participation of older adults who
are members of minority communities.
(2) Assist with planning and provide consultation to Commonwealth agencies with respect to services, programs and activities which the agencies may furnish to older adults.

(3) Develop and periodically update, in consultation with the council and the area agencies, a comprehensive plan for coordinating all major Commonwealth services, programs and activities which are directed towards an individual with a chronic physical or mental impairment which necessitates long-term care.

(4) Provide for services to older adults through area agencies and other appropriate agencies, organizations and institutions authorized under the Older Americans Act of 1965, related Federal acts and laws of this Commonwealth and stimulate services and opportunities for older adults which are not otherwise available.

(5) Function as the single State agency to receive and disburse Federal funds under the Older Americans Act of 1965 and Commonwealth funds made available for providing services to older adults.

(6) Develop and administer the State plan for the aging required by Federal law.

(7) Serve as an advocate for older adults at each level of government and provide consultation and assistance to the area agencies, communities and civic groups developing local services for older adults.

(8) Maintain a clearinghouse of information related to the interests of older adults and provide technical assistance and consultation to public and private agencies with respect to programs and services for older adults.

(9) Prepare for the Governor an annual budget as may be
reasonably required to address the needs of the council and
the regional councils.

(10) Promote, utilizing wherever possible the area
agencies, community education regarding the problems of older
adults through institutes, publications and use of
communications media.

(11) Cooperate with area agencies and agencies of the
Federal government in studies and conferences designed to
examine the needs of the older adult population of this
Commonwealth and to assist in preparing programs and
developing facilities to meet those needs.

(12) Promote and support programs, studies and policies,
in cooperation with the Department of Labor and Industry, the
Department of Education, the Department of Community and
Economic Development and other agencies, which will enhance
the opportunity for continued work, education and training
for older adults and for preretirement assistance where
appropriate.

(13) Promote, through the use of area agencies and
direct grants, contracts and technical assistance, the
development of independent senior centers, service
organizations, clubs, associations and organizations
dedicated to the rights and needs of older adults when the
development of independent senior centers, service
organizations, clubs, associations and organizations are not
in conflict with State or area plans for older adults.

(14) Make recommendations for legislative action
concerning older adults to the Governor and the General
Assembly.

(15) In coordination with the area agencies and the
council, develop and conduct research, demonstration programs
and training programs to advance the interests of older
adults.

(16) Publish a description of the organization and
function of the department so that interested agencies and
individuals may be better able to solicit assistance from the
department.

(17) Administer and supervise a domiciliary care
program.

(18) Conduct, in cooperation with appropriate
Commonwealth and local public and private agencies, studies
and evaluations pertaining to the quality of life, health and
social needs, civil rights and status of older adults
residing in personal care homes and similar residencies and
report the findings and recommendations to the General
Assembly.

(19) (i) In cooperation with the area agencies and
Federal, Commonwealth and local organizations and
agencies, work toward the development of community-based
service and housing options designed to maintain impaired
and chronically ill older adults in the community and
avoid or delay institutional care as described in section
2325-C(b)(1).

(ii) To the extent that the needs of other adults
involve and overlap the needs of older adults addressed
by this paragraph, the department shall serve as an
advocate for adults of all ages.

(20) Develop and administer a system of preadmission
assessment for older adults who are at risk of needing
institutional care, if the Governor finds the system cost
effective.

(21) Develop and administer a system of managed community-based long-term care for older adults who are assessed as being clinically eligible for nursing home care and who can be cared for within cost-of-care guidelines established by the department, if the Governor finds the system cost effective.

(22) Review all proposed Commonwealth program plans and policies and administrative regulations that are published in the Pennsylvania Bulletin for their impact on older adults.

(23) At the option of the secretary, administer special transit programs for older adults as may be authorized by the laws of this Commonwealth.

(24) Serve as an advocate for the needs of adults with disabilities as the needs involve and overlap the needs and services of older adults.

(25) Review the activities of regulatory agencies of the Commonwealth which affect the full and fair utilization of Commonwealth and community resources for programs and benefits for older adults and initiate programs which will help assure the utilization.

(26) Conduct periodic studies and evaluations pertaining to the quality of care and related services for consumers of long-term care services and report the findings to the General Assembly.

(27) Conduct an ongoing Statewide prescription drug education program designed to inform older adults of the dangers of prescription drug abuse and misuse.

(28) Establish and administer a State Long-Term Care Ombudsman Program, including providing resources to area
agencies or other contractors to investigate and resolve complaints related to the health, safety or rights of older adults who are consumers of long-term care services and to prepare and submit to the General Assembly an annual report containing data and findings regarding the types of problems experienced and complaints investigated.

(29) Collaborate with the Department of Community and Economic Development and the Pennsylvania Housing Finance Agency in the location, design, management and services of housing built for older adults and upon request provide technical assistance to local housing authorities, nonprofit housing and community groups, redevelopment authorities and other groups with a special emphasis on programs on utility costs, rehabilitation and maintenance of the homes of older adults.

(30) Provide for services to adults under 60 years of age whose needs for services are similar to those for which the department is responsible with respect to older adults and as may be specifically authorized by law.

(b) Objective.—The objectives of the programs and services for older adults are as follows:

(1) To effect the maximum feasible coordination of, and eliminate duplication in, the Commonwealth's administration of certain Federal and State programs for older adults.

(2) To further promote the efficient delivery of certain social and other services to older adults.

(3) To promote the creation and growth of independent clubs and associations of older adults and related activities which assist older adults in maintaining lives of independence and dignity, involvement in the social, economic
and political affairs of their communities and dignified and efficient assistance when disabled or impaired.

Section 2323-C. Planning and service areas.

(a) Establishment.--The geographical planning and service areas established by the authority of the secretary under the Older Americans Act of 1965 may only be changed by order of the secretary to bring about more effective and efficient planning and service delivery.

(b) Designated area agencies.--For each planning and service area there shall be an area agency designated by the department in accordance with the Older Americans Act of 1965 to serve as a focal point in the community for the coordination of services for older adults and for the issues and concerns of aging. An area agency designated by the department must be one of the following:

(1) An established office of aging.

(2) An office or agency of a unit of general purpose local government, which is designated for this purpose by the chief elected officials of the unit of general purpose local government.

(3) An office or agency designated by the chief elected officials of a combination of units of general purpose local government to act on behalf of the combination for this purpose.

(4) A public or nonprofit private agency in a planning and service area which is under the supervision or direction for this purpose of the designated Commonwealth agency, which can engage in the planning or provision of a broad range of social services within the planning and service area and which can provide adequate assurance, as determined by
the department, that it will have the ability to develop and
administer an area plan.

(c) Designation and redesignation.--The secretary may
redesignate or designate new area agencies based on regulations
promulgated by the department. The regulations shall include
criteria of efficiencies, appropriateness and equity and shall
provide for public hearings on redesignation conducted in the
affected planning and service areas. The determinations of
redesignation shall be executed not less than 100 days prior to
the beginning of the fiscal year of the local authority. A
designation or redesignation may occur when changes are made in
established planning and service area boundaries, when a
currently designated area agency is unable or unwilling to
continue as the area agency, when removal of an area agency
designation is requested by the local authority with cause shown
or when the department determines that a currently designated
area agency is incapable of carrying out the approved area plan.
The removal of an area agency designation and the designation of
a new area agency shall be carried out under regulations
promulgated by the department and consistent with the Older
Americans Act of 1965.

Section 2324-C.  (Reserved).

Section 2325-C.  Area agencies and powers and duties.

(a) Authority.--The area agency shall have the authority to
act as an advocate at all levels of government and within the
community at large for the interests of older adults within the
planning and service area. The area agency shall develop a
comprehensive area plan to coordinate services for older adults
within the planning and service area as the department may
prescribe by regulation. The area plan shall make provision for
the following:

(1) Information about and referral to advocacy programs.

(2) Social service case management and casework services including protective services and placement services.

(3) Transportation services.

(4) Legal counseling and representation.

(5) In-home services including personal care and health-related services.

(6) Assistance to secure adequate housing and health services.

(7) Other services required by Federal law and other services and activities designated by the department or identified as critical needs by the area agency and the area agency advisory board. The State plan on aging and grants and contracts provided by the department shall reasonably accommodate the locally designated priorities and critical needs.

(8) The establishment of an affiliated network of multiservice centers and neighborhood centers for older adults. Each center shall provide those services required by the department in accordance with regulations promulgated by the department, which regulations shall provide for the maximum involvement of members of the centers and sponsoring organizations in the identification and prioritization of services and activities to be conducted in the centers.

(b) Duties.—

(1) The area agency shall be responsible for working toward the development, in cooperation with Commonwealth and local organizations and agencies, of community-based service and housing options designed to maintain impaired and
chronically ill older adults in the community and avoid or
delay institutional care. System development activities shall
include, but not be limited to, coordinating area plans for
the provision, expansion and effective administration of:
(i) Personal care and health-related services
provided to older adults in their homes.
(ii) Housing options including service-assisted
housing and personal care homes.
(iii) Special supports to caregivers who care for
impaired older adults.
(iv) Adult day-care services, respite services and
other community-based services to support care by
caregivers.
(v) The promotion of informal community supports.
(vi) Geriatric assessment and nursing home screening
programs.
(vii) Special services to protect the health, safety
and welfare of older adults who lack the capacity to
protect themselves.
(viii) Special advocacy efforts to promote greater
awareness of, and more effective response to, the
problems of individuals with Alzheimer's disease and
other related brain disorders.
(2) To the extent that the needs of other adults involve
and overlap the needs of older adults addressed under this
subsection, the area agency shall serve as an advocate for
adults of all ages.
(c) Priority.--The area agency shall give priority of
services to older adults with the greatest need and least
resources. The following factors shall be considered when
identifying older adults entitled to priority:

(1) Severe restriction of ability to carry out daily activities or other functional disabilities.
(2) Living alone in a private apartment or home.
(3) Seventy-five years of age or older.
(4) Low income.
(5) The availability of services to minorities in proportion to their numbers consistent with the provisions of the act of October 27, 1955 (P.L.744, No.222), known as the Pennsylvania Human Relations Act.
(6) Inadequate housing.
(7) Lack of access to recreational and social activities.

(d) Preference.--The area agency shall provide preference in filling all jobs for older adults in accordance with the regulations promulgated by the department.

(e) Contracting.--Consistent with the Older Americans Act of 1965 and rules, regulations and guidelines of the department, the area agency may grant to or contract with a public or private agency for the provision of social services. The area agency is authorized to use the services, equipment, personnel and facilities of Federal and Commonwealth agencies, with or without reimbursement, and on a similar basis to cooperate with other public and private agencies, and instrumentalities, in the use of services, equipment and facilities.

Section 2326-C. Area Agency Advisory Councils.

In each planning and service area, an advisory council of at least 15 members shall be appointed to advise the area agency with regard to the needs of older adults residing in the planning and service area and the area agency's responses to
those needs. The composition and responsibility of each area
agency advisory council shall be consistent with the provisions
of the Older Americans Act of 1965 and the regulations of the
department. At a minimum, the regulations shall require that
each council be composed of a majority of older adults. The
councils shall be given the maximum possible opportunity to
influence local programs and policies and advocacy roles within
area agency programs and local communities. Area agencies shall
provide advisory councils with funds necessary to carry out
their functions.

Section 2327-C. Area agencies and reports and plans.
(a) Comprehensive area plan on aging.--Each area agency
shall submit to the department a comprehensive area plan on
aging which clearly explains the area agency's objectives for
providing services to the older adults of the planning and
service area. If the format is approved by the department, the
plan may be submitted as part of a coordinated county human
service plan.
(b) Annual report.--Each area agency shall submit to the
department an annual report which describes and evaluates its
programs and services after the close of each year of funding by
the department.

Section 2328-C. Allocation of resources.
(a) Allocation.--The area agency shall receive a basic
allocation of resources, consisting of Federal and Commonwealth
funds weighted by the proportion of poor older adults who reside
in the planning and service area in relation to the total number
of poor older adults who reside in this Commonwealth utilizing
poverty threshold income standards as determined by the United
States Office of Management and Budget. Each area agency shall
be held harmless to the amount of Commonwealth funds received in
the preceding program year.

(b) Additional allocations.--The department may allocate
additional resources to area agencies based upon:
(1) the total number of older adults who reside within
the planning and service area;
(2) the availability of transportation services;
(3) the rural-urban distribution of older adults and
attendant rural program cost differentials;
(4) the need for social and medical services; and
(5) the amount of funds provided by the authorities for
older adults and other special circumstances as determined by
the department.

(c) Distribution.--Funds appropriated to carry out the
provisions of this article shall be distributed to local
authorities or nonprofit agencies as grants or cost
reimbursement for services to older adults if there is an
acceptable plan in accordance with section 2325-C.
Section 2329-C. Evaluation.
The department shall continually review and evaluate the
activities of area agencies and the impact and effectiveness of
all programs under this article. The department shall ensure
that evaluations, including an onsite evaluation, be made
annually of all area agency activities and programs. A written
report of the findings of the evaluation shall be submitted to
the area agency subject to the evaluation and within 30 days
shall be available to the public. In all evaluations, the
department shall obtain the views of program beneficiaries
concerning strengths and weaknesses of the program. Other
departments and agencies of the Commonwealth shall make
available to the department information necessary for the
evaluations. Annually the department shall submit to the
Governor and the General Assembly a report on its activities
including statistical data reflecting services and activities
provided older persons during the preceding fiscal year.

Section 2330-C. Demonstration programs.

In recognition of the need for expanded knowledge and
experience concerning the status of older adults, the department
may establish research and demonstration programs for the
purpose of:

(1) Studying current living conditions and needs of
older adults, with special emphasis on adults with low
income, medical and functional disabilities, advanced age and
isolated living situations.

(2) Studying existing methods and alternatives for
providing services, programs and opportunities to older
adults.

(3) Identifying those factors of particular detriment or
benefit to the welfare of older adults.

(4) Developing new approaches and alternatives for
living arrangements, social services, institutional care,
health services, legal representation and the coordination of
community services for older adults.

Section 2331-C. Domestic violence and rape victim services.

(a) Findings.—The General Assembly finds that the public
health and safety is threatened by increasing incidences of
domestic violence and rape. Domestic violence programs and rape
crisis programs provide needed support services for victims and
assist in prevention through community education. It is in the
public interest of the Commonwealth to establish a mechanism to
provide financial assistance to domestic violence centers and rape crisis centers for the operation of domestic violence programs and rape crisis programs.

(b) Imposition of additional cost.--A person who, after the effective date of this section, pleads guilty or nolo contendere to or is convicted of a crime, in addition to all other costs, shall pay an additional cost of $10 for the purpose of funding services under this section. The money shall be paid to the State Treasurer to be deposited in the General Fund. A political subdivision shall not be liable for the payment of the $10 in additional costs.

(c) Grants.--The department shall award grants to domestic violence centers and rape crisis centers for the operation of domestic violence programs and rape crisis programs consistent with this section. In awarding grants, the department shall consider the population to be served, the geographic area to be served, the scope of the services, the need for services and the amount of funds provided from other sources.

(d) Applications.--The department shall make available to the public, at cost, copies of applications that have been submitted or approved for funding under this section and reports on fiscal or programmatic reviews of funded programs.

(e) Definition.--As used in this section, the term "crime" shall mean an act committed in this Commonwealth which, if committed by a mentally competent, criminally responsible adult, who had no legal exemption or defense, would constitute a crime as defined in and proscribed by 18 Pa.C.S. (relating to crimes and offenses) or enumerated in the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act. The term shall not include an act
involving the operation of a motor vehicle which results in injury unless the injury was intentionally inflicted through the use of a motor vehicle.

Section 2332-C. Human services advisory committees.

(a) Advisory committees.--The department shall appoint and maintain the following advisory committees which shall include representatives of public and private agencies, recipients of services, family members, service providers and advocates:

(1) A medical assistance advisory committee.
(2) An income maintenance advisory committee.
(3) An intellectual disabilities and autism advisory committee.
(4) A mental health advisory committee.
(5) A child welfare advisory committee.

(b) Powers and duties.--An advisory committee shall have the power and duty to:

(1) Advise the appropriate major program unit within the department. This advice shall include, but shall not be limited to, the following:
   (i) Standards of eligibility.
   (ii) Nature and extent of service.
   (iii) Amounts of payments to individuals.
   (iv) Standards of approval, certification and licensure of institutions and agencies.
   (v) The coordination of public and private human services activities.
   (vi) Other matters as may, by law, require citizen review or may be referred to the committees.

(2) Arrange for and conduct public hearings as may be required by law or which an advisory committee deems
necessary and advisable.

(3) Promote better public understanding of the programs and objectives of the departmental units advised by them.

(4) Carry out the functions of advisory committees as otherwise provided by law.

(c) Mental health advisory committee.--The mental health advisory committee shall have the power and duty to advise the Governor and the secretary with regard to the appointment of the Commissioner of Mental Health under the act of July 9, 1987 (P.L.207, No.32).

Section 6. Transfers shall be effectuated as follows:

(1) The functions, personnel, allocations, appropriations, equipment, supplies, records, contracts, grants, agreements, rights and obligations of the Department of Aging, the Department of Drug and Alcohol Programs, the Department of Health, the Department of Human Services or the Department of Public Welfare shall be transferred to the Department of Health and Human Services. Upon completion, the transfers under this paragraph shall have the same effect as if the subjects of transfers had originally been those of the Department of Health and Human Services.

(2) Personnel transferred under paragraph (1) shall retain the same employment status held prior to transfer. This paragraph includes:

   (i) Civil Service classification.

   (ii) Seniority.

   (iii) Benefits.

   (iv) Perquisites.

(3) Activities initiated under Articles XXI, XXII-A, XXIII or XXIII-A of the act or under the act of April 27,
1905 (P.L. 312, No. 218), entitled, "An act creating a
Department of Health, and defining its powers and duties,"
shall continue and remain in full force and effect and may be
completed under Article XXIII-C of the act.

(4) Orders, regulations, rules and decisions which were
made under Articles XXI, XXII-A, XXIII or XXIII-A of the act
or under Act 218 of 1905 and which are in effect on the
effective date of section 8 of this act shall remain in full
force and effect until revoked, vacated or modified under
Article XXIII-C of the act.

(5) Contracts, grants, agreements, obligations and
collective bargaining agreements entered into under Articles
XXI, XXII-A, XXIII or XXIII-A of the act or under Act 218 of
1905 are not affected nor impaired by repeals under this act.

(6) If a State government entity includes membership by
more than one secretary under section 7(2), the Secretary of
Health and Human Services shall serve as one affected member
and shall designate the other affected members.

Section 7. The following apply to references:

(1) A reference in a statute or regulation to the
Department of Aging, the Department of Drug and Alcohol
Programs, the Department of Health, the Department of Human
Services or the Department of Public Welfare shall be deemed
a reference to the Department of Health and Human Services.

(2) A reference in a statute or regulation to the
Secretary of Aging, the Secretary of Drug and Alcohol
Programs, the Secretary of Health, the Secretary of Human
Services or the Secretary of Public Welfare shall be deemed a
reference to the Secretary of Health and Human Services.

Section 8. Repeals are as follows:
(1) The General Assembly declares that the repeal under paragraph (2) is necessary to effectuate the addition of Article XXIII-C of the act.

(2) The act of April 27, 1905 (P.L.312, No.218), entitled, "An act creating a Department of Health, and defining its powers and duties."

Section 9. The Secretary of Aging, the Secretary of Drug and Alcohol Programs, the Secretary of Health and the Secretary of Human Services and the employees of the Department of Aging, the Department of Drug and Alcohol Programs, the Department of Health and the Department of Human Services shall cooperate in the transfers under section 6 of this act and other transition activities required to implement Article XXIII-C of the act. Upon completion of those transfers and transition activities deemed necessary to implement Article XXIII-C of the act, the Governor shall submit a notice to that effect for publication in the Pennsylvania Bulletin.

Section 10. This act shall take effect as follows:

(1) The following provisions shall take effect immediately:

(i) Section 6(1), (2), (3), (4) and (5) of this act.
(ii) Section 9 of this act.
(iii) This section.

(2) The remainder of this act shall take effect upon publication of the notice under section 9 of this act.